



W-2 Wage and Tax Statement
 Copy C for employee's records.
 Reference Copy 2021
 OMB No. 1545-0008

d Control number	Dept.	Corp.	Employer use only
000113 ATLA/85Y			T 45

c Employer's name, address, and ZIP code
SOLUTIONSOFT INC
5 COMPUTER DR WEST #204
ALBANY NY 12205

Batch #04477

e/f Employee's name, address, and ZIP code
RUPINI MUDDIDI
80 NORTHEAST 14TH AVENUE
APT 436
PORTLAND OR 97232

b Employer's FED ID number	a Employee's SSA number
84-1764320	XXX-XX-6166
1 Wages, tips, other comp.	2 Federal income tax withheld
31099.44	4062.44
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 27.60 ORSTT W/H	12b
	12c
	12d
	13 Stat emp Ret. plan 3rd party sick pay
15 State Employer's state ID no.	16 State wages, tips, etc.
OR 01784662-7	31099.44
17 State income tax	18 Local wages, tips, etc.
2475.34	
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	OR. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	31,099.44	31,099.44	31,099.44	31,099.44
Less Exempt Wages	N/A	31,099.44	31,099.44	N/A
Reported W-2 Wages	31,099.44	0.00	0.00	31,099.44

2. Employee Name and Address.

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e/f Employee's name, address and ZIP code RUPINI MUDDIDI 80 NORTHEAST 14TH AVENUE APT 436 PORTLAND OR 97232	15 State Employer's state ID no. OR 01784662-7	16 State wages, tips, etc. 31099.44	
17 State income tax 2475.34	18 Local wages, tips, etc.		
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Federal Filing Copy
W-2 Wage and Tax Statement
 Copy B to be filed with employee's Federal Income Tax Return.
 OMB No. 1545-0008

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OR.State Reference Copy
W-2 Wage and Tax Statement
 Copy 2 to be filed with employee's State Income Tax Return.
 OMB No. 1545-0008

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