



W-2 Employee Reference Copy
Wage and Tax Statement
2023
OMB No. 1545-0008

Copy C for employee's records.

d Control number	Dept.	Corp.	Employer use only
000121 R3/7EZ			A 16

c Employer's name, address, and ZIP code
DAMIAN CONSULTING INC
5800 CAMPUS CIR DR E STE150A
IRVING, TX 75063 2701

Batch #91359

e/f Employee's name, address, and ZIP code
AKHILA GOGULAMUDI
6203 LOVE DR
APT 3137
IRVING, TX 75039

b Employer's FED ID number	a Employee's SSA number
11-3738177	XXX-XX-5689
1 Wages, tips, other comp.	2 Federal income tax withheld
4500.00	103.74
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
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
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.

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	4,500.00	4,500.00	4,500.00
Reported W-2 Wages	4,500.00	0.00	0.00

2. Employee Name and Address.

AKHILA GOGULAMUDI
6203 LOVE DR
APT 3137
IRVING, TX 75039

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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 Employee's name, address and ZIP code AKHILA GOGULAMUDI 6203 LOVE DR APT 3137 IRVING, TX 75039			
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		

W-2 Federal Filing Copy
Wage and Tax Statement
2023
OMB No. 1545-0008
Copy B to be filed with employee's Federal Income Tax Return.

1 Wages, tips, other comp.	2 Federal income tax withheld		
4500.00	103.74		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number	Dept.	Corp.	Employer use only
000121 R3/7EZ			A 16
c Employer's name, address, and ZIP code DAMIAN CONSULTING INC 5800 CAMPUS CIR DR E STE150A IRVING, TX 75063 2701			
b Employer's FED ID number	a Employee's SSA number		
11-3738177	XXX-XX-5689		
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		
e/f Employee's name, address and ZIP code AKHILA GOGULAMUDI 6203 LOVE DR APT 3137 IRVING, TX 75039			
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		

W-2 State Reference Copy
Wage and Tax Statement
2023
OMB No. 1545-0008
Copy 2 to be filed with employee's State Income Tax Return.

1 Wages, tips, other comp.	2 Federal income tax withheld		
4500.00	103.74		
3 Social security wages	4 Social security tax withheld		
5 Medicare wages and tips	6 Medicare tax withheld		
d Control number	Dept.	Corp.	Employer use only
000121 R3/7EZ			A 16
c Employer's name, address, and ZIP code DAMIAN CONSULTING INC 5800 CAMPUS CIR DR E STE150A IRVING, TX 75063 2701			
b Employer's FED ID number	a Employee's SSA number		
11-3738177	XXX-XX-5689		
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		
e/f Employee's name, address and ZIP code AKHILA GOGULAMUDI 6203 LOVE DR APT 3137 IRVING, TX 75039			
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		

W-2 City or Local Reference Copy
Wage and Tax Statement
2023
OMB No. 1545-0008
Copy 2 to be filed with employee's City or Local Income Tax Return.