



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

d Control number: 000060 R8/IKJ Dept.: Dept. Corp.: A Employer use only: 21

c Employer's name, address, and ZIP code:
AVENTERPRISE INC
 1415 HAWCREEK CIRCLE UNIT 202
 CUMMING, GA 30041

Batch #90309

e/f Employee's name, address, and ZIP code:
SRI SWETHA MACHIRAJU
 13471 NW 4TH CT
 PLANTATION, FL 33325

b Employer's FED ID number: 20-2850866 **a** Employee's SSA number: XXX-XX-0929

1 Wages, tips, other comp.: 105038.00 **2** Federal income tax withheld: 18068.57

3 Social security wages: 105038.00 **4** Social security tax withheld: 6512.36

5 Medicare wages and tips: 105038.00 **6** Medicare tax withheld: 1523.05

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: **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	105,038.00	105,038.00	105,038.00
Reported W-2 Wages	105,038.00	105,038.00	105,038.00

2. Employee Name and Address.

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W-2 Wage and Tax Statement **2023**
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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 State Income Tax Return. OMB No. 1545-0008

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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