2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement

Copy C for employee's records.
d Control number 000194 R4/F7D

Dept.

Employer use only

Employer's name, address, and ZIP code GATEWAY SOLUTIONS INC 12980 METCALF AVE STE 330 OVERLAND PARK, KS 66213

Batch #91250

e/f Employee's name, address, and ZIP code SIDDHARTHA YALAMANCHI **4017 AGATHA COURT** AUBREY, TX 76227

b	Employer's FED ID numbe 43-1910534	r a Employee's SSA number XXX - XX - 0601
1	Wages, tips, other comp.	2 Federal income tax withheld
	90812.14	8836.14
3	Social security wages	4 Social security tax withheld
	90812.14	5630.35
5	Medicare wages and tips	6 Medicare tax withheld
	90812.14	1316.78
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12
		12b
14	Other	12c
		12d
		13 Stat emp. Ret. plan 3rd party sick party
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.

Your Gross Pay was adjusted as follows to produce your W-2 Statement.

Wages, Tips, other Compensation Box 1 of W-2 Social Security Medicare Wages Wages Box 5 of W-2 Box 3 of W-2 Gross Pay 92,499.96 92,499.96 92,499.96 Less Other Cafe 125 1,687.82 1,687.82 1,687.82 Reported W-2 Wages 90,812.14 90,812.14 90,812.14

2. Employee Name and Address.

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1	Wages, tips, other c 9081	omp. 2.14	2 Federa	al income tax withheld 8836.14
3	Social security wage 9081	s 2.14	4 Social	security tax withheld 5630.35
5	Medicare wages and 9081	tips 2.14	6 Medica	are tax withheld 1316.78
d	Control number	Dept.	Corp.	Employer use only
00	00194 R4/F7D			A 59

Employer's name, address, and ZIP code

GATEWAY SOLUTIONS INC 12980 METCALF AVE STE 330 OVERLAND PARK, KS 66213

Employer's FED ID number 43-1910534	a Employee's SSA number XXX-XX-0601
Social security tips	8 Allocated tips
	10 Dependent care benefits
Nonqualified plans	12a See instructions for box 12
Other	12b
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
	Employer's FED ID number 43-1910534 Social security tips Nonqualified plans Other

SIDDHARTHA YALAMANCHI **4017 AGATHA COURT** AUBREY, TX 76227

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

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee

1	Wages, tips, other co	omp. 2.14	2 Federa	al income tax withheld 8836.14
3	Social security wage 9081	s 2.14	4 Social	security tax withheld 5630.35
5	Medicare wages and 9081	tips 2.14	6 Medic	are tax withheld 1316.78
d	Control number	Dept.	Corp.	Employer use only
00	00194 R4/F7D			A 59

Employer's name, address, and ZIP code

GATEWAY SOLUTIONS INC 12980 METCALF AVE STE 330 OVERLAND PARK, KS 66213

b	Employer's FED ID number 43-1910534	a Employee's SSA number XXX - XX - 0601	
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 pay	

SIDDHARTHA YALAMANCHI **4017 AGATHA COURT**

AUBREY, TX 76227

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

State Reference Copy Wage and Tax Z Statement Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other co		2	Federa	l income ta	x withheld 3836.14
3	Social security wage 9081	s 2.14	4	Social	security ta	withheld
5	Medicare wages and 9081		6	Medica	are tax with	neld 316.78
d	Control number	Dept.		Corp.	Employ	er use only
00	00194 R4/F7D				Α	59
c	Employer's name, ad	dress. a	nd	ZIP cod	e	

GATEWAY SOLUTIONS INC 12980 METCALF AVE STE 330 OVERLAND PARK, KS 66213

b	Employer's FED ID number 43-1910534	a Employee's SSA number XXX - XX - 0601
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

SIDDHARTHA YALAMANCHI

4017 AGATHA COURT AUBREY, TX 76227

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