Employee Reference Copy								
M 9 Wage and Tax 9000								
VV- Statement LULL								
Copy C for employee's records.	OMB No. 1545-0008							
d Control number Dept.	Corp. Employer use only							
000006 КЈ/О7Н	A 6							
- Employer's name address	and ZIP code							
c Employer's name, address, and ZIP code								
C4I TECHNOLOG								
26606 COOK F	IELD RD							
STE 400								
KATY, TX 77494	1							
	Batch #99375							
e/f Employee's name, address, a	and ZIP code							
HARINATH BODAGAL	Δ							
9341 THREAVE PL								
••••••								
APT NO 301								
MEMPHIS, TN 38125								
b Employer's FED ID number	a Employee's SSA number							
81-5215173	XXX-XX-5268							
1 Wages, tips, other comp.	² Federal income tax withheld							
133762.00	22862.44							
3 Social security wages	4 Social security tax withheld							
136000.00	8432.00							
5 Medicare wages and tips	6 Medicare tax withheld							
136000.00	1972.00							
7 Social security tips	8 Allocated tips							
9	10 Dependent care benefits							
11 Nonqualified plans	12a See instructions for box 12							
	D 2238.00							
14 Other	12c							
	12d							
	120							
	13 Stat emp Ret. plan 3rd party sick pay							
	13 Stat emp Ret. plan 3rd party sick pay							
15 State Employer's state ID no	13 Stat emp Ret. plan 3rd party sick pay							
	13 State emp Ret. plan 3rd party sick pay X X 16 State wages, tips, etc.							
15 State Employer's state ID no 17 State income tax	13 Stat emp Ret. plan 3rd party sick pay							
	13 State emp Ret. plan 3rd party sick pay X X 16 State wages, tips, etc.							

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.

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	136,000.00	136,000.00	136,000.00
Less 401(k) (D-Box 12)	2,238.00	N/A	N/A
Reported W-2 Wages	133,762.00	136,000.00	136,000.00

2. Employee Name and Address.

HARINATH BODAGALA 9341 THREAVE PL APT NO 301 MEMPHIS, TN 38125

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1 Wages, tips, other comp. 133762.00	2 Federal income tax withheld 22862.44	1 Wages, tips, other comp. 133762.00	2 Federal income tax withheld 22862.44	1 Wages, tips, other comp. 133762.00	2 Federal income tax withheld 22862.44
3 Social security wages 136000.00	4 Social security tax withheld 8432.00	3 Social security wages 136000.00	4 Social security tax withheld 8432.00	³ Social security wages 136000.00	4 Social security tax withheld 8432.00
5 Medicare wages and tips 136000.00	6 Medicare tax withheld 1972.00	5 Medicare wages and tips 136000.00	6 Medicare tax withheld 1972.00	5 Medicare wages and tips 136000.00	6 Medicare tax withheld 1972.00
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
000006 кј/07н	A 6	000006 КЈ/О7Н	A 6	000006 КЈ/О7Н	A 6
c Employer's name, address, a	and ZIP code	C Employer's name, address, and ZIP code		c Employer's name, address, and ZIP code	
C4I TECHNOLOGIESINCC4I TECHNOLOGIESINC26606COOKFIELDRD26606COOKFIELDRDSTE400STE400STE400KATY,TX77494KATY,TX77494		C4I TECHNOLOGIES INC 26606 COOK FIELD RD STE 400 KATY, TX 77494			
b Employer's FED ID number 81-5215173	a Employee's SSA number XXX-XX-5268	b Employer's FED ID number 81-5215173 A Employee's SSA number XXX-XX-5268		b Employer's FED ID number 81-5215173	a Employee's SSA number XXX-XX-5268
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 D 2238.00	11 Nonqualified plans	^{12a} D 2238.00	11 Nonqualified plans	^{12a} D 2238.00
14 Other	12b	14 Other	12b	14 Other	12b
	12c		12c		12c
	12d		12d		12d
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick part
			X		X
e/f Employee's name, address ar	nd ZIP code	e/f Employee's name, address and ZIP code		e/f Employee's name, address and ZIP code	
HARINATH BODAGAL	Α	HARINATH BODAGALA		HARINATH BODAGALA	
9341 THREAVE PL		9341 THREAVE PL		9341 THREAVE PL	
APT NO 301		APT NO 301		APT NO 301	
MEMPHIS, TN 38125		MEMPHIS, TN 38125		MEMPHIS, TN 38125	
15 State Employer's state ID no.	. 16 State wages, tips, etc.	15 State Employer's state ID no	b. 16 State wages, tips, etc.	15 State Employer's state ID no	16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fi	Federal Filing Copy State Reference Copy		erence Copy	City or Local	Reference Copy
W-2 Wage and Tax 2022 Statement Office With employee's Federal Income Tax Refurn.		W-2 Wage and Tax Statement COMB No. 1545-0008		W-2 Wage and Tax 2022 Statement Copy 2 to be filed with employee's City or Local Income Tax Return.	