



W-2 Employee Reference Copy
Wage and Tax Statement
2023
OMB No. 1545-0008

Copy C for employee's records.

| | | | |
|------------------|-------|-------|-------------------|
| d Control number | Dept. | Corp. | Employer use only |
| 000032 RB/XNG | | | A 7 |

c Employer's name, address, and ZIP code
APP DYNAMIC SYSTEM LLC
2525 US HWY 130 BLDG E STE 103
CRANBURY, NJ 08512

Batch #90598

e/f Employee's name, address, and ZIP code
SAHITHI TALASILA
921 PINNACLE BREEZE DRIVE
APT I10
HASLET, TX 76052

| | |
|----------------------------|---------------------------------|
| b Employer's FED ID number | a Employee's SSA number |
| 81-5456444 | XXX-XX-5107 |
| 1 Wages, tips, other comp. | 2 Federal income tax withheld |
| 70833.30 | 5363.30 |
| 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 |
| | 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 | 70,833.30 | 70,833.30 | 70,833.30 |
| Reported W-2 Wages | 70,833.30 | 0.00 | 0.00 |

2. Employee Name and Address.

SAHITHI TALASILA
921 PINNACLE BREEZE DRIVE
APT I10
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| c Employer's name, address, and ZIP code APP DYNAMIC SYSTEM LLC 2525 US HWY 130 BLDG E STE 103 CRANBURY, NJ 08512 | | | |
| b Employer's FED ID number | a Employee's SSA number | | |
| 81-5456444 | XXX-XX-5107 | | |
| 7 Social security tips | 8 Allocated tips | | |
| 9 | 10 Dependent care benefits | | |
| 11 Nonqualified plans | 12a See instructions for box 12 | | |
| 14 Other | 12b | | |
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| | 3rd party sick pay | | |
| e/f Employee's name, address and ZIP code SAHITHI TALASILA 921 PINNACLE BREEZE DRIVE APT I10 HASLET, TX 76052 | | | |
| 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 | | |

Federal Filing Copy
W-2 Wage and Tax Statement
2023
OMB No. 1545-0008
Copy B to be filed with employee's Federal Income Tax Return.

| | | | |
|--|--------------------------------|-------|-------------------|
| 1 Wages, tips, other comp. | 2 Federal income tax withheld | | |
| 70833.30 | 5363.30 | | |
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| 000032 RB/XNG | | | A 7 |
| c Employer's name, address, and ZIP code APP DYNAMIC SYSTEM LLC 2525 US HWY 130 BLDG E STE 103 CRANBURY, NJ 08512 | | | |
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| 7 Social security tips | 8 Allocated tips | | |
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| 14 Other | 12b | | |
| | 12c | | |
| | 12d | | |
| 13 Stat emp. | Ret. plan | | |
| | 3rd party sick pay | | |
| e/f Employee's name, address and ZIP code SAHITHI TALASILA 921 PINNACLE BREEZE DRIVE APT I10 HASLET, TX 76052 | | | |
| 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 | | |

State Reference Copy
W-2 Wage and Tax Statement
2023
OMB No. 1545-0008
Copy 2 to be filed with employee's State Income Tax Return.

| | | | |
|--|--------------------------------|-------|-------------------|
| 1 Wages, tips, other comp. | 2 Federal income tax withheld | | |
| 70833.30 | 5363.30 | | |
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| 5 Medicare wages and tips | 6 Medicare tax withheld | | |
| d Control number | Dept. | Corp. | Employer use only |
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| | 3rd party sick pay | | |
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| 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 | | |

City or Local Reference Copy
W-2 Wage and Tax Statement
2023
OMB No. 1545-0008
Copy 2 to be filed with employee's City or Local Income Tax Return.