

**Employee Reference Copy**  
**W-2 Wage and Tax Statement 2021**  
OMB No. 1545-0008

Copy C for employer's records

d Control number	Dept.	Corp.	Employer use only
000176	RG/6TY		15

c Employer's name, address, and ZIP code  
**INFOSPAN INC**  
**PO BOX 2427**  
**FAIRFAX, VA 22031**

Batch #91605

e/f Employee's name, address, and ZIP code  
**SANDEEP KONDLA**  
**5490 S MIAMI BLVD**  
**APT 301**  
**DURHAM, NC 27703**

b Employer's FED ID number	a Employee's SSA number
80-0100877	XXX-XX-7238

1 Wages, tips, other comp.	2 Federal income tax withheld
10521.10	871.65
3 Social security wages	4 Social security tax withheld
10521.10	652.31
5 Medicare wages and tips	6 Medicare tax withheld
10521.10	152.56
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.
VA 30800100877F001	10521.10
17 State income tax	18 Local wages, tips, etc.
422.38	
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	VA State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	11,152.00	11,152.00	11,152.00	11,152.00
Less Other Cafe 125	630.90	630.90	630.90	630.90
<b>Reported W-2 Wages</b>	<b>10,521.10</b>	<b>10,521.10</b>	<b>10,521.10</b>	<b>10,521.10</b>

2. Employee Name and Address.

**SANDEEP KONDLA**  
**5490 S MIAMI BLVD**  
**APT 301**  
**DURHAM, NC 27703**

© 2021 ADP, Inc.

**Federal Filing Copy**  
**W-2 Wage and Tax Statement 2021**  
OMB No. 1545-0008

Copy B to be filed with employee's Federal Income Tax Return.

1 Wages, tips, other comp.	2 Federal income tax withheld		
10521.10	871.65		
3 Social security wages	4 Social security tax withheld		
10521.10	652.31		
5 Medicare wages and tips	6 Medicare tax withheld		
10521.10	152.56		
d Control number	Dept.	Corp.	Employer use only
000176	RG/6TY		15

c Employer's name, address, and ZIP code  
**INFOSPAN INC**  
**PO BOX 2427**  
**FAIRFAX, VA 22031**

b Employer's FED ID number	a Employee's SSA number
80-0100877	XXX-XX-7238

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	
<b>SANDEEP KONDLA</b> <b>5490 S MIAMI BLVD</b> <b>APT 301</b> <b>DURHAM, NC 27703</b>	
15 State Employer's state ID no.	16 State wages, tips, etc.
VA 30800100877F001	10521.10
17 State income tax	18 Local wages, tips, etc.
422.38	
19 Local income tax	20 Locality name

**VA State Reference Copy**  
**W-2 Wage and Tax Statement 2021**  
OMB No. 1545-0008

Copy 2 to be filed with employee's State Income Tax Return.

1 Wages, tips, other comp.	2 Federal income tax withheld		
10521.10	871.65		
3 Social security wages	4 Social security tax withheld		
10521.10	652.31		
5 Medicare wages and tips	6 Medicare tax withheld		
10521.10	152.56		
d Control number	Dept.	Corp.	Employer use only
000176	RG/6TY		15

c Employer's name, address, and ZIP code  
**INFOSPAN INC**  
**PO BOX 2427**  
**FAIRFAX, VA 22031**

b Employer's FED ID number	a Employee's SSA number
80-0100877	XXX-XX-7238

7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a
	12b
	12c
	12d
	13 Stat emp./Ret. plan/3rd party sick pay
e/f Employee's name, address and ZIP code	
<b>SANDEEP KONDLA</b> <b>5490 S MIAMI BLVD</b> <b>APT 301</b> <b>DURHAM, NC 27703</b>	
15 State Employer's state ID no.	16 State wages, tips, etc.
VA 30800100877F001	10521.10
17 State income tax	18 Local wages, tips, etc.
422.38	
19 Local income tax	20 Locality name

**VA State Filing Copy**  
**W-2 Wage and Tax Statement 2021**  
OMB No. 1545-0008

Copy 2 to be filed with employee's State Income Tax Return.

1 Wages, tips, other comp.	2 Federal income tax withheld		
10521.10	871.65		
3 Social security wages	4 Social security tax withheld		
10521.10	652.31		
5 Medicare wages and tips	6 Medicare tax withheld		
10521.10	152.56		
d Control number	Dept.	Corp.	Employer use only
000176	RG/6TY		15

c Employer's name, address, and ZIP code  
**INFOSPAN INC**  
**PO BOX 2427**  
**FAIRFAX, VA 22031**

b Employer's FED ID number	a Employee's SSA number
80-0100877	XXX-XX-7238

7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a
	12b
	12c
	12d
	13 Stat emp./Ret. plan/3rd party sick pay
e/f Employee's name, address and ZIP code	
<b>SANDEEP KONDLA</b> <b>5490 S MIAMI BLVD</b> <b>APT 301</b> <b>DURHAM, NC 27703</b>	
15 State Employer's state ID no.	16 State wages, tips, etc.
VA 30800100877F001	10521.10
17 State income tax	18 Local wages, tips, etc.
422.38	
19 Local income tax	20 Locality name