Box 5 of W-2 \$8,553 42 \$0 00 N/A

\$0.00 \$0 00 N/A \$8,553.42

Medicare

\$124.02

Box 6 of W-2

Medicare Wages and Tips

s Summary

Form W-2 Wa	ge and T	ax Statement	202	22 W-2 and Earni	ngs Summary			
Copy C — For EMPLOYE This information is, being furnished to the IRS to fine a tax refurn. a negligence penalty or of imposed on you if this income is taxable and Control outple 0 JV75 5526	E'S BECOR	DS 2022 d OMB No. 1545-0008 d Department of Treasury - Internal Revenue Service		Wages, Tips, Other Comp. Box 1 of W-2	Social Security Wages Box 3 of W-2			
Employer's name, address, and ZIP code CUSTOMER VALUE 3701 PENDER DR FAIRFAX VA 2203	STE 20	RS INC	Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions Less: Third Party Sick Pay Less: Excess Wages Total Reported Wages	\$8,553 42 \$0 00 (\$328 59) \$0 00 \$0 00 N/A	\$8,553 42 \$0 00 N/A \$0 00 \$0 00 \$0 00			
Employee's name, acts to say, and ZPP code VENKATA V DACHEPALLI 9515 MARY GENEVA LANE OWINGS MILLS MD 21117			Tax Withheld	\$8,224.83 Fed Income Box 2 of W-2 \$1,224.77	\$8,553.42 Social Security Box 4 of W-2 \$530.31			
8224.83 1 Wages, tips, other comp. 8553.42	2 Federal	1224.77 income tax withheld		MD State Wages, Tips, etc.				
3 Social security wages 8553.42 5 Medicare wages and tips 7 Social security tips		ecurity tax withheld 124.02 re tax withheld	Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions Less: Third Party Sick Pa	Box 16 of W-2 \$8,553.42 \$0.00 (\$328.59) \$0.00 \$0.00				
9 ₹ 11 Nongualified plans	10 Dependent care benefits		Total Reported Wages	\$8,224.83 MD State Income Tax Box 17 of W-2				
13 Statutory Retirement Third-party sick pay	12b 12c 12d	320.33	Tax Withheld	\$618.99				
Employee's social security no. 689 - 62 - 4468 Employer ID number (EIN) 01 - 0570597	14		9515 MARY (VENKATA V DACHEPALLI 9515 MARY GENEVA LANE OWINGS MILLS, MD 21117				

5055

OMB No. 1545-0008

Wage and Tax Statement

The Form W-2 Box 1 wages are the Gross Wages as of your last pay statement for the year minus any non-taxable earnings or deductions, plus any additional compensation received after the last pay statement. Gross pay may not match Box 1 wages due to deductions for retirement

5055

OMB No. 1545-0008 Department of Treasury Internal Revenue Service

Form W-2

Income Tax Return.

Copy 2 - To Be Filed With

Employee's State, City, or Local

Form W-2 Wage and Tax Statement Copy B - To Be Filed With 5055 OMB No. 1545-0008 Department of Treasury -Internal Revenue Service Employee's FEDERAL Tax Return. his information is being furnished to the IRS. 0JV75 00354 5526 Employer's name, address, and ZIP code CUSTOMER VALUE PARTNERS INC 3701 PENDER DR STE 200 FAIRFAX VA 22030 Employee's name, address, and ZIP code VENKATA V DACHEPALLI 9515 MARY GENEVA LANE OWINGS MILLS MD 21117 8224.83 1224.77 2 Federal income tax withheld Wages, tips, other comp. 8553.42 530.31 3 Social security wages 4 Social security tax withheld 8553.42 124.02 5 Medicare wages and tips 6 Medicare tax withheld 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a D 328.59 12b 12c × 12d Employee's social security no. 14 689-62-4468 Employer ID number (EIN) 01-0570597 15 St. Employer's state ID number 16 State wages, tips, etc. 17 State income ta MD 11367499 8224.83 618.99 18 Local wages, tips, etc. 19 Local income tax

16 State wages, tips, etc. 17 State income ta:

618.99

8224.83

19 Local income tax

Employer ID number (EIN) 01-0570597 15 St. Employer's state ID number

11367499

MD

18 Local wages, tips, etc.

3701 PENDER DI FAIRFAX VA 22	R 03	STE 0	200)			
Employee's name, address, and ZIP code VENKATA V DACHEPALLI 9515 MARY GENEVA LANE OWINGS MILLS MD 21117							
8224.8 1 Wages, tips, other comp		2 Fede	eral in	1 con	224.77 ne tax withheld		
8553.4 3 Social security wages	530.31 4 Social security tax withheld						
8553.4 5 Medicare wages and tip	124.02 6 Medicare tax withheld						
7 Social security tips	8 Allo	cated	l tip	os			
9	10 Dependent care benefits						
11 Nonqualified plans	12a D)	_	328.59			
13 Statutory Retirement Third-par sick pay	ty	12c 12d					
Employee's social security r 689-62-4468	14						
Employer ID number (EIN) 01-0570597							
15 st. Employer's state ID number MD 11367499	16	6 State wages, tips, etc. 8224.83		17 State income tax 618.99			
18 Local wages, tips, etc.	19	19 Local income tax		20 Locality name			
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deferrals, health insurance, or other Sec. 125 cafeteria plan deductions, et

Wage and Tax Statement

00354

Form W-2

Income Tax Return.

imployer's name, address, and ZIP code

number 0JV75

Copy 2 - To Be Filed With

Employee's State, City, or Local

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CUSTOMER VALUE PARTNERS INC

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