2023 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Corp. Employer use only RB/ZIH Employer's name, address, and ZIP code

IT PREMIA GROUP INC 2331 MUSTANG DR SUITE 400 GRAPEVINE, TX 76051

Batch #90510

e/f Employee's name, address, and ZIP code JEEVAN CHOUDHARY KADAMBALA 705 N DEE ROAD

PARK RIDGE, IL 60068

Employer's FED ID number a Employee's SSA numbe 46-3227229 XXX-XX-9627 Wages, tips, other comp Federal income tax withheld 35932.35 4101.10 Social security wages Social security tax withheld 35932.35 2227.81 Medicare wages and tips 6 Medicare tax withheld 35932.35 521.02 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. 46-3227229 000 35932.35 17 State income tax 8 Local wages, tips, etc. 1778.64 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 Medicare IL. State Wages, Compensation Wages Wages Tips, Etc. Box 16 of W-2 Box 3 of W-2 Box 1 of W-2 Box 5 of W-2

Gross Pay 35,932.35 35,932.35 35,932.35 35,932.35 Reported W-2 Wages 35,932.35 35,932.35 35,932.35 35,932.35

2. Employee Name and Address.

JEEVAN CHOUDHARY KADAMBALA 705 N DEE ROAD PARK RIDGE, IL 60068

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1 Wages, tips, other c	2 Federal income tax withheld 4101.10				
3 Social security wage 3593	4 Social security tax withheld 2227.81				
5 Medicare wages and 3593	6 Medicare tax withheld 521.02				
d Control number Dept.		Corp.	Employer	use only	
000129 RB/ZIH			Α		
C Employer's name address and ZIP code					

IT PREMIA GROUP INC 2331 MUSTANG SUITE 400 DR GRAPEVINE, TX 76051

b	Employer's FED ID number 46-3227229	a Employee's SSA number XXX-XX-9627			
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			

JEEVAN CHOUDHARY KADAMBALA 705 N DEE ROAD PARK RIDGE, IL 60068

15 State	Employer's state ID no. 46-3227229 000	16 State wages, tips, etc. 35932.35
17 State	income tax 1778.64	18 Local wages, tips, etc.
19 Local	income tax	20 Locality name
	Endoral Eili	ing Conv

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

1 Wages, tips, other comp. 35932.35		2 Federal income tax withheld 4101.10				
3 Social security wages 35932.35			4 Social security tax withheld 2227.81			
5 Medicare wages and tips 35932.35			6 Medicare tax withheld 521.02			
d	Control number	Dept.	Corp.	Employer use only		
00	00129 RB/ZII	I	A			
С	Employer's name,	address, a	nd ZIP code	9		

b	Employer's FED ID number 46-3227229 a Employee's SSA number XXX-XX-9627			
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	nd ZIP code		

JEEVAN CHOUDHARY **KADAMBALA** 705 N DEE ROAD PARK RIDGE, IL 60068

15 State	Employer's state ID no.	16 State wages, tips, etc. 35932.35				
IL	46-3227229 000	35932.35				
17 State income tax		8 Local wages, tips, etc.				
	1778.64					
19 Local	income tax	20 Locality name				
	IL State Refe	erence Copy				

Wage and Tax Statement

1	Wages, tips, other comp. 35932.35			2 Federal income tax withheld 4101.10			
3	3 Social security wages 35932.35		4 Social security tax withheld 2227.81				
5	5 Medicare wages and tips 35932.35			6 Medicare tax withheld 521.02			
d	d Control number Dept.			Corp.	Employer use only	,	
00	000129 RB/ZIH				Α		
С	c Employer's name, address, and ZIP code						

IT PREMIA GROUP INC 2331 MUSTANG SUITE 400 DR GRAPEVINE, TX 76051

b	Employer's FED ID number	a Employee's SSA number			
	46-3227229	XXX-XX-9627			
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 pa			

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

JEEVAN CHOUDHARY KADAMBALA 705 N DEE ROAD PARK RIDGE, IL 60068

15 State	Employer's state 46-3227229	ID no. 000	16	State	wages,	tips, etc. 35932.35
17 State	income tax		18	Local	wages,	tips, etc.
	1778.	64				
19 Local	income tax		20	Local	ity nam	е

IL.State Filing Copy Wage and Tax

Statement

Copy 2 to be filed with employee's State Income Tax Return