

<b>22222</b>		Void <input type="checkbox"/>	<b>a</b> Employee's social security number 760-22-8899		For Official Use Only ! OMB No. 1545-0008	
<b>b</b> Employer identification number (EIN) 47-0964957			<b>1</b> Wages, tips, other compensation 98480.00		<b>2</b> Federal income tax withheld 23788.00	
<b>c</b> Employer's name, address, and ZIP code KEY CUBE CONSULTING LLC  15716 PROVINCIAL LN  FISHERS IN 56040			<b>3</b> Social security wages 98480.00		<b>4</b> Social security tax withheld 6105.76	
			<b>5</b> Medicare wages and tips 98480.00		<b>6</b> Medicare tax withheld 1427.96	
			<b>7</b> Social security tips		<b>8</b> Allocated tips	
<b>d</b> Control number			<b>9</b>		<b>10</b> Dependent care benefits	
<b>e</b> Employee's first name and initial MADHUKAR		Last name DONGALA	Suff	<b>11</b> Nonqualified plans		<b>12a</b> See instructions for box 12
<b>f</b> Employee's address and ZIP code  2000 MERCHANTS ROW BLVD APT 632 TALLAHASSEE FL 32311			<b>13</b> <small>Statutory employee</small> <small>Retirement plan</small> <small>Third-party sick pay</small>		<b>12b</b>	
			<b>14</b> Other Health 1486.80		<b>12c</b>	
					<b>12d</b>	
<b>15</b> State Employer's state ID number		<b>16</b> State wages, tips, etc.	<b>17</b> State income tax	<b>18</b> Local wages, tips, etc.	<b>19</b> Local income tax	<b>20</b> Locality name

Form **W-2** Wage and Tax Statement

**2022**  
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Department of the Treasury - Internal Revenue Service  
For Privacy Act and Paperwork Reduction  
Act Notice, see the separate instructions.

Copy A For Social Security Administration - Send this entire page with  
Form W-3 to the Social Security Administration; photocopies are not acceptable.

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