## 2021 W-2 and EARNINGS SUMMARY



Employee Reference Сору Wage and Tax Statement Dept 000087 R8/IKJ

Employer's name, address, and ZIP code AVENTERPRISE INC 1415 HAWCREEK CIRCLE UNIT 202 CUMMING, GA 30041

Batch #99238

e/f Employee's name, address, and ZIP code

GOUTHAMI NAGEELY 5332 BLEECKER ST

APT # 211

| 20-2850866 XXX<br>1 Wages, tips, other comp.<br>78566.00 2 Federal inc                        | 1139.21  |  |  |
|---|--|--|--|
| 78566.00  3 Social security wages 78566.00  5 Medicare wages and tips 78566.00  6 Medicare te | 7410.71<br>rity tax withheld<br>4871.09<br>x withheld<br>1139.21 |  |  |
| 3 Social security wages 78566.00 5 Medicare wages and tips 78566.00 6 Medicare ta             | rity tax withheld<br>4871.09<br>x withheld<br>1139.21            |  |  |
| 78566.00  5 Medicare wages and tips 78566.00  6 Medicare te                                   | 4871.09<br>x withheld<br>1139.21                                 |  |  |
| 78566.00  | 1139.21  |  |  |
| 7 Social security tips 8 Allocated ti   | ps   |  |  |
|   |  |  |  |
| 9 10 Dependent  | are benefits   |  |  |
| 11 Nonqualified plans   12a See instructi   | onsfor box 12  |  |  |
| 14 Other 12b  |  |  |  |
| 12c   |  |  |  |
| 12d   |  |  |  |
| 13 Stat emp Ret   | plan 3rd party sick pa   |  |  |
| 15 State Employer's state ID no. 16 State wages VA 30202850866F001                            | , tips, etc.<br>78566.00   |  |  |
| 17 State income tax 18 Local wages 3958.29  | , tips, etc.   |  |  |
| 19 Local income tax 20 Locality na  | 20 Locality name   |  |  |

Wages, tips, othe 78566.00 7410.71 wages 78566.00 6 Medicare tax withheld 1139.21 5 Medicare wages and tips 78566.00 Control number Employer use only 27 000087 R8/IKJ Employer's name, address, and ZIP code AVENTERPRISE INC 1415 HAWCREEK CIRCLE UNIT 202 CUMMING, GA 30041

Federal income tax withheld

Employer's FED ID number 20-2850866 XXX-XX-0671 Social security tips 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

GOUTHAMI NAGEELY 5332 BLEECKER ST APT # 211

VIRGINIA BEACH, VA 23462

16 State wages, tips, etc. 78566.00 5 State | Employer's state ID no. 30202850866F001 18 Local wages, tips, etc. 17 State income tax 3958.29 20 Locality name

Federal Filing Copy Wage and Tax Statement

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

Wages Box 5 of W-2

VA. State Wages, Tips, Etc. Box 16 of W-2

Gross Pay Reported W-2 Wages 78,566.00

78,566.00

78,566.00 78,566.00

78,566.00 78,566.00

78,566.00 78,566.00

2. Employee Name and Address.

**GOUTHAMI NAGEELY** 5332 BLEECKER ST APT # 211 VIRGINIĀ BEACH, VA 23462

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| 1 Wages, tips, other comp. 78566.00   |                | 2 Federal income tax withheld 7410.71  |       |          |          |
|---------------------------------------|----------------|--|-------|----------|----------|
| 3 Social security wages 78566.00      |                | 4 Social security tax withheld 4871.09 |       |          |          |
| 5 Medicare wages and tips<br>78566.00 |                | 6 Medicare tax withheld<br>1139.21     |       |          |          |
| d                                     | Control number | Dept.                                  | Corp. | Employer | use only |
| 00                                    | 0087 R8/IK     | г                                      |       | Α        | 27       |

c Employer's name, address, and ZIP code

AVENTERPRISE AVENTERPRISE INC 1415 HAWCREEK CIRCLE UNIT 202 CUMMING, GA 30041

| b  | Employer's FED ID number 20-2850866 | a Employee's SSA number XXX-XX-0671       |  |  |
|----|-------------------------------------|---|--|--|
| 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 |  |  |
|    |                                     | 1   |  |  |

e/f Employee's name, address and ZIP code

GOUTHAMI NAGEELY 5332 BLEECKER ST APT # 211 VIRGINIA BEACH, VA 23462

| 15 State   Employer's state ID no.   30202850866F001 | 16 State wages, tips, etc. 78566.00 |
|--|-------------------------------------|
| 17 State income tax                                  | 18 Local wages, tips, etc.          |
| 3958.29  |                                     |
| 19 Local income tax                                  | 20 Locality name                    |

VA.State Reference Wage and Tax Statement

| 1                                     | 1 Wages, tips, other comp. 78566.00 |                                    | 2 Federal income tax withheld 7410.71  |       |          |          |
|---------------------------------------|-------------------------------------|------------------------------------|--|-------|----------|----------|
| 3                                     | 3 Social security wages 78566.00    |                                    | 4 Social security tax withheld 4871.09 |       |          |          |
| 5 Medicare wages and tips<br>78566.00 |                                     | 6 Medicare tax withheld<br>1139.21 |  |       |          |          |
| d                                     | Control number                      | Dept.                              |  | Corp. | Employer | use only |
| 0.0                                   | 00087 R8/IKJ                        |                                    |  |       | Α        | 27       |

Employer's name, address, and ZIP code

**AVENTERPRISE** AVENTERPRISE INC 1415 HAWCREEK CIRCLE UNIT 202 CUMMING, GA 30041

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|-----|-------------------------------------|---|--|--|--|
| 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 a          | nd ZIP code                               |  |  |  |

**GOUTHAMI NAGEELY** 5332 BLEECKER ST APT # 211

VIRGINIA BEACH, VA 23462

| 15<br><b>V</b> | State<br>A | Employer's state ID no.<br>30202850866F001 | 16 | State wages, tips, etc. 78566.00 |
|----------------|------------|--|----|----------------------------------|
| 17             | State      | income tax                                 | 18 | Local wages, tips, etc.          |
|                |            | 3958.29                                    |    |                                  |
| 19             | Local      | income tax                                 | 20 | Locality name                    |
|                |            |  |    |                                  |

VA.State Filing Copy Wage and Tax Statement