



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

d Control number 000049 Dept. KG/MNF Corp. A Employer use only 4

c Employer's name, address, and ZIP code  
**INTECA IT SOLUTIONS LLC**  
 10130 MALLARD CREEK RD  
 SUITE 235  
 CHARLOTTE, NC 28262  
 Batch #90361

e/f Employee's name, address, and ZIP code  
**VENKATA SRI LAKSH ANNAPUREDDY**  
 5314 CARNABY ST  
 APT 249  
 IRVING, TX 75038

b Employer's FED ID number 83-3365194 a Employee's SSA number XXX-XX-6301

1 Wages, tips, other comp. 86245.25 2 Federal income tax withheld 11234.46

3 Social security wages 86245.25 4 Social security tax withheld 5347.21

5 Medicare wages and tips 86245.25 6 Medicare tax withheld 1250.56

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	87,152.00	87,152.00	87,152.00
Less Other Cafe 125	906.75	906.75	906.75
<b>Reported W-2 Wages</b>	<b>86,245.25</b>	<b>86,245.25</b>	<b>86,245.25</b>

2. Employee Name and Address.

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 IRVING, TX 75038

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

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

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