## 2023 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Employer use only KY/3SD 000013 Employer's name, address, and ZIP code KRG SYSTEMS LLC

2010 VALLEY VIEW LN STE 130 **FARMERS** BRANCH, TX 75234

Batch #91384

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

**MOUNIKA NEELAM** 1109 MEADOW CREEK DRIVE **APT 213** 

IH	VING, 1X 75038				
b	Employer's FED ID number 35-2675395	a Employee's SSA number XXX-XX-9394			
1	Wages, tips, other comp.	2 Federal income tax withheld			
	14000.00	1790.08			
3	Social security wages	4 Social security tax withheld			
	14000.00	868.00			
5	Medicare wages and tips	6 Medicare tax withheld			
	14000.00	203.00			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	12a See instructions for box 12			
1/1	Other	12b			
	Other	12c			
		12d			
		13 Stat emp Ret. plan 3rd party sick pa			
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 Social Security Wages Box 3 of W-2 Box 1 of W-2

Medicare Wages Box 5 of W-2

Gross Pay 14,000.00 14,000.00 14,000.00 Reported W-2 Wages 14,000.00 14,000.00 14,000.00

2. Employee Name and Address.

## **MOUNIKA NEELAM** 1109 MEADOW CREEK DRIVE APT 213 TX 75038 IRVING,

D 2023 ADP, Inc.

1	Wages, tips, other of 140	2 Federal income tax withheld 1790.08				
3 Social security wages 14000.00			4 Social security tax withheld 868.00			
5	Medicare wages and 140	6 Medicare tax withheld 203.00				
d	Control number	Dept.	Corp.	Employer	use only	
000013 KY/3SD			Α	8		
c Employer's name, address, and ZIP code						

KRG SYSTEMS LLC 2010 VALLEY VIEW LN STE 130 **FARMERS** BRANCH, TX 75234

b	Employer's FED ID number 35-2675395	a Employee's SSA number XXX-XX-9394		
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 an	d ZIP code		

## **MOUNIKA NEELAM** 1109 MEADOW CREEK DRIVE **APT 213** IRVING, TX 75038

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

1 Wages, tips, other comp 14000.0		2 Federal income tax withheld 1790.08			
3 Social security wages 14000.0		4 Social security tax withheld 868.00			
5 Medicare wages and tipe 14000.0		licare tax withh	eld 203.00		
d Control number D	ept. Corp.	Employer	use only		
000013 KY/3SD		Α	8		

KRG SYSTEMS LLC 2010 VALLEY VIEW LN STE 130 **FARMERS** BRANCH, TX 75234

b	Employer's FED ID number 35-2675395	a Employee's SSA number XXX-XX-9394			
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 a	and ZIP code			

**MOUNIKA NEELAM** 1109 MEADOW CREEK DRIVE APT 213 IRVING, TX 75038

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	Local	ity nam	е	

State Reference Wage and Tax Statement Copy 2 to be filed with employee's State Incor

1	Wages, tips, other of	2 Federal income tax withheld 1790.08				
3	Social security wage	4 Social security tax withheld 868.00				
5	Medicare wages and 140	tips 00.00	6 Medica	6 Medicare tax withheld 203.00		
d	Control number	Dept.	Corp.	Employer	use only	
00	0013 KY/3SD			Α	8	
С	Employer's name, a	ddress, ar	nd ZIP cod	le		
STE 130 FARMERS BRANCH, TX 75234						
b	Employer's FED ID 35-267539	a Employee's SSA number XXX-XX-9394				
7	Social security tips		8 Allocated tips			
9	)		10 Dependent care benefits			

12c 12d

13 Stat emp. Ret. plan 3rd party sick pay

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

14 Other

**MOUNIKA NEELAM** 1109 MEADOW CREEK DRIVE **APT 213** IRVING, TX 75038

		,			
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 Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Retur