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c Employer's name, address, a				
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e/f Employee's name, address, a	and ZIP co	de		
RAVALI VEMULAPAL	11			
6141 MARGARITA W				
FREDERICK MD 217	03			
Employer's FED ID number	a Emplo	ovee's SS	SA numb	ber
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26-2346340		oyee's SS XXX-X al incom	<u>X-145'</u>	1
26-2346340		<u> XXX-X</u>	<u>X-145'</u>	1 hheld
26-2346340 Wages, tips, other comp. 117762.76	<sup>2</sup> Feder	XXX-X al incom	X-145 <sup>,</sup> e tax wit 1822	1 <sup>hheld</sup> 3.90
26-2346340 Wages, tips, other comp. 117762.76	<sup>2</sup> Feder	<u> XXX-X</u>	X-145 e tax wit 1822 / tax wit	1 hheld 3.90 hheld
26-2346340 1 Wages, tips, other comp. 117762.76 3 Social security wages 121054.60	<sup>2</sup> Feder 4 Socia	XXX-X al incom	X-145 <sup>4</sup> e tax wit 1822 / tax wit 750	1 <sup>hheld</sup> 3.90
26-2346340           1         Wages, tips, other comp.           117762.76           3         Social security wages           121054.60	<sup>2</sup> Feder 4 Socia	XXX-X al incom	X-145 e tax wit 1822 / tax wit 750 /ithheld	1 hheld 3.90 hheld
26-2346340           Wages, tips, other comp.           117762.76           3 Social security wages           121054.60           5 Medicare wages and tips           121054.60	<ul><li><sup>2</sup> Feder</li><li>4 Socia</li><li>6 Medic</li></ul>	XXX-X al incom I security are tax w	X-145 e tax wit 1822 / tax wit 750 /ithheld	1 hheld 3.90 hheld 5.39
26-2346340           1         Wages, tips, other comp.           117762.76           3         Social security wages           121054.60           5         Medicare wages and tips           121054.60	<sup>2</sup> Feder 4 Socia	XXX-X al incom I security are tax w	X-145 e tax wit 1822 / tax wit 750 /ithheld	1 hheld 3.90 hheld 5.39
26-2346340           1         Wages, tips, other comp.           117762.76           3         Social security wages           121054.60           5         Medicare wages and tips           121054.60           7         Social security tips	<ul><li><sup>2</sup> Feder</li><li>4 Socia</li><li>6 Medic</li></ul>	XXX-X al incom I security are tax w ated tips	X-145 e tax wit 1822 / tax with 750 /ithheld 175	1 hheld 3.90 hheld 5.39 5.29
26-2346340           1         Wages, tips, other comp.           117762.76           3         Social security wages           121054.60           5         Medicare wages and tips           121054.60           7         Social security tips	<ol> <li>Feder</li> <li>Feder</li> <li>Socia</li> <li>Medic</li> <li>Alloca</li> </ol>	XXX-X al incom I security are tax w ated tips	X-145 e tax wit 1822 / tax with 750 /ithheld 175	1 hheld 3.90 hheld 5.39 5.29
26-2346340           1         Wages, tips, other comp.           117762.76           3         Social security wages           121054.60           5         Medicare wages and tips           121054.60           7         Social security tips	<ol> <li>Feder</li> <li>Socia</li> <li>Medic</li> <li>Medica</li> <li>Alloca</li> <li>Depen</li> <li>12a See inst</li> </ol>	XXX-X al income I security are tax we ated tips dent care structions f	X-145 e tax with 1822 / tax with 750 /ithheld 175 e benefit	1 hheld 3.90 hheld 5.39 5.29
26-2346340           1         Wages, tips, other comp.           117762.76           3         Social security wages           121054.60           5         Medicare wages and tips           121054.60           7         Social security tips	<ul> <li>2 Feder</li> <li>4 Socia</li> <li>6 Medic</li> <li>8 Alloca</li> <li>10 Depen</li> <li>12a See ins</li> <li>C</li> </ul>	XXX-X al income I security are tax w ated tips dent care structions f	X-145 e tax wit 1822 / tax witi 750 //ithheld 175 e benefit	1 hheld 3.90 hheld 5.39 5.29 5.29
26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         9         11       Nonqualified plans	<ul> <li>2 Feder</li> <li>4 Socia</li> <li>6 Medic</li> <li>8 Alloca</li> <li>10 Depen</li> <li>12a See ins</li> <li>12b D</li> </ul>	XXX-X al income I security are tax w ated tips dent care structions f	X-145 e tax wit 1822 / tax witi 750 //ithheld 175 e benefit or box 12 99. 3291.	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84
26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         9         11       Nonqualified plans	2 Feder 4 Socia 6 Medic 8 Alloca 10 Depen 12a Seeins C 12b D 12c V	XXX-X al income I security are tax w ated tips dent care structions f	X-145 e tax wit 1822 / tax with 750 /ithheld 175 e benefit or box 12 99. 3291. 3834.	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84 00
26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         3         11       Nonqualified plans         14       Other	2 Feder 4 Socia 6 Medic 8 Alloca 10 Depen 12a See in C 12b D 12c V 12c V 12d V	XXX-X al income I security are tax w ated tips dent care structions f	X-145 e tax wit 1822 / tax wit 750 /ithheld 175 benefit or box 12 99. 3291. 3834. 2400	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84 00 .00
26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         9         11       Nonqualified plans         14       Other	2 Feder 4 Socia 6 Medic 8 Alloca 10 Depen 12a Seeins C 12b D 12c V	XXX-X al income I security are tax w ated tips dent care structions f	X-145 e tax wit 1822 / tax wit 750 /ithheld 175 benefit or box 12 99. 3291. 3834. 2400	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84 00 .00
26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         9         11       Nonqualified plans         14       Other	<ol> <li>Feder</li> <li>Feder</li> <li>Socia</li> <li>Medic</li> <li>Alloca</li> <li>Alloca</li> <li>Depen</li> <li>Depen</li> <li>12a See in: CI</li> <li>12b DI</li> <li>12b DI</li> <li>12c DI</li> <li>12c WI</li> <li>13 Stat err</li> </ol>	XXX-X al income I security are tax w ated tips dent care structions f	X-145 e tax wit 1822 / tax witi 750 //ithheld 175 e benefit or box 12 99, 3291, 3834, 2400, n 3rd party	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84 00 .00
26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         9         11       Nonqualified plans         14       Other         7682.08 RSTST         15       State         Employer's state ID no	<ol> <li>Feder</li> <li>Feder</li> <li>Socia</li> <li>Medic</li> <li>Alloca</li> <li>Alloca</li> <li>Depen</li> <li>Depen</li> <li>12a See in: CI</li> <li>12b DI</li> <li>12b DI</li> <li>12c DI</li> <li>12c WI</li> <li>13 Stat err</li> </ol>	XXX-X al income I security are tax w ated tips dent care structions f	X-145 e tax wit 1822 / tax witi 750 //ithheld 175 e benefit or box 12 99, 3291, 3834, 2400, n 3rd party	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84 00 .00
26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         3         11       Nonqualified plans         14       Other         7682.08 RSTST         15       State         Employer's state ID not         TOTAL       STATE	2 Feder 4 Socia 6 Medic 8 Alloca 10 Depen 12a See in: C 12b D 12c V 12c V 13 Stater 16 State	XXX-X al income I security are tax w ated tips dent care structions f p Ret.pla wages, ti	X-145 e tax wit 1822 r tax witt 750 rithheld 175 e benefit or box 12 99. 3834. 3834. 2400. n 3rd party ps, etc.	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84 00 .00
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26-2346340         1       Wages, tips, other comp.         117762.76         3       Social security wages         121054.60         5       Medicare wages and tips         121054.60         7       Social security tips         9         11       Nonqualified plans         14       Other         7682.08 RSTST         15       State         Employer's state ID not         TOTAL       STATE	2 Feder 4 Socia 6 Medic 8 Alloca 10 Depen 12a See in: C 12b D 12c V 12c V 13 Stater 16 State	XXX-X al incom I security are tax w ated tips dent care structions f mp Ret.pla wages, ti wages, ti	X-145 e tax wit 1822 r tax witt 750 rithheld 175 e benefit or box 12 99. 3834. 3834. 2400. n 3rd party ps, etc.	1 hheld 3.90 hheld 5.39 5.29 5.29 s 36 84 00 .00

# 2023 W-2 and EARNINGS SUMMARY



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	VA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	123,040.12	123,040.12	123,040.12	4,438.50
Plus GTL (C-Box 12)	99.36	99.36	99.36	0.00
Less 401(k) (D-Box 12)	3,291.84	N/A	N/A	130.91
Less Other Cafe 125	884.88	884.88	884.88	36.87
Less Cafe 125 HSA (W-Box 12) Reported W-2 Wages	1,200.00 <b>117,762.76</b>	1,200.00 <b>121,054.60</b>	1,200.00 <b>121,054.60</b>	50.00 <b>4,220.72</b>

2. Employee Name and Address.

# RAVALI VEMULAPALLI 6141 MARGARITA WAY FREDERICK MD 21703

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1 Wages, tips, other comp. 117762.76	2 Federal income tax withheld 18223.90	1 Wages, tips, other comp. 117762.76	2 Federal income tax withheld 18223.90	1 Wages, tips, other comp. 117762.76	2 Federal income tax withheld 18223.90
3 Social security wages 121054.60	4 Social security tax withheld 7505.39	3 Social security wages 121054.60	4 Social security tax withheld 7505.39	<sup>3</sup> Social security wages 121054.60	4 Social security tax withheld 7505.39
5 Medicare wages and tips 121054.60	6 Medicare tax withheld 1755.29	5 Medicare wages and tips 121054.60	6 Medicare tax withheld 1755.29	5 Medicare wages and tips 121054.60	6 Medicare tax withheld 1755.29
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
000248 DALL/V14 003300	A 475	000248 DALL/V14 003300	A 475	000248 DALL/V14 003300	A 475
c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	nd ZIP code
DIGITAL TURBI	NE MEDIA IN	DIGITAL TURBI	NE MEDIA IN	DIGITAL TURBI	NE MEDIA IN
410 BLACKWEL		410 BLACKWEL DURHAM NC 27		410 BLACKWEL	
b Employer's FED ID number 26-2346340	a Employee's SSA number XXX-XX-1451	b Employer's FED ID number 26-2346340	a Employee's SSA number XXX-XX-1451	b Employer's FED ID number 26-2346340	a Employee's SSA number XXX-XX-1451
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 99.36	11 Nonqualified plans	<sup>12a</sup> D 130.91	11 Nonqualified plans	<sup>12a</sup> D 130.91
14 Other	<sup>12b</sup> D 3291.84	14 Other	<sup>12b</sup> W 100.00	14 Other	<sup>12b</sup> W 100.00
7682.08 RSTST	<sup>12c</sup> V 3834.00	7682.08 RSTST	<sup>12c</sup> AA 130.91	7682.08 RSTST	<sup>12c</sup> AA 130.91
	<sup>12d</sup> W 2400.00		12d		12d
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay
e/f Employee's name, address an	nd ZIP code	e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	nd ZIP code
RAVALI VEMULAPAL	LI	RAVALI VEMULAPAL	LI	RAVALI VEMULAPAL	LI
6141 MARGARITA W	AY	6141 MARGARITA W	AY	6141 MARGARITA W	AY
FREDERICK MD 2170	)3	FREDERICK MD 2170	)3	FREDERICK MD 2170	)3
15 State Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.	15 State Employer's state ID no. VA 30262346340F001	16 State wages, tips, etc. 4220.72	15 State Employer's state ID no VA 30262346340F001	
17 State income tax 8864.42	18 Local wages, tips, etc.	17 State income tax 210.58	18 Local wages, tips, etc.	17 State income tax 210.58	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fil	ing Copy	VA.State Re	ference Copy	VA.State Fili	ng Copy
<b>VALO</b> Wage an		Wage ar		Wage an	
<b>VV-Z</b> Stateme		W-2 Wage ar Statement		W-2 stateme	
Copy B to be filed with employee's Fe	ederal Income Tax Return.	Copy 2 to be filed with employee's State	Income Tax Return.	Copy 2 to be filed with employee's State	e Income Tax Return.

Employee Refe	erence Copy
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W-2 Wage a Stateme	//// <
Copy C for employee's records.	OMB No. 1545-0008
d Control number Dept.	Corp. Employer use only
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c Employer's name, address, a	and ZIP code
DIGITAL TURBI	
C	
410 BLACKWEI	_L ST #200A
DURHAM NC 2	
	Batch #03264
e/f Employee's name, address, a	and ZIP code
RAVALI VEMULAPAL	.LI
6141 MARGARITA W	AY
FREDERICK MD 217	03
b Employer's FED ID number	a Employee's SSA number
26-2346340	XXX-XX-1451
1 Wages, tips, other comp.	2 Federal income tax withheld
3 Social security wages	4 Social security tax withheld
C Medicere wares and time	6 Medicare tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 AA 3291.84
14. Other	12b DD 12059.60
14 Other	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State Employer's state ID no TOTAL STATE	. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name
	1

1			2 Federa	al income	e tax withheld	
3			4 Social security tax withheld			
5	Medio	care wages an	d tips	6 Medic	are tax w	rithheld
d	Cont	rol number	Dept.	Corp.	Emplo	oyer use only
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	(	DIGITAL C 410 BLA				
h		DURHAM	NC 2	7701		
b	Emple	DURHAM	NC 2 number 40	7701	yee's SS XXX-X	A number X-1451
b 7	Emple	DURHAM	NC 2 number 40	7701	yee's SS	A number
	Emple	DURHAM	NC 2 number 40	a Emplo 8 Alloca	vyee's SS XXX-X ted tips	A number
7 9	Emple	DURHAM	NC 2 number 40	a Emplo 8 Alloca 10 Depen	yee's SS XXX-X ted tips dent care	A number X-1451
7 9 11	Emple	DURHAM over's FED ID 26-23463/ Il security tips ualified plans	NC 2 number 40	a Emplo 8 Alloca 10 Depen 12a See in	yee's SS XXX-X ted tips dent care	A number X-1451 e benefits ns for box 12
7 9 11	Emple Socia Nonq	DURHAM over's FED ID 26-23463/ Il security tips ualified plans	NC 2 number 40	a Emplo 8 Alloca 10 Depen 12a See in AA	yee's SS XXX-X ted tips dent care	A number X-1451 e benefits ns for box 12 3291.84
7 9 11	Emple Socia Nonq	DURHAM over's FED ID 26-23463/ Il security tips ualified plans	NC 2 number 40	a Emplo 8 Alloca 10 Depen 12a See in AA 12b DD	yee's SS XXX-X ted tips dent care	A number X-1451 e benefits ns for box 12 3291.84
7 9 11	Emple Socia Nonq	DURHAM over's FED ID 26-23463/ Il security tips ualified plans	NC 2 number 40	a     Emplo       a     Emplo       8     Alloca       10     Depen       12a     See ii       AAL       12b     DD       12c     12d	yee's SS XXX-X ted tips dent card nstructio	A number X-1451 e benefits ns for box 12 3291.84

# Bit State Employer's state ID no. TOTAL STATE 16 State wages, tips, etc. 19 Local income tax 18 Local wages, tips, etc. Federal Filing Copy

Wage and Tax

Statement

Copy B to be filed with employee's Federal Income Tax Return

**W-2** 

2023 OMB No. 1545-0

0008



# ADDITIONAL W-2 FOR BOX 12 OR BOX 14 OVERFLOW

# RAVALI VEMULAPALLI 6141 MARGARITA WAY FREDERICK MD 21703

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MD.State R	1,5
W-2 Wage a Statement	/ 1 / 5
	OMB No. 1545-0008
Copy 2 to be filed with employee's State d Control number Dept.	e Income Tax Return. Corp. Employer use only
000248 DALL/V14 003300	A 477
c Employer's name, address, a	and ZIP code
C	
410 BLACKWEI	
DURHAM NC 2	7701
	Batch #03264
	Batch #05204
e/f Employee's name, address, a	and ZIP code
RAVALI VEMULAPAL	.LI
6141 MARGARITA W	AY
FREDERICK MD 217	03
b Employer's FED ID number	a Employee's SSA number
26-2346340 1 Wages, tips, other comp.	2 Federal income tax withheld
117762.76	18223.90
3 Social security wages	4 Social security tax withheld
121054.60	7505.39
5 Medicare wages and tips	6 Medicare tax withheld
121054.60	1755.29
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
	-
11 Nonqualified plans	12a See instructions for box 12 C 99.36
14 Other	12b D 3160.93
14 Other	12c VI 3834.00
	12d W 2300.00
	13 Stat emp. Ret. plan 3rd party sick pay
15 State Employer's state ID no	
MD 19994857	113542.04
17 State income tax	18 Local wages, tips, etc.
8653.84	20 Locality name

# 2023 W-2 and EARNINGS SUMMARY



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.

Gross Pay Plus GTL (C-Box 12) Less 401(k) (D-Box 12) Less Other Cafe 125 Less Cafe 125 HSA (W-Box 12) Reported W-2 Wages MD. State Wages, Tips, Etc. Box 16 of W-2 118,601.62 99.36 3,160.93 848.01 1,150.00 113,542.04

2. Employee Name and Address.

# RAVALI VEMULAPALLI 6141 MARGARITA WAY FREDERICK MD 21703

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3 Social security wages 121054.60	4 Social security tax withheld 7505.39		
5 Medicare wages and tips 121054.60	6 Medicare tax withheld 1755.29		
d Control number Dept.	Corp. Employer use only		
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c Employer's name, address,	and ZIP code		
DIGITAL TURB	INE MEDIA IN		
C			
410 BLACKWE			
DURHAM NC 2	27701		
b Employer's FED ID number	a Employee's SSA number		
26-2346340	XXX-XX-1451		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
	· · · · · · · · · · · · · · · · · · ·		
11 Nonqualified plans	12a See instructions for box 12 C 99.36		
14 Other	<sup>12b</sup> D 3160.93		
	<sup>12c</sup> V 3834.00		
	<sup>12d</sup> W 2300.00		
	13 Stat emp.Ret. plan 3rd party sick pay		
e/f Employee's name, address a	and ZIP code		
RAVALI VEMULAPA	LLI		
6141 MARGARITA V	VAY		
FREDERICK MD 217	<b>′</b> 03		
15 State Employer's state ID no MD 19994857	113542.04		
17 State income tax 8653.84	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		
MD.State F	iling Copy		

Wage and Tax

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

2 Federal income tax withheld

18223.90

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Wages, tips, other comp. 117762.76

MD.State Re	
W-2 Wage at Statement	//// <
Copy 2 to be filed with employee's State	OMB No. 1545-0008
d Control number Dept.	Corp. Employer use only
000248 DALL/V14 003300	A 478
c Employer's name, address, a	
DIGITAL TURBI	NE MEDIA IN
410 BLACKWEI	I ST #200A
DURHAM NC 2	
	Batch #03264
e/f Employee's name, address, a	and ZIP code
6141 MARGARITA W	
FREDERICK MD 217	
_	
b Employer's FED ID number	a Employee's SSA number
26-2346340 1 Wages, tips, other comp.	2 Federal income tax withheld
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 AA 3160.93
14 Other	12b DD 12059.60
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State Employer's state ID no	16 State wages, tips, etc.
MD 19994857	
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name
	-

3 Social security wages	4 Social security tax withheld			
5 Medicare wages and tips	6 Medicare tax withheld			
d Control number Dept.	Corp. Employer use only			
000248 DALL/V14 003300		A	478	
c Employer's name, address, a	nd ZIP cod	le		
DIGITAL TURBI			1	
C				
410 BLACKWEI DURHAM NC 2		#200A		
b Employer's FED ID number 26-2346340		yee's SSA XXX-XX		
7 Social security tips	8 Alloca			
9	10 Depen	dent care	benefits	
11 Nonqualified plans		nstruction	s for box 12 3160.93	
14 Other	<sup>12b</sup> DD	1:	2059.60	
	12c			
	12d			
	13 Stat emp	. Ret. plan 3 X	rd party sick pa	
e/f Employee's name, address an RAVALI VEMULAPAL 6141 MARGARITA W FREDERICK MD 2170	.LI AY	e		
15 State Employer's state ID no MD 19994857	. 16 State v	vages, tip:	s, etc.	
17 State income tax	18 Local	wages, tip	s, etc.	
19 Local income tax	20 Locality name			
MD.State Fi	ling C	ору		
W-2 Wage and Tax 2002 Statement OMB No. 154				
Copy 2 to be filed with employee's State	e Income Tax	Return.		

2 Federal income tax withheld

1 Wages, tips, other comp.

# 2023 W-2 and EARNINGS SUMMARY

## ADDITIONAL W-2 FOR BOX 12 OR BOX 14 OVERFLOW

# RAVALI VEMULAPALLI 6141 MARGARITA WAY FREDERICK MD 21703

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## Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137 with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$22,500 (\$15,500 if you only have SIMPLE plans; \$25,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$22,500. Deferrals under code H are limited to \$7,000. However, if you were at least age 50 in 2023, your employer may have allowed an additional deferral of up to \$7,500 (\$3,500 for section 401(k) (11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

B-Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

 $C-\!-\!Taxable$  cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E-Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

 $G-\!\!-\!\!$  Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5) K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions. P—Excludable moving expense reimbursements paid directly to a

member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

R-Employer contributions to your Archer MSA. Report on Form 8853.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

 $T{--}Adoption$  benefits (not included in box 1). Complete Form 8839 to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525 for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889.

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG-Income from qualified equity grants under section 83(i)

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A.

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social **security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

### NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

### **IMPORTANT NOTE:**

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



## Notice to Employee

**Do you have to file?** Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2023 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2023 or if income is earned for services provided while you were an inmate at a penal institution. For 2023 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517.

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Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at *www.SSA.gov.* 

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2023 and more than \$9,932.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,821.20 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

Department of the Treasury - Internal Revenue Service Department

Department of the Treasury - Internal Revenue Service