



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

d Control number 000017 KY/WO6 Dept. Corp. Employer use only 1

c Employer's name, address, and ZIP code
 AGILEITSERVICE LLC
 6300 STONEWOOD DRIVE
 SUITE 106-C
 PLANO, TX 75024
 Batch #91378

e/f Employee's name, address, and ZIP code
 MOUNIKA BETHALA
 7750 LUCERNE DR
 APT O-4
 MIDDLEBURG HEIGHT, OH 44130

b Employer's FED ID number 81-4745187 **a** Employee's SSA number XXX-XX-9438

1 Wages, tips, other comp. 58399.50	2 Federal income tax withheld 8496.50
3 Social security wages 58399.50	4 Social security tax withheld 3620.77
5 Medicare wages and tips 58399.50	6 Medicare tax withheld 846.79
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 OH 54-206476 1	16 State wages, tips, etc. 58399.50
17 State income tax 1707.00	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	OH. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	58,399.50	58,399.50	58,399.50	58,399.50
Reported W-2 Wages	58,399.50	58,399.50	58,399.50	58,399.50

2. Employee Name and Address.

MOUNIKA BETHALA
7750 LUCERNE DR
APT O-4
MIDDLEBURG HEIGHT, OH 44130

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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

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

OH.State Filing Copy
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