



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

d Control number 000019 KY/XQI Dept. Corp. Employer use only 21

c Employer's name, address, and ZIP code  
**AVJ SOLUTIONS INC**  
 1333 CORPORATE DR STE 104  
 IRVING, TX 75038 2516  
 Batch #90558

e/f Employee's name, address, and ZIP code  
**ARUNA SOPINTI**  
 9500 WEST RD  
 APT 2107  
 HOUSTON, TX 77064

b Employer's FED ID number 85-1821292 a Employee's SSA number XXX-XX-3836

1 Wages, tips, other comp. 46329.60	2 Federal income tax withheld 3477.90
3 Social security wages 46329.60	4 Social security tax withheld 2872.44
5 Medicare wages and tips 46329.60	6 Medicare tax withheld 671.78
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	46,329.60	46,329.60	46,329.60
Reported W-2 Wages	46,329.60	46,329.60	46,329.60

2. Employee Name and Address.

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

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