

Form W-2 Wage and Tax Statement 2023

Copy C, for employee's records

| | | | | | | |
|--|---|--|---|---|--|---|
| d Control number 0040-00407884 0000000181 - EMPLOY | | Void | c Employer's name, address, and ZIP code IT SOFTWARE SOLUTIONS INC 3801 NORTH UNIVERSITY DR #315 SUNRISE FL 33351-6359 | | Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 | |
| b Employer identification number (EIN) 65-0920223 | | a Employee's social security number XXX-XX-1399 | | 1 Wages, tips, other compensation 40999.80 | | 2 Federal income tax withheld 3037.98 |
| 13 Statutory employee | Retirement plan | Third-party sick pay | | 3 Social security wages 40999.80 | | 4 Social security tax withheld 2541.99 |
| 12 See instructions for box 12 | | 14 Other | | e Employee's name, address, and ZIP code PAVANI RALLAPALLI 2718 CANTERBURY BLVD APT #6 FORT WAYNE IN 46835 | | 5 Medicare wages and tips 40999.80 |
| | | | | | | 6 Medicare tax withheld 594.50 |
| | | | | | | 7 Social Security Tips |
| | | | | | | 8 Allocated Tips |
| | | | | | | 10 Dependent care benefits |
| | | | | | | 11 Nonqualified plans |
| 15 State | Employer's state ID number IN 0139754784 001 | 16 State wages, tips, etc. 40999.80 | 17 State income tax 1291.50 | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

Form W-2 Wage and Tax Statement 2023

Copy B, to be filed with employee's FEDERAL tax return

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Form W-2 Wage and Tax Statement 2023

Copy 2, to be filed with employee's tax return for IN

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