2023 W-2 and EARNINGS SUMMARY



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

Dept. Copp. Copp.

| Mark |

INC 12065 METRO PARK WAY SUITE 202

FORT MYERS, FL 33966 Batch #91727

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

MANOJ K ENGALA 1604 98TH AVENUE SE LAKE STEVENS, WA 98258

b	Emplo	yer's FED ID numb 81-3651443	er a	3	Empl		e's SS/		
1	Wages	s, tips, other comp.	. 2	2	Fede	ral	income	tax wit	hheld
		16500.0	00					234	0.08
3	Social	security wages 16500.0		1	Socia	al s	security		hheld 3.00
5	Medic	are wages and tips 16500.0		3	Medio	care	e tax wi		9.25
7	Social	security tips	8	3	Alloc	ate	d tips		
9			1	0	Deper	ide	nt care	benefit	s
11	Nonqualified plans		1	2	a See ii	nstr	uctionsfo	r box 12	!
4.4	Other	Other			b				
14	Other			20	C				
			1	20	d	<u> </u>			
			1	3	Stat e	mp.	Ret. plan	3rd part	ty sick pay
15	State	Employer's state	ID no.	16	State	Wa	ages, tip	s, etc.	
17	State	income tax	,	18	Local	W	ages, tip	s, etc.	
19 Local income tax			2	20	Local	ity	name		

1 Wages, tips, other comp. 16500.00 2340.08
3 Social security wages 16500.00 4 Social security tax withheld 1023.00
5 Medicare wages and tips 16500.00 6 Medicare tax withheld 239.25
d Control number Dept. Corp. Employer use only 0.00401 K1/CR2
c Employer's name, address, and ZIP code

CLOUD HUB IT SOLUTIONS INC 12065 METRO PARK WAY SUITE 202 FORT MYERS, FL 33966

b	Employer's FED ID number 81-3651443	a Employee's SSA number XXX-XX-5657				
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	elf Employee's name address and ZIP code					

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

MANOJ K ENGALA 1604 98TH AVENUE SE LAKE STEVENS, WA 98258

15	State	Employer's	state	ID no.	16 State wages, tips, etc.	
17	State	income tax			18 Local wages, tips, etc.	
19	19 Local income tax			20 Locality name		
			0 50		na Canu	

Federal Filing Copy

Wage and Tax 2023

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 Compensation Wages Wages Wages Wages Box 1 of W-2 Box 3 of W-2 Box 5 of W-2

Gross Pay 16,500.00 16,500.00 16,500.00 Reported W-2 Wages 16,500.00 16,500.00 16,500.00

2. Employee Name and Address.

MANOJ K ENGALA 1604 98TH AVENUE SE LAKE STEVENS, WA 98258

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19 Local income tax

1 Wages, tips, other comp. 16500.00	2 Federal income tax withheld 2340.08				
3 Social security wages 16500.00	4 Social security tax withheld 1023.00				
5 Medicare wages and tips 16500.00	6 Medicare tax withheld 239.25				
d Control number Dept. 000401 K1/CR2	Corp. Employer use only				
CLOUD HUB IT SOLUTIONS INC 12065 METRO PARK WAY SUITE 202 FORT MYERS, FL 33966					
b Employer's FED ID number 81-3651443 7 Social security tips	a Employee's SSA number XXX-XX-5657 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				
eff Employee's name, address and ZIP code MANOJ K ENGALA 1604 98TH AVENUE SE LAKE STEVENS, WA 98258					
15 State Employer's state ID no	. 16 State wages, tips, etc.				

20 Locality name

State Reference

Statement

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

Wage and Tax

1 Wages, tips, other comp. 16500.00	2 Federal income tax withheld 2340.08				
3 Social security wages 16500.00	4 Social security tax withheld 1023.00				
5 Medicare wages and tips 16500.00	6 Medicare tax withheld 239.25				
d Control number Dept. 000401 K1/CR2	Corp. Employer use only				
c Employer's name, address, and ZIP code					
CLOUD HUB IT SOLUTIONS INC 12065 METRO PARK WAY SUITE 202 FORT MYERS, FL 33966					
b Employer's FED ID number 81-3651443 7 Social security tips	a Employee's SSA number XXX-XX-5657 8 Allocated tips				
9 11 Nonqualified plans	10 Dependent care benefits				
14 Other	12b				
	12c				
	12d				
	13 Stat emp. Ret. plan 3rd party sick pay				
e/f Employee's name, address and ZIP code MANOJ K ENGALA 1604 98TH AVENUE SE LAKE STEVENS, WA 98258					
15 State Employer's state ID no.	16 State wages, tips, etc.				
17 State income tax	18 Local wages, tips, etc.				

20 Locality name

City or Local Reference

Statement

Copy 2 to be filed with employee's City or Local Income Tax Return

Wage and Tax

19 Local income tax