2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy 2 Wage and Tax Statement

Copy C for employee's records.

Control number Dept. 568861 CL12/HFT 447001

Corp.

Employer use only A EIC 4564

Employer's name, address, and ZIP code OVATIONS FOOD SERVICES L 150 ROUSE BLVD SUITE 300 PHILADELPHIA PA 19112

Batch #01941

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

ANVESH MUPPEDA 2902 3RD PLACE

19 Local income tax

b Employer's FED ID number 23-3035417	a Employee's SSA number XXX - XX - 7003
1 Wages, tips, other comp. 1337.28	2 Federal income tax withheld
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
14 Other	12b
	12d
	7 70 70
	13 Stat emp. Ret. plan 3rd party sick p
15 State Employer's state ID no	o. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.

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 TX. State Wages, Tips, Etc. Box 16 of W-2

Gross Pay Less Exempt Wages

Reported W-2 Wages

1,337.28 N/A 1.337.28 1,337.28 1,337,28 0.00

1,337.28 1,337.28 0.00

2. Employee Name and Address.

ANVESH MUPPEDA 2902 3RD PLACE APT F9 LUBBOCK TX 79415

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Fold and Detach Here

1 Wages, tips, other co 133	omp. 37.28	2 Federa	I income tax withheld			
3 Social security wages		4 Social security tax withhel				
5 Medicare wages and tips		6 Medicare tax withheld				
d Control number 568861 CL12/HFT	Dept. 447001	Corp.	Employer use only A EIC 4564			
OVATIONS 150 ROUS PHILADEL	S FOC	D SEF	RVICES L ITE 300			

20 Locality name

b Employer's FED 1 23-3035	
7 Social security tip	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

ANVESH MUPPEDA 2902 3RD PLACE APT F9 LUBBOCK TX 79415

15 State TX		Employer's state ID no.	. 16 State wages, tips, etc.	
17 State income tax		income tax	18 Local wages, tips, etc.	
19 Local income tax		income tax	20 Locality name	

Federal Filing Copy Wage and Tax Statement

1 W			Federal income tax withheld Social security tax withheld Medicare tax withheld				
3 S							
5 M							
	Control number Dept. 68861 CL12/HFT 447001			Emp		se only 4564	
c Er	ovation				S L		

150 ROUSE BLVD SUITE 300 PHILADELPHIA PA 19112

D ID number 35417	a Employee's SSA number XXX - XX - 7003		
tips	8 Allocated tips		
	10 Dependent care benefits		
lans	12a		
	12b		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
	D ID number 35417 tips		

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

ANVESH MUPPEDA 2902 3RD PLACE APT F9 LUBBOCK TX 79415

15 State TX	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	-

TX.State Reference Copy Wage and Tax Statement

1	Wages, tips, other comp. 1337.28			2 Federal income tax withheld			
3	Social security wages		4 Social security tax withheld				
5	Medicare wages and tips			edicare wages and tips 6 Medicare tax withheld	ld		
d 56	1 Control number Dept. 568861 CL12/HFT 447001		Corp. Employer use of A EIC 456		use only 4564		

OVATIONS FOOD SERVICES L 150 ROUSE BLVD SUITE 300 PHILADELPHIA PA 19112

b	Employer's FED ID number 23-3035417	a Employee's SSA number XXX-XX-7003		
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		

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

ANVESH MUPPEDA 2902 3RD PLACE APT F9 LUBBOCK TX 79415

15 State Employer's state ID no.		2. 16 State wages, tips, etc.			
17 State income tax		18	Local wages, tips, etc.		
19 Loca	I income tax	20	Locality name		

TX.State Filing Copy Wage and Tax Statement