2021 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement Copy C for employee's records.
d Control number

Corp. Employer use only 000072 PHIL/SVB

Employer's name, address, and ZIP code

IT CATS LLC DBA INFOWAY SOFTWARE 388 WASHINGTON RD SAYREVILLE NJ 08872

Batch #00618

e/f Employee's name, address, and ZIP code PAVAN KUMAR KOLANUPAKA 1498 E SANTIAGO LN APT # 12 SALT LAKE CITY UT 84121

5/	ALI	LA	\ E	CITY	UI	- 7	3412	:1				
b	Emplo	yer's	FED	ID numb	er	а	Emp	loy	ee's	SSA	A numbe	r
		32-	0131	L107		XXX-XX-3671						
1	Wages	s, tips	s, othe	er comp		2	Fede	ral	inco	me	tax withl	neld
			1	3000.	00						2370	.75
3	Social	secu	rity w	ages		4	Soci	al s	secu	rity	tax withh	eld
5	Medic	are w	ages	and tips	,	6	Medi	car	e ta	x wii	thheld	
7	Social	secu	rity ti	ps		8	Allo	ate	d ti	ps		
9						10	Depe	nde	nt c	are	benefits	
11	Nonqu	alified	l plar	ıs		12a	See	insti 	ructio	nsfo	r box 12	
14	Other					121		<u> </u>				
'*	Other					120	•					
						120	t					
						13	State	emp	Ret.	plan	3rd party	sick pay
15	State	Emp	loyer's	state	ID no.	16	State	w	ages	, tip	s, etc.	
UT 12947256002WTH							13000	.00				
17	State	incom	e tax			18	Loca	l w	ages	, tip	s, etc.	
				643.	50							
19	Local	incon	ne tax			20	Loca	lity	nan	ne		

1	Wages, tips, other of	omp.	2 Federal income tax withheld					
	13000.00			2370.75				
3	Social security wages			4 Social security tax withheld				
5	Medicare wages and tips			Medica	re tax withh	ield		
d	Control number	Dept.		Corp.	Employer	use only		
0.0	00072 PHIL/SVB				A	47		
	Empleyed's news			7ID	i.			

IT CATS LLC DBA INFOWAY SOFTWARE 388 WASHINGTON RD SAYREVILLE NJ 08872

b	Employer's FED ID number 32-0131107	a Employee's SSA number XXX-XX-3671
	32-0131107	MAX-MA-30/I
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
-,-		1.715
e/f	Employee's name, address an	id ZIP code

PAVAN KUMAR KOLANUPAKA 1498 E SANTIAGO LN **APT # 12** SALT LAKE CITY UT 84121

15 State	Employer's state ID no. 12947256002WTH	16 State wages, tips, etc.
UT	12947256002WTH	13000.00
17 State	e income tax	18 Local wages, tips, etc.
	643.50	
19 Loca	al income tax	20 Locality name

Federal Filing Copy Wage and Tax Statement OMB Copy B to be filed with employee's Federal Income Tax Retu

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	UT. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	13,000.00	13,000.00	13,000.00	13,000.00
Less Exempt Wages	N/A	13,000.00	13,000.00	N/A
Reported W-2 Wages	13,000.00	0.00	0.00	13,000.00

2. Employee Name and Address.

PAVAN KUMAR KOLANUPAKA 1498 E SANTIAGO LN APT # 12 SALT LAKE CITY UT 84121

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1 Wages, tips, other comp. 13000.00			2 Federal income tax withheld 2370.75						
3 Social security wages			4	4 Social security tax withheld					
5	Medicare wages and	l tips	6	Medic	are ta	x w	ithh	eld	
d	Control number	Dept.		Corp.	E	mploy	/er	use	only
00	0072 PHIL/SVB				A				47
DBA INFOWAY SOFTWARE 388 WASHINGTON RD SAYREVILLE NJ 08872									
b	Employer's FED ID 32-013110		а	Emplo	yee's XXX				
7	Social security tips		8	Alloca	ated ti	ips			
9			10	Deper	ndent	care	be	nefit	s
11	Nonqualified plans		12	a	1				
14	Other		121	b	l				
			120	C	ı				
			12	d	i i				
			13	Stat en	np. Ret.	plan	3rd	party	sick pay
e/f	Employee's name, a	ddress ar	nd 2	ZIP co	de				
PAVAN KUMAR KOLANUPAKA 1498 E SANTIAGO LN APT # 12									

SALT LAKE CITY UT 84121

15 State Employer's state ID no	16 State wages, tips, etc.
UT 12947256002WTH	13000.00
17 State income tax	18 Local wages, tips, etc.
643.50	
19 Local income tax	20 Locality name

UT State Reference Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return

1	Wages, tips, other of	omp.	2	2 Federal income tax withheld				
	130	00.00			2	370.75		
3	3 Social security wages			Social	security tax	withheld		
5	5 Medicare wages and tips			Medica	re tax withhe	eld		
d	Control number	Dept.		Corp.	Employer	use only		
00	0072 PHIL/SVB				A	47		
С	c Employer's name, address, and ZIP code							

IT CATS LLC DBA INFOWAY SOFTWARE 388 WASHINGTON RD SAYREVILLE NJ 08872

b	Employer's FED ID number	a Employee's SSA number
	32-0131107	XXX-XX-3671
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

PAVAN KUMAR KOLANUPAKA 1498 E SANTIAGO LN **APT # 12** SALT LAKE CITY UT 84121

15 State	Employer's state ID no.	16	State wages, tips, etc.
UT	12947256002WTH		13000.00
17 State	income tax	18	Local wages, tips, etc.
	643.50		
19 Local	income tax	20	Locality name
		l	

UT.State Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Retu