2023 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement

d	Control	number	Dept.	Corp.	Employer
03	0844	CLI2/QFK	000710		T

782

Employer's name, address, and ZIP code **SOFTWARE**

COMPUNNEL GROUP INC

103 MORGAN LANE STE 102 **PLAINSBORO** NJ 08536

Batch #02546

e/f Employee's name, address, and ZIP code LAKSHMI GODHA MUMMADI 6713 BERMUDA AVENUE MCKINNEY TX 75070

b	1		а	Empl	oye	e's SSA	A number	r
	58-2137105				X	XX-XX	-5445	
1	Wages	Wages, tips, other comp.		Feder	ral	income	tax withh	neld
		22116.00					3031	.92
3	Social	security wages	4	Socia	al s	security	tax withh	eld
		22116.00		1371.19				.19
5	Medica	are wages and tips	6	Medic	car	e tax wi	thheld	
		22116.00					320	.68
7	Social security tips		8	Alloc	ate	d tips		
9			10	Depen	nde	nt care	benefits	
11	I1 Nonqualified plans		12	a See ir	nsti	ructionsfo	r box 12	
			12	b	Т			
14	Other		12	c	Π			
			12	d	1			
			13	Stat e	mp	Ret. plan	3rd party s	sick pay
	5 State Employer's state ID no		o . 16	State	W	ages, tip	s, etc.	
		-						
17	17 State income tax		18	3 Local	W	ages, tip	s, etc.	
19 Local income tax			20	Local	ity	name		

Wages, tips, other comp. Federal income tax withheld 22116.00 3031.92 Social security wages 22116.00 1371.19 Medicare wages and tips Medicare tax withheld 320.68 22116.00 Dept. Employer 030844 CLI2/QFK 000710 Т 782 Employer's name, address, and ZIP code

COMPUNNEL **SOFTWARE** GROUP INC 103 MORGAN LANE STE 102 PLAINSBORO NJ 08536

b	Employer's FED ID number 58-2137105	a Employee's SSA number XXX-XX-5445
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

e/f Employee's name, address and ZIP code

LAKSHMI GODHA MUMMADI 6713 BERMUDA AVENUE MCKINNEY TX 75070

	State CX	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
		Eoo	oral		ling Conv

deral Filing Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return. 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 Social Security Medicare TX. State Wages, Compensation Wages Tips, Etc. Box 16 of W-2 Wages Box 3 of W-2 Box 1 of W-2 Box 5 of W-2 Gross Pay 22,116.00 22,116.00 22,116.00 Reported W-2 Wages 22,116.00 22,116.00 22,116.00

2. Employee Name and Address.

LAKSHMI GODHA MUMMADI 6713 BERMUDA AVENUE **MCKINNEY TX 75070**

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1 Wages, tips, other comp. 22116.00	2 Federal income tax withheld 3031.92				
3 Social security wages 22116.00	4 Social security tax withheld 1371.19				
Medicare wages and tips 22116.00	6 Medicare tax withheld 320.68				
d Control number Dept.	Corp. Employer use only				
030844 CLI2/QFK 000710	т 782				
GROUP INC	OFTWARE ANE STE 102				
b Employer's FED ID number 58-2137105 7 Social security tips	a Employee's SSA number XXX-XX-5445				
7 Social security tips	8 Allocated tips				
3	10 Dependent care benefits				
11 Nonqualified plans	12a				
14 Other	12b				
	12c				
	12d				
	13 Stat emp. Ret. plan 3rd party sick pay				
e/f Employee's name, address a	nd ZIP code				
LAKSHMI GODHA MU	JMMADI				
6713 BERMUDA AVE	NUE				
MCKINNEY TX 75070					
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				
TX.State Reward Wage a Statemen	nd Tax 2023				

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

1	Wages, tips, other c	2	Federa	l income tax	withheld	
	221:			3	031.92	
3	Social security wages 22116.00			Social security tax withheld 1371.19		
5	Medicare wages and tips 22116.00			Medica	re tax withh	eld 320.68
d	Control number Dept			Corp.	Employer	use only
03	030844 CLI2/QFK 000710				T	782
С	Employer's name, a	ddress, ar	nd :	ZIP cod	e	

COMPUNNEL **SOFTWARE** GROUP INC 103 MORGAN LANE STE 102 **PLAINSBORO** NJ 08536

b Employer's FED ID number a Emp		a Employee's SSA number				
	58-2137105	XXX-XX-5445				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a				
14	Other	12b				
		12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pa				

e/f Employee's name, address and ZIP code

LAKSHMI GODHA MUMMADI 6713 BERMUDA AVENUE MCKINNEY TX 75070

15	State	Employer's	state	ID	no.	16	State wages, tips, etc.
Т	X						
17	State	income tax				18	Local wages, tips, etc.
19	Local	income tax				20	Locality name

TX.State Filing Сору Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return