| Employee Reference Copy                                     |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| <b>\//_</b> ク Wage and Tax クククク                             |   |  |  |  |  |  |
| <b>VV-Z</b> Statement <b>ZUZZ</b>                           |   |  |  |  |  |  |
| Copy C for employee's records.                              |   |  |  |  |  |  |
| d Control number Dept.                                      | Corp. Employer use only                   |  |  |  |  |  |
| 000037 KY/DHG   | A 2                                       |  |  |  |  |  |
|   |   |  |  |  |  |  |
| c Employer's name, address, a                               | and ZIP code                              |  |  |  |  |  |
| EDGE CLOUD  | TECHNOLOGIES                              |  |  |  |  |  |
| INC   |   |  |  |  |  |  |
| 2735 VILLA CR   | EEK DR                                    |  |  |  |  |  |
| SUITE A-264   |   |  |  |  |  |  |
| FARMERS BRAI  | NCH, TX 75234 2710                        |  |  |  |  |  |
|   | Batch #91115                              |  |  |  |  |  |
|   |   |  |  |  |  |  |
| e/f Employee's name, address, a                             | and ZIP code                              |  |  |  |  |  |
| SAI JAHNAVI ANUMOLU   |   |  |  |  |  |  |
| 8618 VALLEY RANCH PARK                                      | WAY WEST                                  |  |  |  |  |  |
|   | WAT WEST                                  |  |  |  |  |  |
| 3078  |   |  |  |  |  |  |
| IRVING, TX 75063  |   |  |  |  |  |  |
| b Employer's FED ID number                                  | a Employee's SSA number                   |  |  |  |  |  |
| 86-1671513  | XXX-XX-4895                               |  |  |  |  |  |
| 1 Wages, tips, other comp.                                  | <sup>2</sup> Federal income tax withheld  |  |  |  |  |  |
| 54318.60  | 8436.13                                   |  |  |  |  |  |
| 3 Social security wages                                     | 4 Social security tax withheld            |  |  |  |  |  |
| 25207.44  | 1562.86                                   |  |  |  |  |  |
| 5 Medicare wages and tips                                   | 6 Medicare tax withheld                   |  |  |  |  |  |
| 25207.44  | 365.51                                    |  |  |  |  |  |
| 7 Social security tips                                      | 8 Allocated tips                          |  |  |  |  |  |
|   |   |  |  |  |  |  |
| 9   | 10 Dependent care benefits                |  |  |  |  |  |
|   |   |  |  |  |  |  |
| 11 Nonqualified plans                                       | 12a See instructions for box 12           |  |  |  |  |  |
| 44.00%  | 12b                                       |  |  |  |  |  |
| 14 Other  | 12c                                       |  |  |  |  |  |
|   | 12d                                       |  |  |  |  |  |
|   | 13 Stat emp. Ret. plan 3rd party sick pay |  |  |  |  |  |
| 15 State Employer's state ID no                             | 16 State wares tins etc                   |  |  |  |  |  |
| 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   | 00 Locality name                          |  |  |  |  |  |

## 2022 W-2 and EARNINGS SUMMARY



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<br>Compensation<br>Box 1 of W-2 | Social Security<br>Wages<br>Box 3 of W-2 | Medicare<br>Wages<br>Box 5 of W-2 |
|---------------------|--|--|-----------------------------------|
| Gross Pay           | 55,800.00  | 55,800.00                                | 55,800.00                         |
| Less Other Cafe 125 | 1,481.40   | 592.56                                   | 592.56                            |
| Reported W-2 Wages  | 54,318.60  | 25,207.44                                | 25,207.44                         |

2. Employee Name and Address.

SAI JAHNAVI ANUMOLU 8618 VALLEY RANCH PARKWAY WEST 3078 IRVING, TX 75063

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| · Manage  | 2 Federal income tax withheld             |  | 2 Federal income tax withheld             |  | 2 Federal income tax withheld             |
|---|---|--|---|--|---|
| 1 Wages, tips, other comp. 54318.60                 | 2 Federal Income tax withheid<br>8436.13  | 1 Wages, tips, other comp. 54318.60                    | 2 Federal Income tax withheid<br>8436.13  | 1 Wages, tips, other comp. 54318.60  | 2 Federal Income tax withheid<br>8436.13  |
| 3 Social security wages 25207.44                    | 4 Social security tax withheld<br>1562.86 | 3 Social security wages 25207.44                       | 4 Social security tax withheld<br>1562.86 | <sup>3</sup> Social security wages 25207.44  | 4 Social security tax withheld<br>1562.86 |
| 5 Medicare wages and tips<br>25207.44               | 6 Medicare tax withheld<br>365.51         | 5 Medicare wages and tips<br>25207.44                  | 6 Medicare tax withheld<br>365.51         | 5 Medicare wages and tips<br>25207.44  | 6 Medicare tax withheld<br>365.51         |
| d Control number Dept.                              | Corp. Employer use only                   | d Control number Dept.                                 | Corp. Employer use only                   | d Control number Dept.   | Corp. Employer use only                   |
| 000037 KY/DHG                                       | A 2                                       | 000037 KY/DHG  | A 2                                       | 000037 KY/DHG  | A 2                                       |
| c Employer's name, address, a                       | and ZIP code                              | c Employer's name, address, and ZIP code               |   | c Employer's name, address, and ZIP code   |   |
| EDGE CLOUD  | TECHNOLOGIES                              | EDGE CLOUD TECHNOLOGIES                                |   | EDGE CLOUD TECHNOLOGIES  |   |
|   |   |  |   |  |   |
| 2735 VILLA CRI<br>SUITE A-264                       | EER DR                                    | 2735 VILLA CRI<br>SUITE A-264                          | EER DR                                    | 2735 VILLA CRI<br>SUITE A-264  | EEK DR                                    |
|   | NCH, TX 75234 2710                        | FARMERS BRAN   | NCH. TX 75234 2710                        | FARMERS BRAN   | NCH. TX 75234 2710                        |
|   |   |  |   |  |   |
| b Employer's FED ID number                          | a Emplovee's SSA number                   | b Employer's FED ID number                             | a Employee's SSA number                   | b Employer's FED ID number   | a Employee's SSA number                   |
| 86-1671513  | XXX-XX-4895                               | 86-1671513   | XXX-XX-4895                               | 86-1671513   | XXX-XX-4895                               |
| 7 Social security tips                              | 8 Allocated tips                          | 7 Social security tips                                 | 8 Allocated tips                          | 7 Social security tips   | 8 Allocated tips                          |
| 9   | 10 Dependent care benefits                | 9  | 10 Dependent care benefits                | 9  | 10 Dependent care benefits                |
| 11 Nonqualified plans                               | 12a See instructions for box 12           | 11 Nonqualified plans                                  | 12a                                       | 11 Nonqualified plans  | 12a                                       |
| 14 Other  | 12b                                       | 14 Other   | 12b                                       | 14 Other   | 12b                                       |
|   | 12c                                       |  | 12c                                       |  | 12c                                       |
|   | 12d                                       |  | 12d                                       |  | 12d                                       |
|   | 13 Stat emp. Ret. plan 3rd party sick pay |  | 13 Stat emp. Ret. plan 3rd party sick pay |  | 13 Stat emp. Ret. plan 3rd party sick pay |
|   |   |  |   |  |   |
| e/f Employee's name, address ar                     | nd ZIP code                               | e/f Employee's name, address and ZIP code              |   | e/f Employee's name, address a   | nd ZIP code                               |
| SAI JAHNAVI ANUMOLU                                 |   | SAI JAHNAVI ANUMOLU                                    |   | SAI JAHNAVI ANUMOLU  |   |
| 8618 VALLEY RANCH PARK                              | WAY WEST                                  | 8618 VALLEY RANCH PARKWAY WEST                         |   | 8618 VALLEY RANCH PARKWAY WEST   |   |
| 3078  |   | 3078   |   | 3078   |   |
| IRVING, TX 75063                                    |   | IRVING, TX 75063                                       |   | IRVING, TX 75063   |   |
| 15 State Employer's state ID no                     | . 16 State wages, tips, etc.              | 15 State Employer's state ID no                        | . 16 State wages, tips, etc.              | 15 State Employer's state ID no  | . 16 State wages, tips, etc.              |
| 17 State income tax                                 | 18 Local wages, tips, etc.                | 17 State income tax                                    | 18 Local wages, tips, etc.                | 17 State income tax  | 18 Local wages, tips, etc.                |
| 19 Local income tax                                 | 20 Locality name                          | 19 Local income tax                                    | 20 Locality name                          | 19 Local income tax  | 20 Locality name                          |
| Federal Fi  | Federal Filing Copy State Reference Copy  |  | City or Local                             | Reference Copy   |   |
| W-2 Wage and Tax 2022<br>Statement OMB No. 1545-008 |   | W-2 Wage and Tax 20022<br>Statement COMB No. 1545-0008 |   | W-2 Wage and Tax 2022<br>Statement Copy 2 to be filed with employee's City or Local Income Tax Return. |   |
| sopy 5 to be med with employee's Th                 |   | sopy 2 to be med with employee solate                  |   | sopy 2 to be med with employee soily   | . Local moone fax netam.                  |