2023 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement Copy Office Included Property Statement Corp. Co

SQUAD SOFTWARE INC 33 WOOD AVE S STE 600 ISELIN, NJ 08830

Batch #91804

e/f Employee's name, address, and ZIP code
VIJAYASIMHA BONAGIRY
1701 EAST ROYAL LANE
APT #4206

IRVING, TX 75229 b Employer's FED ID number a Employee's SSA number 84-4188530 XXX-XX-8891 Wages, tips, other comp Federal income tax withheld 25027.50 4808.79 Social security wages Social security tax withheld 25027.50 1551.71 Medicare wages and tips 6 Medicare tax withheld 25027.50 362.90 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other 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.

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 Wages Wages Wages Wages Box 1 of W-2 Box 3 of W-2 Box 5 of W-2

 Gross Pay
 25,027.50
 25,027.50
 25,027.50

 Reported W-2
 Wages
 25,027.50
 25,027.50
 25,027.50

2. Employee Name and Address.

VIJAYASIMHA BONAGIRY 1701 EAST ROYAL LANE APT #4206 IRVING, TX 75229

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1 Wages, tips, other co	2 Federal income tax withheld 4808.79				
3 Social security wage 2502	cial security wages 25027.50		4 Social security tax withheld 1551.71		
5 Medicare wages and 2502	tips 27.50	6 Medica	re tax withh	eld 362.90	
d Control number	Dept.	Corp.	Employer	use only	
000204 KH/SPF		A		2	
C Employer's name address and 7ID code					

20 Locality name

SQUAD SOFTWARE INC 33 WOOD AVE S STE 600 ISELIN, NJ 08830

19 Local income tax

b	Employer's FED ID number 84-4188530	a Employee's SSA number XXX-XX-8891
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 ar	nd ZIP code

VIJAYASIMHA BONAGIRY 1701 EAST ROYAL LANE

APT #4206

IRVING, TX 75229

15	State	Employer's	state ID no.	16 State	wages,	tips, etc.
17	State	income tax		18 Loca	wages,	tips, etc.
19	Local	income tax		20 Local	ity nam	е

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

1 Wages, tips, other comp. 25027.50			2 Federal income tax withheld 4808.79		
3 Social security wages 25027.50		4 Social security tax withheld 1551.71			
Medicare	wages and	tips 27.50	6 Medica	re tax withh	neld 362.90
Control n	umber	Dept.	Corp.	Employer	use only
0204	KH/SPF			Α	2
	Medicare Control n	2502 Medicare wages and 2502 Control number 0204 KH/SPF	25027.50 Medicare wages and tips 25027.50 Control number Dept. 0204 KH/SPF	25027.50	25027.50 Medicare wages and tips 25027.50 Control number Dept. Corp. Employer 0204 KH/SPF A

SQUAD SOFTWARE INC 33 WOOD AVE S STE 600 ISELIN, NJ 08830

b	Employer's FED ID number 84-4188530	a Employee's SSA number XXX-XX-8891		
7	Social security tips	8 Allocated tips		
9		10 Dependent care benefits		
11	Nonqualified plans	12 a		
14	Other	12b		
		12c		
		12d		
		13 Stat emp. Ret. plan 3rd party sick pay		

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

VIJAYASIMHA BONAGIRY 1701 EAST ROYAL LANE APT #4206 IRVING, TX 75229

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 Cop
Wage and Tax
Statement
Copy 2 to be filed with employee's State Income Tax
Return

2023 OMB No. 1545-0008

1	1 Wages, tips, other comp. 25027.50		2 Federal income tax withheld 4808.79			
3	Social security wage	es 27.50	4 Social security tax withheld 1551.71			
5	Medicare wages and 2502	tips 27.50	6 Medica	re tax withho	ald 362.90	
d	Control number	Dept.	Corp.	Employer	use only	
00	00204 KH/SPF			Α	2	
С	Employer's name, a	ddress, a	nd ZIP cod	e		
1						

b	Employer's FED ID number 84-4188530	a Employee's SSA number XXX-XX-8891				
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 party				

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

VIJAYASIMHA BONAGIRY 1701 EAST ROYAL LANE APT #4206 IRVING, TX 75229

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

Copy 2 to be filed with employee's City or Local Income Tax Reference.