

# 2022 W-2 and EARNINGS SUMMARY

**Employee Reference Copy**  
**W-2 Wage and Tax Statement 2022**  
Copy C for employee's records. OMB No. 1545-0008

d Control number 0000014762 RRZ		Dept. 101003	Corp. VDH6	Employer use only A S 7245	
c Employer's name, address, and ZIP code KENNESAW STATE UNIVERSITY 1000 CHASTAIN ROAD KENNESAW, GA 30144					
e/f Employee's name, address, and ZIP code ADITYA VADAPALLY 707 FRANKLIN GATEWAY SE UNIT 12-6 MARIETTA, GA 30067					
b Employer's FED ID number 58-0965786		a Employee's SSA number XXX-XX-0928			
1 Wages, tips, other comp. 3985.00		2 Federal income tax withheld 398.50			
3 Social security wages		4 Social security tax withheld			
5 Medicare wages and tips		6 Medicare tax withheld			
7 Social security tips		8 Allocated tips			
9		10 Dependent care benefits			
11 Nonqualified plans		12a See instructions for box 12 DD 2420.00			
14 Other		12b   12c   12d   13 Stat emp. Ret. plan 3rd party sick pay			
15 State	Employer's state ID no. GA 5651984-PZ	16 State wages, tips, etc. 3985.00			
17 State income tax 9.10		18 Local wages, tips, etc.			
19 Local income tax		20 Locality name			

This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that you may also find helpful. The following reflects your final pay stub, plus any adjustments made by your employer.

GROSS PAY	3,985.00	SOCIAL SECURITY TAX WITHHELD BOX 04 OF W-2	0.00
FED. INCOME TAX WITHHELD BOX 02 OF W-2	398.50	MEDICARE TAX WITHHELD BOX 06 OF W-2	0.00
STATE INCOME TAX BOX 17 OF W-2	9.10	SUI/SDI BOX 14 OF W-2	0.00
LOCAL INCOME TAX BOX 19 OF W-2	0.00		

To change your employee W-4 profile information  
file a new W-4 with your payroll department

ADITYA VADAPALLY  
707 FRANKLIN GATEWAY SE  
UNIT 12-6  
MARIETTA, GA 30067

Social Security Number: XXX-XX-0928



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**Federal Filing Copy**  
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Copy B to be filed with Federal Income Tax Return. OMB No. 1545-0008

**GA. State Filing Copy**  
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Copy 2 to be filed with State Income Tax Return. OMB No. 1545-0008

**City or Local Filing Copy**  
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