



Employee Reference Copy <b>W-2</b> Wage and Tax Statement 2023 OMB No. 1545-0008	
Copy C for employee's records.	
d Control number 000320 KG/O4H	Dept. Corp. Employer use only A
c Employer's name, address, and ZIP code CLOUDNINE TEK LLC 10735 DAVID TAYLOR DR SUITE 320 CHARLOTTE, NC 28262  Batch #90974	
e/f Employee's name, address, and ZIP code GAYATRI PEDDI 2429 ROSETTE LANE LEANDER, TX 78641-5043	
b Employer's FED ID number 86-1941933	a Employee's SSA number XXX-XX-4876
1 Wages, tips, other comp. 12500.00	2 Federal income tax withheld 1053.25
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
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	12,500.00	12,500.00	12,500.00
Reported W-2 Wages	12,500.00	0.00	0.00

2. Employee Name and Address.

GAYATRI PEDDI  
2429 ROSETTE LANE  
LEANDER, TX 78641-5043

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7 Social security tips	8 Allocated tips	15 State Employer's state ID no.	
9	10 Dependent care benefits	16 State wages, tips, etc.	
11 Nonqualified plans	12a See instructions for box 12	17 State income tax	
14 Other	12b	18 Local wages, tips, etc.	
	12c	19 Local income tax	
	12d	20 Locality name	
	13 Stat emp. Ret. plan 3rd party sick pay		

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

1 Wages, tips, other comp. 12500.00		2 Federal income tax withheld 1053.25	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
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7 Social security tips	8 Allocated tips	15 State Employer's state ID no.	
9	10 Dependent care benefits	16 State wages, tips, etc.	
11 Nonqualified plans	12a	17 State income tax	
14 Other	12b	18 Local wages, tips, etc.	
	12c	19 Local income tax	
	12d	20 Locality name	
	13 Stat emp. Ret. plan 3rd party sick pay		

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

1 Wages, tips, other comp. 12500.00		2 Federal income tax withheld 1053.25	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
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7 Social security tips	8 Allocated tips	15 State Employer's state ID no.	
9	10 Dependent care benefits	16 State wages, tips, etc.	
11 Nonqualified plans	12a	17 State income tax	
14 Other	12b	18 Local wages, tips, etc.	
	12c	19 Local income tax	
	12d	20 Locality name	
	13 Stat emp. Ret. plan 3rd party sick pay		

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