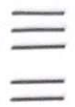


2022 W-2 and EARNINGS SUMMARY



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.



Employee Reference Copy
W-2 Wage and Tax Statement 2022
OMB No. 1545-0047

Control number: 000477 CLEV/18C 000110
Dept: 000110
Corp: A
Employer use only: 41

Employer's name, address, and ZIP code:
RESTAURANT EQUIPPERS INC
635 W BROAD ST
COLUMBUS OH 43215-2711

Batch #02048

Employee's name, address, and ZIP code:
JAYA CHANDRA DEVABAKTHUNI
4616 N WOLCOTT AVENUE
APT 107
CHICAGO IL 60640-4340

Employer's FED ID number: 31-0798739
Employee's SSA number: XXX-XX-3235

1 Wages, tips, other comp.	2 Federal income tax withheld
46585.98	4926.76
3 Social security wages	4 Social security tax withheld
46585.98	2888.33
5 Medicare wages and tips	6 Medicare tax withheld
46585.98	675.50
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	DD 5151.08
14 Other	12b
	12c
	12d
	13 Stat emp/Ret. plan/3rd party sick pay
15 State Employer's state ID no.	16 State wages, tips, etc.
IL 31-0798739 000 2	46585.98
17 State income tax	18 Local wages, tips, etc.
2259.78	
19 Local income tax	20 Locality name

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	IL State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	47,668.98	47,668.98	47,668.98	47,668.98
Less Other Cafe 125	1,083.00	1,083.00	1,083.00	1,083.00
Reported W-2 Wages	46,585.98	46,585.98	46,585.98	46,585.98

2. Employee Name and Address.

JAYA CHANDRA DEVABAKTHUNI
4616 N WOLCOTT AVENUE
APT 107
CHICAGO IL 60640-4340

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19 Local income tax	20 Locality name

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4616 N WOLCOTT AVENUE
APT 107
CHICAGO IL 60640-4340

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Employee's SSA number: XXX-XX-3235

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RESTAURANT EQUIPPERS INC
635 W BROAD ST
COLUMBUS OH 43215-2711

Employee's name, address and ZIP code:
JAYA CHANDRA DEVABAKTHUNI
4616 N WOLCOTT AVENUE
APT 107
CHICAGO IL 60640-4340

Employer's FED ID number: 31-0798739
Employee's SSA number: XXX-XX-3235

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Control number: 000477 CLEV/18C 000110
Dept: 000110
Corp: A
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Employer's name, address, and ZIP code:
RESTAURANT EQUIPPERS INC
635 W BROAD ST
COLUMBUS OH 43215-2711

Employee's name, address and ZIP code:
JAYA CHANDRA DEVABAKTHUNI
4616 N WOLCOTT AVENUE
APT 107
CHICAGO IL 60640-4340

Employer's FED ID number: 31-0798739
Employee's SSA number: XXX-XX-3235

Federal Filing Copy
W-2 Wage and Tax Statement 2022
OMB No. 1545-0047
Copy B to be filed with employer's Federal Income Tax Return.

IL State Reference Copy
W-2 Wage and Tax Statement 2022
OMB No. 1545-0047
Copy 2 to be filed with employer's State Income Tax Return.

IL State Filing Copy
W-2 Wage and Tax Statement 2022
OMB No. 1545-0047
Copy 2 to be filed with employer's State Income Tax Return.

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.

Employee Reference Copy
W-2 Wage and Tax Statement 2022
 Copy C for employee's records
 OMB No. 1545-0048

d Control number 000477 CLEV/18C Dept. 000110 Corp. A Employer use only 41

c Employer's name, address, and ZIP code
RESTAURANT EQUIPPERS INC
635 W BROAD ST
COLUMBUS OH 43215-2711

Batch #02048

e/f Employee's name, address, and ZIP code
JAYA CHANDRA DEVABAKTHUNI
4616 N WOLCOTT AVENUE
APT 107
CHICAGO IL 60640-4340

b Employer's FED ID number 31-0798739 a Employee's SSA number XXX-XX-3235

1 Wages, tips, other comp. 46585.98	2 Federal income tax withheld 4926.76
3 Social security wages 46585.98	4 Social security tax withheld 2888.33
5 Medicare wages and tips 46585.98	6 Medicare tax withheld 675.50
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 DD 5151.08
14 Other	12b 12c 12d 13 Stat emp./Ret. plan/3rd party sick pay
15 State Employer's state ID no. IL 31-0798739 000 2	16 State wages, tips, etc. 46585.98
17 State income tax 2259.78	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	IL State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	47,668.98	47,668.98	47,668.98	47,668.98
Less Other Cafe 125	1,083.00	1,083.00	1,083.00	1,083.00
Reported W-2 Wages	46,585.98	46,585.98	46,585.98	46,585.98

2. Employee Name and Address.

JAYA CHANDRA DEVABAKTHUNI
4616 N WOLCOTT AVENUE
APT 107
CHICAGO IL 60640-4340

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Fold and Detach Here

1 Wages, tips, other comp. 46585.98	2 Federal income tax withheld 4926.76
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d Control number 000477 CLEV/18C	Dept. 000110 Corp. A Employer use only 41
c Employer's name, address, and ZIP code RESTAURANT EQUIPPERS INC 635 W BROAD ST COLUMBUS OH 43215-2711	

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b Employer's FED ID number 31-0798739	a Employee's SSA number XXX-XX-3235
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 DD 5151.08
14 Other	12b 12c 12d 13 Stat emp./Ret. plan/3rd party sick pay
e/f Employee's name, address and ZIP code JAYA CHANDRA DEVABAKTHUNI 4616 N WOLCOTT AVENUE APT 107 CHICAGO IL 60640-4340	
15 State Employer's state ID no. IL 31-0798739 000 2	16 State wages, tips, etc. 46585.98
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17 State income tax 2259.78	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

Federal Filing Copy
W-2 Wage and Tax Statement 2022
 Copy B to be filed with employee's Federal Income Tax Return.

IL State Reference Copy
W-2 Wage and Tax Statement 2022
 Copy 2 to be filed with employee's State Income Tax Return.

IL State Filing Copy
W-2 Wage and Tax Statement 2022
 Copy 2 to be filed with employee's State Income Tax Return.

2022 W-2 and Earnings Summary

Form W-2 Wage and Tax Statement
Copy C - For EMPLOYEE'S RECORDS 2022

This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if the income is taxable and you fail to report it.

OMB No. 1545-0048
 Department of Treasury - Internal Revenue Service

Control number: **00S14 1279 00255**

Employer's name, address, and ZIP code:
**PCC COMMUNITY WELLNESS CENTER
 14 LAKE ST
 OAK PARK IL 60302**

Employer's name, address, and ZIP code:
**REEMA GANDHI
 4616 NORTH WOLCOTT AVENUE APT 107
 CHICAGO IL 60640**

1 Wages, tips, other comp.	45206.33	2 Federal income tax withheld	3833.93
3 Social security wages	45206.33	4 Social security tax withheld	2802.79
5 Medicare wages and tips	45206.33	6 Medicare tax withheld	655.49
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a C	27.02
		12b	
13 Statutory employee		12c	
Retirement plan		12d	
Third-party sick pay		14	
Employer's social security no.	353-92-5332		
Employer ID number (EIN)	36-3828320		
15a Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
IL 36-3828320	45206.33	2237.74	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Wages, Tips, Other Comp.
Box 1 of W-2

Gross Pay	\$45,206.33
Less: Non-Taxable Earnings	\$0.00
Less: Retirement Deductions	\$0.00
Less: Other Pre-tax Deductions	\$0.00
Less: Third Party Sick Pay	\$0.00
Less: Excess Wages	N/A
Total Reported Wages	\$45,206.33

Fed Income
Box 2 of W-2

Tax Withheld **\$3,833.93**

Social Security Wages
Box 3 of W-2

\$45,206.33
\$0.00
N/A
\$0.00
\$0.00
\$0.00
\$0.00
\$45,206.33

Medicare Wages and Tips
Box 5 of W-2

\$45,206.33
\$0.00
N/A
\$0.00
\$0.00
N/A
\$45,206.33

Social Security
Box 4 of W-2

Tax Withheld **\$2,802.79**

Medicare
Box 6 of W-2

Tax Withheld **\$655.49**

IL State Wages, Tips, etc.
Box 16 of W-2

Gross Pay	\$45,206.33
Less: Non-Taxable Earnings	\$0.00
Less: Retirement Deductions	\$0.00
Less: Other Pre-tax Deductions	\$0.00
Less: Third Party Sick Pay	\$0.00
Total Reported Wages	\$45,206.33

IL State Income Tax
Box 17 of W-2

Tax Withheld **\$2,237.74**

REEMA GANDHI
4616 NORTH WOLCOTT AVENUE APT 107
CHICAGO, IL 60640

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 deferrals, health insurance, or other Sec. 125 cafeteria plan deductions, etc.

Form W-2 Wage and Tax Statement
Copy B - To Be Filed With Employee's FEDERAL Tax Return. 2022

This information is being furnished to the IRS.

OMB No. 1545-0048
 Department of Treasury - Internal Revenue Service

Control number: **00S14 1279 00255**

Employer's name, address, and ZIP code:
**PCC COMMUNITY WELLNESS CENTER
 14 LAKE ST
 OAK PARK IL 60302**

Employer's name, address, and ZIP code:
**REEMA GANDHI
 4616 NORTH WOLCOTT AVENUE APT 107
 CHICAGO IL 60640**

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13 Statutory employee		12c	
Retirement plan		12d	
Third-party sick pay		14	
Employer's social security no.	353-92-5332		
Employer ID number (EIN)	36-3828320		
15a Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
IL 36-3828320	45206.33	2237.74	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement
Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return. 2022

This information is being furnished to the IRS.

OMB No. 1545-0048
 Department of Treasury - Internal Revenue Service

Control number: **00S14 1279 00255**

Employer's name, address, and ZIP code:
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Form W-2 Wage and Tax Statement
Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return. 2022

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