| Employee Ref | | | | | | | |
|---|--|--|--|--|--|--|--|
| | | | | | | | |
| Statem | ent OMB No. 1545-0008 | | | | | | |
| Copy C for employee'srecords. d Control number Dept. | Corp. Employer use only | | | | | | |
| 000492 RU/VSB | A Employer use only | | | | | | |
| c Employer's name, address, a | and ZIP code | | | | | | |
| WISSENIT INC | | | | | | | |
| 775 ADDISON AVENUE | | | | | | | |
| SUITE 102 | | | | | | | |
| ROCKHILL, SC | 29730 | | | | | | |
| | Batah #02424 | | | | | | |
| | Batch #93431 | | | | | | |
| e/f Employee's name, address, a | and ZIP code | | | | | | |
| KAVERI TAKKELLAPA | ті | | | | | | |
| 5606 BEECH TREE I | LANE | | | | | | |
| MAINEVILLE, OH 450 | 39 | | | | | | |
| | | | | | | | |
| b Employer's FED ID number | a Employee's SSA number | | | | | | |
| 82-4001510 1 Wages, tips, other comp. | 2 Federal income tax withheld | | | | | | |
| 99284.48 | 15352.39 | | | | | | |
| 3 Social security wages | 4 Social security tax withheld | | | | | | |
| 5 Medicare wages and tips | 6 Medicare tax withheld | | | | | | |
| 5 Medicare wages and ups | 6 Medicare tax withheid | | | | | | |
| 7 Social security tips | 8 Allocated tips | | | | | | |
| 9 | 10 Dependent care benefits | | | | | | |
| 3 | | | | | | | |
| 11 Nonqualified plans | 12a See instructions for box 12 | | | | | | |
| 14 Other | 12b | | | | | | |
| | 12c | | | | | | |
| | 120 13 Stat emp Ret. plan 3rd party sick pa | | | | | | |
| | | | | | | | |
| 15 State Employer's state ID no NC 601166271 | . 16 State wages, tips, etc. 99284.48 | | | | | | |
| 17 State income tax | 18 Local wages, tips, etc. | | | | | | |
| 4459.00 | | | | | | | |
| 19 Local income tax | 20 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 | Social Security | Medicare | NC. State Wages, |
|------------------------------|--------------------|-----------------|--------------|------------------|
| | Compensation | Wages | Wages | Tips, Etc. |
| | Box 1 of W-2 | Box 3 of W-2 | Box 5 of W-2 | Box 16 of W-2 |
| Gross Pay Reported W-2 Wages | 99,284.48 | 99,284.48 | 99,284.48 | 99,284.48 |
| | 99,284.48 | 0.00 | 0.00 | 99,284.48 |

2. Employee Name and Address.

KAVERI TAKKELLAPATI 5606 BEECH TREE LANE MAINEVILLE, OH 45039

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| 1 Wages, tips, other comp. 99284.48 | 2 Federal income tax withheld 15352.39 | 1 Wages, tips, other comp. 99284.48 | 2 Federal income tax withheld 15352.39 | 1 Wages, tips, other comp. 99284.48 | 2 Federal income tax withheld 15352.39 |
|--|---|---|---|--|--|
| 3 Social security wages | 4 Social security tax withheld | 3 Social security wages | 4 Social security tax withheld | 3 Social security wages | 4 Social security tax withheld |
| 5 Medicare wages and tips | 6 Medicare tax withheld | 5 Medicare wages and tips | 6 Medicare tax withheld | 5 Medicare wages and tips | 6 Medicare tax withheld |
| d Control number Dept. 000492 RU/VSB | Corp. Employer use only A | d Control number Dept. 000492 RU/VSB | Corp. Employer use only A | d Control number Dept. 000492 RU/VSB | Corp. Employer use only A |
| c Employer's name, address, a | nd ZIP code | c Employer's name, address, and ZIP code | | c Employer's name, address, and ZIP code | |
| WISSENIT INC | | | WISSENIT INC | | |
| 775 ADDISON A | | WISSENIT INC 775 ADDISON AVENUE | | | |
| SUITE 102 | VENUE | SUITE 102 | AVENUE | 775 ADDISON AVENUE | |
| | 29730 | | 29730 | SUITE 102 ROCKHILL, SC 29730 | |
| | | | | | |
| b Employer's FED ID number 82-4001510 | a Employee's SSA number XXX-XX-2566 | b Employer's FED ID number 82-4001510 | a Employee's SSA number XXX-XX-2566 | b Employer's FED ID number 82-4001510 | a Employee's SSA number XXX-XX-2566 |
| 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 | 1 2 a | 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 part |
| e/f Employee's name, address an | d ZIP code | e/f Employee's name, address a | nd ZIP code | e/f Employee's name, address a | nd ZIP code |
| KAVERI TAKKELLAPA | ri 🛛 | KAVERI TAKKELLAPATI | | KAVERI TAKKELLAPATI | |
| 5606 BEECH TREE L | | 5606 BEECH TREE LANE | | 5606 BEECH TREE LANE | |
| MAINEVILLE, OH 450 | | MAINEVILLE, OH 45039 | | MAINEVILLE, OH 45039 | |
| | | | | | |
| 15 State Employer's state ID no. NC 601166271 | 16 State wages, tips, etc. 99284.48 | 15 State Employer's state ID no NC 601166271 | . 16 State wages, tips, etc. 99284.48 | 15 State Employer's state ID no. NC 601166271 | . 16 State wages, tips, etc. 99284.48 |
| 17 State income tax 4459.00 | 18 Local wages, tips, etc. | ¹⁷ State income tax 4459.00 | 18 Local wages, tips, etc. | 17 State income tax 4459.00 | 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 Fil | ing Copy | NC.State R | eference Copy | NC.State Fil | ling Copy |
| Wage a | | M_7 Wage a | | Wage a | |
| VV-Z Statem | | VV-Z Stateme | | VV-Z Statem | |
| Copy B to be filed with employee's Fe | | Conv 2 to be filed with employee's Stat | IL OMB No. 1545-0008 | Copy 2 to be filed with employee's State | |