Employee Re	ference Copy		
$\mathbf{M} \mathbf{O}$ Wage a			
VV-Z Statem			
	OMB No. 1545-0008		
Copy C for employee'srecords. d Control number Dept.	Corp. Employer use only		
000027 KC/YYF	A 4		
c Employer's name, address, a			
MESONS TECH			
8130 BAYMEADO	DWS WAY W		
SUITE 100			
JACKSONVILLE,	FL 32256		
	Batch #91078		
e/f Employee's name, address,	and ZIP code		
VIKRAM DANNARAPU			
7973 ECO SPRING F			
JACKSONVILLA, FL	32256		
Employer's FED ID number	a Employee's SSA number		
<u>61-1939675</u>	XXX-XX-9452		
Wages, tips, other comp.	² Federal income tax withheld		
19239.99	1367.79		
3 Social security wages	4 Social security tax withheld		
19239.99	1192.88		
5 Medicare wages and tips	6 Medicare tax withheld		
19239.99	070.00		
7 Social security tips	278.98		
	278.98 8 Allocated tips		
	8 Allocated tips		
9			
	8 Allocated tips 10 Dependent care benefits		
	8 Allocated tips		
11 Nonqualified plans	8 Allocated tips 10 Dependent care benefits		
1 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c		
1 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c 12c 12d		
1 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c 12c 12d		
11 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c 12c 12d 13 Stat emp Ret. plan 3rd party sick page		
11 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c 12c 12d 13 Stat emp Ret. plan 3rd party sick pay		
9 11 Nonqualified plans 14 Other 15 State Employer's state ID no 17 State income tax	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c 12d 13 Stat emp Ret. plan 3rd party sick pay 16 State wages, tips, etc.		
11 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c 12c 12d 13 Stat emp Ret. plan 3rd party sick pay		
11 Nonqualified plans 14 Other 15 State Employer's state ID no	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 12b 12c 12d 13 Stat emp Ret. plan 3rd party sick parts 16 State wages, tips, etc.		

2023 W-2 and EARNINGS SUMMARY

Social Security

19,239.99

19,239.99

Wages Box 3 of W-2 Medicare

Wages Box 5 of W-2

19,239.99

19,239.99



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
Gross Pa	,	19,239.99 19,239.99

2. Employee Name and Address.

VIKRAM DANNARAPU 7973 ECO SPRING ROAD JACKSONVILLA, FL 32256

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1 Wages, tips, other comp. 19239.99	2 Federal income tax withheld 1367.79	1 Wages, tips, other comp. 19239.99	2 Federal income tax withheld 1367.79	1 Wages, tips, other comp. 19239.99	2 Federal income tax withheld 1367.79
3 Social security wages 19239.99	4 Social security tax withheld 1192.88	3 Social security wages 19239.99	4 Social security tax withheld 1192.88	³ Social security wages 19239.99	4 Social security tax withheld 1192.88
5 Medicare wages and tips 19239.99	6 Medicare tax withheld 278.98	5 Medicare wages and tips 19239.99	6 Medicare tax withheld 278.98	5 Medicare wages and tips 19239.99	6 Medicare tax withheld 278.98
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
000027 KC/YYF	A 4	000027 KC/YYF	A 4	000027 KC/YYF	A 4
c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	nd ZIP code	c Employer's name, address, and ZIP code	
MESONS TECHN 8130 BAYMEADO SUITE 100	DLOGIES LLC WS WAY W 8130 BAYMEADOWS WAY W SUITE 100			MESONS TECHNOLOGIES LLC 8130 BAYMEADOWS WAY W SUITE 100 JACKSONVILLE, FL 32256	
JACKSONVILLE,	FL 32256 a Employee's SSA number	JACKSONVILLE,	FL 32256 a Employee's SSA number	b Employer's FED ID number	A Employee's SSA number
b Employer's FED ID number 61-1939675	XXX-XX-9452	61-1939675	XXX-XX-9452	61-1939675	XXX-XX-9452
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	11 Nonqualified plans	12a	11 Nonqualified plans	12a
14 Other	12b	14 Other 12b		14 Other	12b
	12c	12c			12c
	12d		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 pa
e/f Employee's name, address and ZIP code e/f Employee's name, address and ZIP code		nd ZIP code	e/f Employee's name, address and ZIP code		
VIKRAM DANNARAPU		VIKRAM DANNARAPU		VIKRAM DANNARAPU	
7973 ECO SPRING R	OAD	7973 ECO SPRING ROAD		7973 ECO SPRING ROAD	
JACKSONVILLA, FL	32256 JACKSONVILLA, FL 32256		JACKSONVILLA, FL	32256	
15 State Employer's state ID no.	16 State wages, tips, etc.	15 State Employer's state ID no	. 16 State wages, tips, etc.	15 State Employer's state ID no	. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	17 State income tax	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 Fi	Federal Filing Copy State Reference Copy		City or Local	Reference Copy	
W-2 Wage and Tax 2023 Statement Copy B to be filed with employee's Federal Income Tax Return. Wage and Tax 2023 Copy 2 to be filed with employee's State Income Tax Return. Wage and Tax 2023 Copy 2 to be filed with employee's State Income Tax Return.		Wage and Tax 2023 Statement Copy 2 to be filed with employee'sCity or Local Income Tax Return.			