## 2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy				
		nd Tax	• つりつつ	
Statement Statement				
Copy C for employee's record	ds.		GIII.D 140: 1010 0000	
d Control number	Dept.	Corp.	Employer use only	
000039 KG/MNF			Α	
Employer's name, a	ddress, a	nd ZIP cod	е	
INTECA IT				
10130 MALLARD CREEK RD				
SUITE 235				
		C 2026	2	

Batch #93985

e/f Employee's name, address, and ZIP code

RAVI KUMAR TALARI 543 POPLAR LANE APT 305

IRVING, TX 75063

b Employer's FED ID number a Employee's SSA number 83-3365194 XXX-XX-4883 Wages, tips, other comp. Federal income tax withheld 260798.02 28110.59 Social security wages Social security tax withheld 147000.00 9114.00 Medicare wages and tips 6 Medicare tax withheld 4328.75 260798.02 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other 464 82 MAPEMI 13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, MA WTH-20453987-002 134521.02 17 State income tax 8 Local wages, tips, etc.

260798.02 28110.59 Social security wages 147000.00 tax withheld 9114.00 Medicare wages and tips 260798.02 tax withheld 4328.75 Control number Dept. Employer use only 000039 KG/MNF

20 Locality name

Employer's name, address, and ZIP code

6626.05

19 Local income tax

INTECA IT SOLUTIONS LLC 10130 MALLARD CREEK RD SUITE 235 CHARLOTTE, NC 28262

b	Employer's FED ID number 83-3365194	a Employee's SSA number XXX-XX-4883	
7	Social security tips	8 Allocated tips	
9		10 Dependent care benefits	
11	Nonqualified plans	12a See instructions for box 12	
14	Other	12b	
	464.82 MAPFML	12c	
		12d	
		13 Stat emp. Ret. plan 3rd party sick pay	
ω/f	Employee's name address ar	nd ZIP code	

RAVI KUMAR TALARI 543 POPLAR LANE **APT 305** IRVING, TX 75063

15 <b>N</b>	State <b>IA</b>	Employer's state ID no. WTH-20453987-00	16 <b>2</b>	State	wages,	tips, etc. 134521.02
17	State	income tax 6626.05	18	Local	wages,	tips, etc.
19	Local	income tax	20	Local	ity nam	е

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

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	Medicare	MA. State Wages,
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2
Gross Pay	261,998.02	261,998.02	261,998.02	135,121.02
Less Other Cafe 125	1,200.00	1,200.00	1,200.00	600.00
Less Wages Over Limit Reported W-2 Wages	N/A	113,798.02	N/A	N/A
	<b>260,798.02</b>	<b>147,000.00</b>	<b>260,798.02</b>	<b>134,521.02</b>

2. Employee Name and Address.

RAVI KUMAR TALARI 543 POPLAR LANE APT 305 IRVING, TX 75063

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17 State income tax

19 Local income tax

6626.05

MA.State Reference

Statement

Copy 2 to be filed with employee's State Incor

Wage and Tax

1	Wages, tips, other comp. <b>260798.02</b>	2 Federal income tax withheld 28110.59		
3	Social security wages 147000.00	4 Social security tax withheld 9114.00		
5	Medicare wages and tips 260798.02	6 Medicare tax withheld 4328.75		
d	Control number Dept.	Corp.	Employer use only	
00	0039 KG/MNF		Α	
С	Employer's name, address, a	nd ZIP cod	le	
	10130 MALLARD SUITE 235 CHARLOTTE, N	· · · · ·	EK RD 2	
b	Employer's FED ID number 83-3365194	a Employee's SSA number XXX-XX-4883		
7	Social security tips	8 Allocated tips		
l			•	
9		10 Depend	dent care benefits	
9	Nonqualified plans	10 Depend	dent care benefits	
	Nonqualified plans Other		dent care benefits	
11		12a	dent care benefits	
11	Other	12a	dent care benefits	
11	Other	12a   12b   12c   12d	dent care benefits  p. Ret. plan 3rd party sick pay	
11	Other	12a   12b   12c   12d   13 Stat em	p. Ret. plan 3rd party sick pay	
11 14	Other 464.82 MAPFML	12a   12b   12c   12d   13 Stat em	p. Ret. plan 3rd party sick pay	
11 14 e/f R #	Other 464.82 MAPFML Employee's name, address at	12a   12b   12c   12d   13 Stat em	p. Ret. plan 3rd party sick pay	
11 14 e/f R/- 54	Other  464.82 MAPFML  Employee's name, address at VI KUMAR TALARI	12a   12b   12c   12d   13 Stat em	p. Ret. plan 3rd party sick pay	
e/f RA 54 AF	Other  464.82 MAPFML  Employee's name, address at AVI KUMAR TALARI 3 POPLAR LANE	12a   12b   12c   12d   13 Stat em	p. Ret. plan 3rd party sick pay	

18 Local wages, tips, etc.

20 Locality name

1 Wages, tips, other comp. 260798.02	2 Federal income tax withheld 28110.59		
3 Social security wages 147000.00	4 Social security tax withheld 9114.00		
5 Medicare wages and tips 260798.02	6 Medicare tax withheld 4328.75		
d Control number Dept.	Corp. Employer use only		
000039 KG/MNF	A		
c Employer's name, address, ar	nd ZIP code		
SUITE 235 CHARLOTTE, NC 28262  b Employer's FED ID number   a Employee's SSA number			
83-3365194	XXX-XX-4883		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a		
14 Other	12b		
464.82 MAPFML	12c		
15.112.1111.1112	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
e/f Employee's name, address and ZIP code			
RAVI KUMAR TALARI 543 POPLAR LANE APT 305 IRVING, TX 75063			

5 State Employer's state ID no. 16 State wages, tips, etc. WTH-20453987-002 134521.02

MA.State Filing Copy

Statement

Wage and Tax

6626.05

Copy 2 to be filed with employee's State Income Tax Return.

18 Local wages, tips, etc.

20 Locality name

17 State income tax

19 Local income tax