



**W-2** Wage and Tax Statement **2023**  
 Copy C for employee's records. OMB No. 1545-0008

**d** Control number 000008 Dept. K7/80I Corp. Employer use only **A**

**c** Employer's name, address, and ZIP code  
**3D TECHNOLOGIES LLC**  
**423 W WHEATLAND RD**  
**APT 103B**  
**DUNCANVILLE, TX 75116 4605**  
 Batch #91793

**e/f** Employee's name, address, and ZIP code  
**VENKATA SAI AMULY KOMATINENI**  
**8290 GATE PARKWAY**  
**WEST UNIT 1407**  
**JACKSONVILLE, FL 32216**

**b** Employer's FED ID number **38-4053952** **a** Employee's SSA number **XXX-XX-4238**

<b>1</b> Wages, tips, other comp. <b>14080.00</b>	<b>2</b> Federal income tax withheld <b>1807.68</b>
<b>3</b> Social security wages <b>14080.00</b>	<b>4</b> Social security tax withheld <b>872.96</b>
<b>5</b> Medicare wages and tips <b>14080.00</b>	<b>6</b> Medicare tax withheld <b>204.16</b>
<b>7</b> Social security tips	<b>8</b> Allocated tips
<b>9</b>	<b>10</b> Dependent care benefits
<b>11</b> Nonqualified plans	<b>12a</b> See instructions for box 12
<b>14</b> Other	<b>12b</b>
	<b>12c</b>
	<b>12d</b>
	<b>13</b> Stat emp. Ret. plan 3rd party sick pay
<b>15</b> State <b>AZ</b> Employer's state ID no. <b>38-4053952</b>	<b>16</b> State wages, tips, etc. <b>14080.00</b>
<b>17</b> State income tax <b>281.60</b>	<b>18</b> Local wages, tips, etc.
<b>19</b> Local income tax	<b>20</b> 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	AZ. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	14,080.00	14,080.00	14,080.00	14,080.00
Reported W-2 Wages	14,080.00	14,080.00	14,080.00	14,080.00

2. Employee Name and Address.

**VENKATA SAI AMULY KOMATINENI**  
**8290 GATE PARKWAY**  
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Federal Filing Copy  
**W-2** Wage and Tax Statement **2023**  
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

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AZ. State Reference Copy  
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