2021 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Employer use only 000420 RF/PMZ Employer's name, address, and ZIP code IPOLARITY LLC 200 CENTENNIAL AVE STE 204 PISCATAWAY, NJ 08854 Batch #90117 e/f Employee's name, address, and ZIP code RAGHAVENDRA GADHAMSETTY 4850 156TH AVE NE **APT 203** REDMOND, WA 98052 Employer's FED ID number a Employee's SSA number 45-3412032 XXX-XX-0481 Wages, tips, other comp. Federal income tax withheld 149151.30 16990.79 Social security wages Social security tax withheld 142800.00 8853.60 Medicare wages and tips 6 Medicare tax withheld 2162.69 149151.30 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other 13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. NC 600995663 149151.30

1	Wages, tips, other c	omp. 51.30	2 Federa	income tax withheld 16990.79		
3	Social security wage	98 00.00	4 Social	security tax withheld 8853.60		
5	5 Medicare wages and tips 149151.30		6 Medicare tax withheld 2162.69			
d	Control number	Dept.	Corp.	Employer use only		
0.0	00420 RF/PMZ			Α		
С	c Employer's name, address, and ZIP code					

18 Local wages, tips, etc.

20 Locality name

7379.00

17 State income tax

19 Local income tax

IPOLARITY LLC 200 CENTENNIAL AVE STE 204 PISCATAWAY, NJ 08854

b	Employer's FED ID number 45-3412032	a Employee's SSA number XXX-XX-0481
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 an	d ZIP code

RAGHAVENDRA **GADHAMSETTY** 4850 156TH AVE NE **APT 203** REDMOND, WA 98052

15 State NC	Employer's state ID no. 600995663	16 S 1	tate	wages,	tips, etc. 149151.30
17 State	income tax	18 L	ocal	wages,	tips, etc.
	7379.00				
19 Local	income tax	20 L	ocalit	y name	9

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. 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 Social Security Wages Box 1 of W-2 Box 3 of W-2		Medicare Wages Box 5 of W-2	NC. State Wages, Tips, Etc. Box 16 of W-2	
Gross Pay	163,998.00	163,998.00	163,998.00	163,998.00	
Less Other Cafe 125	14,846.70	14,846.70	14,846.70	14,846.70	
Less Wages Over Limit Reported W-2 Wages	N/A 149,151.30	6,351.30 142,800.00	N/A 149,151.30	N/A 149,151.30	

2. Employee Name and Address.

RAGHAVENDRA GADHAMSETTY 4850 156TH AVE NE APT 203 REDMOND, WA 98052

Federal income tax withheld

16990 79

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Wages, tips, other comp.

4850 156TH AVE NE

WA 98052

7379.00

NC.State Reference

Statement

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

Wage and Tax

5 State | Employer's state ID no. | 16 State wages, tips, etc. | 149151.30

18 Local wages, tips, etc.

Copy

20 Locality name

APT 203

REDMOND,

17 State income tax

19 Local income tax

149151 30

149151.30	10990.79		
3 Social security wages 142800.00	4 Social security tax withheld 8853.60		
5 Medicare wages and tips 149151.30	6 Medicare tax withheld 2162.69		
d Control number Dept.	Corp. Employer use only		
000420 RF/PMZ	A		
c Employer's name, address, a	nd ZIP code		
IPOLARITY LLC 200 CENTENNIAL PISCATAWAY, I	. AVE STE 204 NJ 08854		
b Employer's FED ID number 45-3412032	a Employee's SSA number XXX-XX-0481		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12 a		
14 Other	12b		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
e/f Employee's name, address a	nd ZIP code		
RAGHAVENDRA GAD	HAMSETTY		

3 Social security wages 142800.00	4 Social security tax withheld 8853.60
5 Medicare wages and tips 149151.30	6 Medicare tax withheld 2162.69
d Control number Dept.	Corp. Employer use only
000420 RF/PMZ	A
c Employer's name, address,	and ZIP code
IPOLARITY LLC 200 CENTENNIA PISCATAWAY,	L AVE STE 204
b Employer's FED ID number 45-3412032	a Employee's SSA number XXX-XX-0481
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 p
e/f Employee's name, address RAGHAVENDRA GAI 4850 156TH AVE NE APT 203 REDMOND, WA 9805 15 State Employer's state ID n 600995663 17 State income tax	DHAMSETTY E
7379.00	00.1.11
19 Local income tax	20 Locality name

1	Wages,	tips, other c		2	Federal	income tax 16	withheld 990.79
3	Social s	ecurity wage 14280	es 00.00	4	Social	security tax	withheld 853.60
5	Medicare	wages and 1491	tips 51.30	6	Medica	re tax withhe	162.69
d	Control	number	Dept.		Corp.	Employer	use only
0 0	0420	RF/PMZ				Α	

b	Employer's FED ID number 45-3412032	a Employee's SSA number XXX-XX-0481				
7	Social security tips	8 Allocated tips				
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15 State NC	Employer's state ID no. 600995663	16	State	wages, tips, etc. 149151.3	30
17 State	income tax	18	Local	wages, tips, etc.	
	7379.00				
19 Local	income tax	20	Local	ity name	

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