



Employee Reference Copy W-2 Wage and Tax Statement 2021 Copy C for employee's records. OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only
000034	R3/7EZ		8
c Employer's name, address, and ZIP code			
DAMIAN CONSULTING INC 5800 CAMPUS CIR DR E STE150A IRVING, TX 75063 2701 Batch #91264			
e/f Employee's name, address, and ZIP code			
KALYAN BOPPANA 7865 OXER DR IRVING, TX 75063			
b Employer's FED ID number	a Employee's SSA number		
11-3738177	XXX-XX-3126		
1 Wages, tips, other comp.	2 Federal income tax withheld		
39670.00	5988.95		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2
Gross Pay	39,670.00	39,670.00	39,670.00
Reported W-2 Wages	39,670.00	0.00	0.00

2. Employee Name and Address.

KALYAN BOPPANA
7865 OXER DR
IRVING, TX 75063

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c Employer's name, address, and ZIP code			
DAMIAN CONSULTING INC 5800 CAMPUS CIR DR E STE150A IRVING, TX 75063 2701			
b Employer's FED ID number	a Employee's SSA number		
11-3738177	XXX-XX-3126		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
e/f Employee's name, address and ZIP code			
KALYAN BOPPANA 7865 OXER DR IRVING, TX 75063			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		
Federal Filing Copy W-2 Wage and Tax Statement 2021 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008			

1 Wages, tips, other comp.	2 Federal income tax withheld		
39670.00	5988.95		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number	Dept.	Corp.	Employer use only
000034	R3/7EZ		8
c Employer's name, address, and ZIP code			
DAMIAN CONSULTING INC 5800 CAMPUS CIR DR E STE150A IRVING, TX 75063 2701			
b Employer's FED ID number	a Employee's SSA number		
11-3738177	XXX-XX-3126		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a		
14 Other	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
e/f Employee's name, address and ZIP code			
KALYAN BOPPANA 7865 OXER DR IRVING, TX 75063			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		
State Reference Copy W-2 Wage and Tax Statement 2021 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

1 Wages, tips, other comp.	2 Federal income tax withheld		
39670.00	5988.95		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number	Dept.	Corp.	Employer use only
000034	R3/7EZ		8
c Employer's name, address, and ZIP code			
DAMIAN CONSULTING INC 5800 CAMPUS CIR DR E STE150A IRVING, TX 75063 2701			
b Employer's FED ID number	a Employee's SSA number		
11-3738177	XXX-XX-3126		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a		
14 Other	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
e/f Employee's name, address and ZIP code			
KALYAN BOPPANA 7865 OXER DR IRVING, TX 75063			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		
City or Local Reference Copy W-2 Wage and Tax Statement 2021 Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008			