Employee Reference Copy 2 Wage and Tax 2 Statement Copy C for employee's records.

000156 RF/FWS

Dept.

Corp.

Employer use only

Employer's name, address, and ZIP code SRIVEN TECHNOLOGIES LLC 20745 WILLIAMSPORT PL STE 220 ASHBURN, VA 20147

Batch #90307

e/f Employee's name, address, and ZIP code HARIKA MUGALAMARRI 6201 CHAPEL HILL BLVD APT# 1721

a Employee's SSA number XXX - XX - 4825		
2 Federal income tax withheld		
5013.19		
4 Social security tax withheld		
3816.66		
6 Medicare tax withheld		
892.61		
8 Allocated tips		
10 Dependent care benefits		
12a See instructions for box 12 D 615.59		
12b		
12c		
12d		
13 Stat emp. Ret. plan 3rd party sick p		
no. 16 State wages, tips, etc.		
18 Local wages, tips, etc.		
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

61,559.00 615.59 61,559.00 N/A

61,559.00 N/A

Less 401(k) (D-Box 12) Reported W-2 Wages

60,943.41

61,559.00

61,559.00

2. Employee Name and Address.

HARIKA MUGALAMARRI 6201 CHAPEL HILL BLVD APT# 1721 PLANO, TX 75093

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Fold and Detach Here

1	Wages, tips, other comp. 60943.41 Social security wages 61559.00 Medicare wages and tips 61559.00					x withheld 5013.19
3					x withheld 3816.66	
5			6 Medica	are tax with	held 892.61	
d	Control number 00156 RF/FWS	Dept.	Corp.	Employ A	er use only 34	

SRIVEN TECHNOLOGIES LLC 20745 WILLIAMSPORT PL STE 220

ASHBURN, VA 20147

b Em	ployer's FED ID number 27-1145284	a Employee's SSA number XXX-XX-4825		
7 Soc	cial security tips	8 Allocated tips		
9		10 Depen	ident care benefits	
11 No	nqualified plans	12a See i	instructions for box 12 615.59	
14 Oti	ner	12b		
		12c		
		12d		
		13 Stat em	p. Ret. plan 3rd party sick pay	

HARIKA MUGALAMARRI 6201 CHAPEL HILL BLVD **APT# 1721**

PLANO, TX 75093

15 State Employer's state ID no. 16 State wages, tips, etc. 18 Local wages, tips, etc. 17 State income tax

19 Local income tax 20 Locality name

Federal Filing Copy Wage and Tax Copy B to be filed with employee's Federal Income Tax Heturn.

1 Wages, tips, other comp. 60943.41 3 Social security wages 61559.00 5 Medicare wages and tips 61559.00		2 Federa	income t	ax withheld 5013.19
		6 Medica	are tax with	held 892.61
d Control number	Dept.	Corp.	Employ	er use only
000156 RF/FWS			A	34
c Employer's name, ad	dress. a	nd ZIP cod	le	

SRIVEN TECHNOLOGIES LLC 20745 WILLIAMSPORT PL STE 220 ASHBURN, VA 20147

b	Employer's FED ID number 27-1145284	a Employee's SSA number XXX-XX-4825		
7	Social security tips	8 Allocated tips		
9		10 Dependent care benefits		benefits
11	Nonqualified plans	12a D		615.59
14	Other	12b		
		12c	THE CO.	
		12d		
		13 Stat em	p. Ret. plan	3rd party sick pay

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

HARIKA MUGALAMARRI 6201 CHAPEL HILL BLVD **APT# 1721** PLANO, TX 75093

19 Local income tax

15 State Employer's state ID no. 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc.

State Reference Copy W-2 Wage and Tax 20
Statement
Copy 2 to be flied with employee's State Income Tax Refurn.

20 Locality name

1	Wages, tips, other comp. 60943.41					x withheld 5013.19
3	Social security wages 61559.00		4	Social	security ta	x withheld 3816.66
5	Medicare wages and tips 61559.00		6	Medica	re tax with	held 892.61
d	Control number	Dept.		Corp.	Employ	er use only
00	0156 RF/FWS				A	34

Employer's name, address, and ZIP code

SRIVEN TECHNOLOGIES LLC 20745 WILLIAMSPORT PL STE 220 ASHBURN, VA 20147

b	Employer's FED ID number 27-1145284	a Employee's SSA number XXX-XX-4825		
7	Social security tips	8 Allocated tips		
9		10 Dependent care benefits		
11	Nonqualified plans	12a D 615.59		
14	Other	12b		
		120		
		12d		
		13 Stat emp. Ret. plan 3rd party sick pay		
e/f	Employee's name, address a	nd ZIP code		

HARIKA MUGALAMARRI 6201 CHAPEL HILL BLVD **APT# 1721** PLANO, TX 75093

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 City or Local Reference Copy

2 Wage and Tax 2 Statement
Copy 2 to be filled with employee's City or Local Income Tax Return