 Wages, tips, other compensation 					
	2 Federal income tax withheld	Instructions for Employee		to \$19,500. Deferrals under code H a	
17354.18 3 Social security wages	3123.75 4 Social security tax withheld	Box 1. Enter this amount on the wag Box 2. Enter this amount on the feder tax return.	es line of your tax return. ral income tax withheld line of your	Box 13. If the "Retirement plan" box to the amount of traditional IRA contr Pub. 590-A, Contributions to Individu	ributions you may deduct. See
5 Medicare wages and tips	6 Medicare tax withheld	Box 5. You may be required to report Additional Medicare Tax. See the Fo	t this amount on Form 8959, rm 1040 instructions to determine if	Box 14. Employers may use this box disability insurance taxes withheld, un	x to report information such as state
		you are required to complete Form 8 Box 6. This amount includes the 1.4	959.	health insurance premiums deducted assistance payments, or a member of	d, nontaxable income, educational
a Employee's social security no.	b Employer ID number (EIN)	Medicare wages and tips shown in b Medicare Tax on any of those Medic	ox 5, as well as the 0.9% Additional	and utilities. Railroad employers use retirement (RRTA) compensation, Tie	this box to report railroad
512-63-9435	82-5059624	Box 8. This amount is not included i	box 1, 3, 5, or 7. For information	and Additional Medicare Tax. Include the employer in railroad retirement (F	e tips reported by the employee to
c Employer's name, address, and ZI ALLIED WEAR SYSTE		on how to report tips on your tax retu You must file Form 4137, Social Se	curity and Medicare Tax on	Note: Keep Copy C of Form W-2 for	r at least 3 years after the due date
ALLIED WELDING SY		Unreported Tip Income, with your income the allocated tip amount unless you	an prove with adequate records	for filing your income tax return. How security benefits, keep Copy C unti	il you begin receiving social security
PO BOX 795459	31 LINIS	that you received a smaller amount. actual amount of tips you received, r	port that amount even if it is more	benefits, just in case there is a questi earnings in a particular year.	tion about your work record and/or
	450	or less than the allocated tips. Use F security and Medicare tax owed on to	ps you didn't report to your	Notice to Employee	
DALLAS, TX 75379-54 7 Social security tips	8 Allocated tips	employer. Enter this amount on the v filing Form 4137, your social security security record (used to figure your b	tips will be credited to your social enefits).	Corrections. If your name, SSN, or a Copies B, C, and 2 and ask your emp	ployer to correct your employment
9	10 Dependent care benefits	Box 10. This amount includes the to your employer paid to you or incurred from a section 125 (cafeteria) plan).	on your behalf (including amounts Any amount over your employer's	record. Be sure to ask the employer and Tax Statement, with the SSA to amount error reported to the SSA on	correct any name, SSN, or money Form W-2. Be sure to get your
11 Nonqualified plans	12a	plan limit is also included in box 1. S Box 11. This amount is (a) reported	n box 1 if it is a distribution made to	copies of Form W-2c from your employed may file them with your tax return. If	your name and SSN are correct but
	12b	you from a nonqualified deferred con section 457(b) plan, or (b) included in	box 3 and/or box 5 if it is a prior year	aren't the same as shown on your so for a new card that displays your corn	rect name at any SSA office or by
14 Other	12c	deferral under a nonqualified or secti for social security and Medicare taxe	s this year because there is no	calling 800-772-1213. You may also www.SSA.gov.	
	12d	longer a substantial risk of forfeiture amount. This box shouldn't be used distribution in the same calendar yea	of your right to the deferred f you had a deferral and a	Cost of employer-sponsored healt cost is provided by the employer).	. The reporting in box
d Control number	13 Stat Emp Ret. plan Third party	received a distribution in the same of age 62 by the end of the calendar ye	ılendar year, and you are or will be ar, your employer should file Form	 using code DD, of the cost of em health coverage is for your informatic reported with code DD is not taxab 	on only. The amount ble.
e Employee's name		SSA-131, Employer Report of Special Security Administration and give you	a copy.	Credit for excess taxes. If you had 2022 and more than \$9,114 in social	I security and/or Tier 1
SRI RAM GADDAMEED		Box 12. The following list explains the need this information to complete yo	ır tax return. Elective deferrals (codes	railroad retirement (RRTA) taxes wer to claim a credit for the excess again	nst your federal income tax.
f Employee's address and ZIP code 224 MOSSY ROCK DR	!	D, E, F, and S) and designated Roth under all plans are generally limited	contributions (codes AA, BB, and EE)	See the Form 1040 instructions. If yo railroad employer and more than \$5,	ou had more than one
HUTTO, TX 78634		only have SIMPLE plans; \$23,500 for	section 403(b) plans if you qualify for 1). Deferrals under code G are limited	was withheld, you may be able to cla See the Instructions for Form 843.	aim a refund on Form 843.
15 State Employer's state ID number	15 State Employer's state ID number				
1) TX 15-927048-3	2)				
16 State wages, tips, etc.	17 State income tax		001.04	MOADDAMEEDI	
17354.18	-		_	M GADDAMEEDI SSY ROCK DR	
18 Local wages, tips, etc. 19 Local inc	come tax 20 Locality name			, TX 78634	
1)			110110	, IX 70054	
2)					
Form W-2 Wa					
Form \\\	age and Tax Statement				
Department of the Treasury Intern	age and Tax Statement	Copy C: This information is being furnished to the	he Internal Revenue Service. If you		
Department of the Treasury Interr	nal Revenue Service 2022	This information is being furnished to t are required to file a tax return, a negli	gence penalty or other sanction		
_ '	nal Revenue Service 2022	This information is being furnished to t	gence penalty or other sanction		
_ '	nal Revenue Service 2022	This information is being furnished to t are required to file a tax return, a negli	gence penalty or other sanction		
_ '	nal Revenue Service 2022	This information is being furnished to t are required to file a tax return, a negli	gence penalty or other sanction	1 Wages, tips, other compensation	2 Federal income tax withheld
1 Wages, tips, other compensation 17354.18	nal Revenue Service 2022 b's Records 20MB No. 1545-0008 2 Federal income tax withheld 3123.75	This information is being furnished to fare required to file a tax return, a negli may be imposed on you if this income 1 Wages, tips, other compensation 17354.18	gence penalty or other sanction is taxable and vou fail to report it. 2 Federal income tax withheld 3123.75	17354.18	3123.75
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1 Wages, tips, other compensation 17354.18	nal Revenue Service 2022 b's Records 20MB No. 1545-0008 2 Federal income tax withheld 3123.75	This information is being furnished to fare required to file a tax return, a negli may be imposed on you if this income 1 Wages, tips, other compensation 17354.18	gence penalty or other sanction is taxable and vou fail to report it. 2 Federal income tax withheld 3123.75	17354.18	3123.75
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Ret. plan d Control number 13 Stat Emp Third party Employee's name SRI RAM GADDAMEEDI 224 MOSSY ROCK DR **HUTTO, TX 78634** TX 15-927048-3 17354.18

Form W-2 Wage and Tax Statement Department of the Treasury -- Internal Revenue Service

Copy B To Be Filed With Employee's
FEDERAL Tax Return.

2022

13 Stat Emp Ret. plan d Control number Third party Employee's name SRI RAM GADDAMEEDI 224 MOSSY ROCK DR **HUTTO, TX 78634** TX 15-927048-3 17354.18 Form W-2 Wage and Tax Statement

2022 Department of the Treasury – Internal Revenue Service

Copy 2 To Be Filed With Employee's State,
City or Local Income Tax Return.

Form W-2

Control number

Employee's name

SRI RAM GADDAMEEDI

224 MOSSY ROCK DR

HUTTO, TX 78634

TX 15-927048-3

Wage and Tax Statement

13 Stat Emp

Ret. plan

Employer's state ID number

Department of the Treasury -- Internal Revenue Service

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17354.18

2022