



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

d Control number 000300 Dept. R4/FLJ Corp. A Employer use only 71

c Employer's name, address, and ZIP code
TEKINVADERZ LLC
 2490 E OAKTON ST STE A
 ARLINGTON HEIGHTS, IL 60005

Batch #90407

e/f Employee's name, address, and ZIP code
VAMSHI SAGAR GADDE
 3224 ARDEN VILLAS BLVD
 APT 9
 ORLANDO, FL 32817

b Employer's FED ID number 46-5582856 a Employee's SSA number XXX-XX-6107

1 Wages, tips, other comp. 103200.00 2 Federal income tax withheld 15517.02

3 Social security wages 103200.00 4 Social security tax withheld 6398.40

5 Medicare wages and tips 103200.00 6 Medicare tax withheld 1496.40

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12

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.

17 State income tax 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

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 Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2
Gross Pay	103,200.00	103,200.00	103,200.00
Reported W-2 Wages	103,200.00	103,200.00	103,200.00

2. Employee Name and Address.

VAMSHI SAGAR GADDE
 3224 ARDEN VILLAS BLVD
 APT 9
 ORLANDO, FL 32817

© 2022 ADP, Inc.

1 Wages, tips, other comp. 103200.00 2 Federal income tax withheld 15517.02

3 Social security wages 103200.00 4 Social security tax withheld 6398.40

5 Medicare wages and tips 103200.00 6 Medicare tax withheld 1496.40

d Control number 000300 Dept. R4/FLJ Corp. A Employer use only 71

c Employer's name, address, and ZIP code
TEKINVADERZ LLC
 2490 E OAKTON ST STE A
 ARLINGTON HEIGHTS, IL 60005

b Employer's FED ID number 46-5582856 a Employee's SSA number XXX-XX-6107

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12

14 Other 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
VAMSHI SAGAR GADDE
 3224 ARDEN VILLAS BLVD
 APT 9
 ORLANDO, FL 32817

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

W-2 Wage and Tax Statement
 Copy B to be filed with employee's Federal Income Tax Return.
 OMB No. 1545-0008
2022

1 Wages, tips, other comp. 103200.00 2 Federal income tax withheld 15517.02

3 Social security wages 103200.00 4 Social security tax withheld 6398.40

5 Medicare wages and tips 103200.00 6 Medicare tax withheld 1496.40

d Control number 000300 Dept. R4/FLJ Corp. A Employer use only 71

c Employer's name, address, and ZIP code
TEKINVADERZ LLC
 2490 E OAKTON ST STE A
 ARLINGTON HEIGHTS, IL 60005

b Employer's FED ID number 46-5582856 a Employee's SSA number XXX-XX-6107

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a

14 Other 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
VAMSHI SAGAR GADDE
 3224 ARDEN VILLAS BLVD
 APT 9
 ORLANDO, FL 32817

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

W-2 Wage and Tax Statement
 Copy 2 to be filed with employee's State Income Tax Return.
 OMB No. 1545-0008
2022

1 Wages, tips, other comp. 103200.00 2 Federal income tax withheld 15517.02

3 Social security wages 103200.00 4 Social security tax withheld 6398.40

5 Medicare wages and tips 103200.00 6 Medicare tax withheld 1496.40

d Control number 000300 Dept. R4/FLJ Corp. A Employer use only 71

c Employer's name, address, and ZIP code
TEKINVADERZ LLC
 2490 E OAKTON ST STE A
 ARLINGTON HEIGHTS, IL 60005

b Employer's FED ID number 46-5582856 a Employee's SSA number XXX-XX-6107

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a

14 Other 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
VAMSHI SAGAR GADDE
 3224 ARDEN VILLAS BLVD
 APT 9
 ORLANDO, FL 32817

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

W-2 Wage and Tax Statement
 Copy 2 to be filed with employee's City or Local Income Tax Return.
 OMB No. 1545-0008
2022