2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records d Control number Dept. Corp. Employer use only RU/VDT 000014 Employer's name, address, and ZIP code ORIONTEK INC 566 PEACH TREE PKWY SUITE 121 CUMMING, GA 30041 Batch #99506 elf Employee's name, address, and ZIP code PAUL UPADESH TURAKA 11539 HUEBNER RD **APT 1407** SAN ANTONIO, TX 78230 a Employee's SSA number XXX-XX-2068 Employer's FED ID number 20-5887131 Wages, tips, other comp 2 Federal income tax withheld 44520.00 6285.39 3 Social security wages 4 Social security tax withheld 44520.00 2760.24 5 Medicare wages and tips 6 Medicare tax withheld 44520.00 645.54 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12h 14 Other 12c 13 Stat emp Ret. plan 3rd party sick pa 15 State Employer's state ID no. 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

5 Medicare wages and tips 44520.00 645	income tax withhel	iges, tips, other comp. 44520.00 2 Federal in					
44520.00 645							
d Control number Dept. Corp. Employer use	ledicare wages and tips 44520.00 6 Medicare tax withheld 645.		5 Medicare wages and tips 44520.00				
000014 RU/VDT A	-	Corp.	Dept.	SECONDARY SECTION SECT			

566 PEACH TREE PKWY SUITE 121 CUMMING, GA 30041

	Employer's FED ID number 20-5887131	a Employee's SSA number XXX-XX-2068				
7	Social security tips	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12				
9						
11	Nonqualified plans					
14	Other	12b				
		12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pay				
	Employee's name, address a					
A	1539 HUEBNER RD PT 1407 AN ANTONIO. TX					
S		78230				
S	PT 1407 AN ANTONIO, TX State Employer's state ID no	78230				

Federal Filing

Wage and Tax

Statement

Copy

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 Wages Wages Box 3 of W-2 Box 5 of W-2 Box 1 of W-2

Gross Pay 44,520.00 44,520.00 Reported W-2 Wages 44,520.00 44,520.00

2. Employee Name and Address.

PAUL UPADESH TURAKA 11539 HUEBNER RD APT 1407 SAN ANTONIO, TX 78230

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1	Wages, tips, other co		2 Fede	ral income tax withheld 6285.39
3	Social security wage: 4452		4 Socia	al security tax withheld 2760.24
5	Medicare wages and 4452	tips 0.00	6 Medi	care tax withheld 645.54
d	Control number	Dept.	Corp.	A 68

c Employer's name, address, and ZIP code

ORIONTEK INC 566 PEACH TREE PKWY SUITE 121 CUMMING, GA 30041

Ь	Employer's FED ID number 20-5887131	a Employee's SSA number XXX-XX-2068
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a
14 Other	Other	12b
		12c
		12d
		13 Stat emp. Ret. plan 3rd party sick pay
e/f	Employee's name, address a	and ZIP code

PAUL UPADESH TURAKA 11539 HUEBNER RD **APT 1407** SAN ANTONIO, TX 78230

15	State	Employer's	state I	D no.	16	State	wages,	tips,	etc.
17	State	income tax			18	Local	wages,	tips,	etc.
19	Local	income tax			20	Local	ity nam	e	

State Reference Сору Wage and Tax Statement Copy 2 to be filed with employee's State Inc

1	Wages, tips, other comp. 44520.00 Social security wages 44520.00			Federa		withheld 285.39
3				Social security wages 44520.00	Social security wages 44520.00	4
5	Medicare wages and 4452	tips 0.00	6	Medica		645.54
d	Control number	Dept.		Corp.	Employer A	use only
U	OUT4 ROVVDI				A	80

c Employer's name, address, and ZIP code

44,520.00

44,520.00

ORIONTEK INC 566 PEACH TREE PKWY SUITE 121 CUMMING, GA 30041

Allocated tips Dependent care benefits
Dependent care benefits
90
1
1
Stat emp. Ret. plan 3rd party sick pay
1

PAUL UPADESH TURAKA 11539 HUEBNER **APT 1407** SAN ANTONIO, TX 78230

15	State	Employer's s	tate ID n	16	State wages, tips, etc.
17	State	income tax		18	Local wages, tips, etc.
19	Local	income tax		20	Locality name

City or Local Reference Copy Wage and Tax Statement Copy 2 to be filed with employee's City or Local