## 2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Corp. Employer use only KG/BHM Employer's name, address, and ZIP code

ADDEPTO IT SOLUTIONS 11020 DAVID TAYLOR DR STE 201

CHARLOTTE, NC 28262

Batch #92589

a Employee's SSA number

6 Medicare tax withheld

12a See instructions for box 12

18 Local wages, tips, etc.

13 Stat emp. Ret. plan 3rd party sick pay

8 Allocated tips 10 Dependent care benefits

12b

XXX-XX-3005

16382.73

7464.87

1745.82

16382.73

Federal income tax withheld

Social security tax withheld

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

**GAYATHRIDEVI KONDA** 5314 CARNABY

ST#249

IRVING, TX 75038

Employer's FED ID number 83-3389649

Wages, tips, other comp. 120401.12

Social security wages 120401.12

Medicare wages and tips

120401.12

Social security tips

11 Nonqualified plans

14 Other

15 State Employer's state ID no. 16 State wages, tips, etc.

17 State income tax

19 Local income tax

Wages, tips, other cor

20 Locality name

Social security wages 120401.12 Social security tax withheld 7464.87 Medicare tax withheld 1745.82 Medicare wages and tips 120401.12 Control number Dept. Employer use only

120401.12

000057 KG/BHM

Employer's name, address, and ZIP code ADDEPTO IT SOLUTIONS LLC

11020 DAVID TAYLOR DR STE 201 CHARLOTTE, NC 28262

b	Employer's FED ID number 83-3389649	a Employee's SSA number XXX-XX-3005
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

**GAYATHRIDEVI KONDA** 5314 CARNABY ST#249

IRVING, TX 75038

15 State Employer's state ID no. 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 20 Locality name

19 Local income tax Federal Filing

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

Copy

Statement Copy 2 to be filed with employee's State 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 Box 1 of W-2

Social Security Wages Box 3 of W-2

Medicare Wages Box 5 of W-2

Gross Pay Reported W-2 Wages 120,401.12 120,401.12

120,401.12 120,401.12

120,401.12 120,401.12

2. Employee Name and Address.

GAYATHRIDEVI KONDA **5314 CARNABY** ST#249 IRVING, TX 75038

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1 Wages, tips, other comp. 120401.12			2 Federal income tax withheld 16382.73			
3 Social security wages 120401.12			4 Social security tax withheld 7464.87			
5 Medicare wages and tips 120401.12			6 Medicare tax withheld 1745.82			
d	Control number	Dept.	Corp.	Employer use only		
0.0	0057 KG/BHM			Α		

c Employer's name, address, and ZIP code ADDEPTO IT SOLUTIONS 11020 DAVID TAYLOR DR STE 201 CHARLOTTE, NC 28262

b	Employer's FED ID number 83-3389649	a Employee's SSA number XXX-XX-3005			
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

GAYATHRIDEVI **KONDA** 5314 CARNABY ST#249 IRVING, TX 75038

15	State	Employer's	state ID	<b>no.</b> 16	State	wages,	tips,	etc.
17	State	income tax		18	Local	wages,	tips,	etc.
19	Local	income tax		20	Local	ity nam	е	

State Reference Wage and Tax

1	Wages, tips, other	01.12	2	Federa	16382.73		
3	Social security wages 120401.12			4 Social security tax withheld 7464.87			
5	Medicare wages and tips 120401.12			6 Medicare tax withheld 1745.82			
d	Control number	Dept.		Corp.	Employer use only		
00	0057 KG/BHM				Α		
			-				

c Employer's name, address, and ZIP code

ADDEPTO IT SOLUTIONS 11020 DAVID TAYLOR DR STE 201 CHARLOTTE, NC 28262

b	Employer's FED ID number 83-3389649	a Employee's SSA number XXX-XX-3005				
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 party				

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

GAYATHRIDEVI **KONDA** 5314 CARNABY ST#249 IRVING, TX 75038

15	State	Employer's	state ID no.	16	State	wages, tips, etc.
17	State	income tax		18	Local	wages, tips, etc.
19	Local	income tax		20	Local	ity name

or Local Reference Wage and Tax Statement

Copy 2 to be filed with employee's City or Local Income Tax Return