Employee Reference Copy Wage and Tax Statement y C for employee's records. Control number Dept. Corp. Employer use only 0000020548 RRZ 101002 VDH6 ACS 3073 c Employer's name, address, and ZIP code KENNESAW STATE UNIVERSITY 1000 CHASTAIN ROAD KENNESAW, GA 30144 e/l Employee's name, address, and ZIP code SRICHARAN DONKADA 4840 SHILOH SPRING RD CUMMING, GA 30040 b Employer's FED ID number a Employee's SSA number 58-0965786 XXX-XX-6857 1 Wages, tips, other comp. 2 Federal income tax withheld 6000.00 605.67 3 Social security wages 4 Social security tax withheld 5 Medicare wages and tips 6 Medicare tax withheld

8 Allocated tips

12b

12c

15 State Employer's state ID no. 16 State wages, tips, etc.

10 Dependent care benefits

12a See instructions for box 12

12d i 13 Stat emp. Ret, plan 3rd party sick pay

18 Local wages, tips, etc.

6000.00

7 Social security tips

11 Nonqualified plans

GA 5651984-PZ

17 State income tax

14 Other

2023 W-2 and EARNINGS SUMMARY

This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that you may also find helpful. The following reflects your final pay stub, plus any adjustments made by your employer.

GROSS PAY

6,000.00

SOCIAL SECURITY

0.00

FED. INCOME 605.67 M
TAX WITHHELD W
BOX 02 OF W-2 B
STATE INCOME TAX 47.79 S

TAX WITHHELD
BOX 04 OF W-2
MEDICARE TAX
WITHHELD
BOX 06 OF W-2
SUI/SDI
0.00

BOX 14 OF W-2

To change your employee W-4 profile information file a new W-4 with your payroll department

0.00

SRICHARAN DONKADA 4840 SHILOH SPRING RD CUMMING, GA 30040

BOX 17 OF W-2 LOCAL INCOME TAX

BOX 19 OF W-2

Social Security Number: XXX-XX-6857

2 Federal income tax withheld

4 Social security tax withheld
6 Medicare tax withheld

Corp. Employer use only

605.67

6000.00

18 Local wages, tips, etc.

20 Locality name

PAGE 1 OF 1

47.79					1 1881 6779 11 5877 61 587 61 587 11 11 58 11 687 61 587 11 11 58 11 687 11 68 11 68 11 68 11 68 11 68 11 68 11						
19 Local income tax		20 Locality name			© 2023 ADP, Inc.						
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7 Social security tips		8 Allocat	ed tips		7 Social	security tips		8 Alloca	ted t		
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11 Nonqualified plans		12a See in	structions for bo	x 12	11 Nonq	ualified plans		12a			
14 Other		12b			14 Other			12b			
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EMPLOYEE'S NAME, SRICHARAN D 4840 SHILOH SE CUMMING, GA	OONKAE PRING F 30040	DA RD			SRIC 4840 CUM	SHILOH S MING, GA	DONKA PRING I 30040	DA RD			
15 State Employer's st GA 5651984-PZ	tate ID no.		6000.00		GA	Employer's s 5651984-PZ	state ID no	. 16 State	wag		
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19 Local income tax		20 Local	ty name	A G	19 Local	income tax		20 Loca	ility r		
VV-Z	age an Statem	d Tax	202	3	W.		te Filin age an Statem	d Tax	у		

Copy B to be filed with employee's Federal Income Tax Helurn.

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3 Social security wages		4 Social security tax withheld				i	3 Social security wages			
5 Medicare wages and tips		6 Medicare tax withheld				5 Medicare wages and tips				
d Control number	Dept.	Corp.	Emplo	yer	use only	H	d Contr	ol number	Dept.	
0000020548 RRZ	101002 V	DH6	A C	s	3073	Ш	000002	0548 RRZ	101002	
c Employer's name,	address, and	and ZIP code				c Employer's name, address,				
KENNESAW S 1000 CHASTA KENNESAW, (IN ROAD	VERS	ITY				1000	NESAW S CHASTA NESAW,	IN ROAL	
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14 Other	12	2b		_		1	14 Other			
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	13	Stat emp	Ret plan	3rd	party sick pay					
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SRICHARAN	DONKADA	1						HARAN		
4840 SHILOH S)				H	4840 SHILOH SPRING				
CUMMING, GA	30040					ERE ~		MING, GA		
GA 5651984-PZ	state ID no. 1			000	0.00	DETACH	15 State GA	Employer's 5651984-P	state ID no	
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19 Local income tax	20	0 Local	ity name			POL	19 Local	income tax		
GA. Sta	te Filing age and	Cop	y	_	22		14/		Local	

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

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0000020548 RRZ	101002	VDH6	AC	S 3073			
c Employer's name, a	ddress, a	ind ZIP co	ode				
KENNESAW STATE UNIVERSITY							
1000 CHASTAIN ROAD							
KENNESAW, GA 30144							
b Employer's FED ID	number	a Emplo	uoo'n 66	A aughar			
58-096578	6	a Employee's SSA number XXX-XX-6857					
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e/I Employee's name, address and ZIP code							
SRICHARAN DONKADA							
4840 SHILOH SPRING RD							
CUMMING, GA 30040							
15 State Employer's a	tata ID aa	16 State	wanae N	ne ato			
15 State Employer's s	tate ID no	10 State	wayes, 0	ps, etc.			

2023

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