| Employee Reference Copy | | | | | | | |
|---|--|--|--|--|--|--|--|
| | | | | | | | |
| Statement Statement | | | | | | | |
| Copy C for employee'srecords. d Control number Dept. | Corp. Employer use only | | | | | | |
| 000017 KG/R9E | A | | | | | | |
| c Employer's name, address, a | nd ZIP code | | | | | | |
| DIGITAL INTELLIGENT | | | | | | | |
| SYSTEMS CORP | | | | | | | |
| 5225 HICKORY | PARK DR | | | | | | |
| | (4 22050 2020 | | | | | | |
| GLEN ALLEN, N | Batch #91648 | | | | | | |
| Batch #91648 | | | | | | | |
| e/f Employee's name, address, a | nd ZIP code | | | | | | |
| GOUTHAMI NAGEELY | | | | | | | |
| 9506 PLEASANT LEV | EL ROAD | | | | | | |
| MECHANICSVILLE. V | A 23116 | | | | | | |
| , | | | | | | | |
| b Employer's FED ID number | a Employee's SSA number | | | | | | |
| 85-2611923 1 Wages, tips, other comp. | XXX-XX-0671 | | | | | | |
| 5500.00 | ² Federal income tax withheld 346.33 | | | | | | |
| 3 Social security wages | 4 Social security tax withheld | | | | | | |
| 5500.00 | 341.00 | | | | | | |
| 5 Medicare wages and tips | 6 Medicare tax withheld | | | | | | |
| 5500.00 7 Social security tips | 79.75 8 Allocated tips | | | | | | |
| , occar security tips | 8 Allocated tips | | | | | | |
| 9 | 10 Dependent care benefits | | | | | | |
| | 12a See instructions for box 12 | | | | | | |
| 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. | | | | | | | |
| VA 30852611923F001 | | | | | | | |
| 17 State income tax | 18 Local wages, tips, etc. | | | | | | |
| 256.46 | | | | | | | |
| 19 Local income tax | 20 Locality name | | | | | | |
| | | | | | | | |

2023 W-2 and EARNINGS SUMMARY



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 | Social Security | Medicare | VA. State Wages, |
|------------------------------|--------------------|-----------------|-----------------|------------------|
| | Compensation | Wages | Wages | Tips, Etc. |
| | Box 1 of W-2 | Box 3 of W-2 | Box 5 of W-2 | Box 16 of W-2 |
| Gross Pay Reported W-2 Wages | 5,500.00 | 5,500.00 | 5,500.00 | 5,500.00 |
| | 5,500.00 | 5,500.00 | 5,500.00 | 5,500.00 |

2. Employee Name and Address.

GOUTHAMI NAGEELY 9506 PLEASANT LEVEL ROAD MECHANICSVILLE, VA 23116

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| 1 Wages, tips, other comp. 5500.00 | 2 Federal income tax withheld 346.33 | 1 Wages, tips, other comp. 5500.00 | 2 Federal income tax withheld 346.33 | 1 Wages, tips, other comp. 5500.00 | 2 Federal income tax withheld 346.33 |
|---|---|---|---|---|--|
| 3 Social security wages 5500.00 | 4 Social security tax withheld 341.00 | 3 Social security wages 5500.00 | 4 Social security tax withheld 341.00 | ³ Social security wages 5500.00 | 4 Social security tax withheld 341.00 |
| 5 Medicare wages and tips 5500.00 | 6 Medicare tax withheld 79.75 | 5 Medicare wages and tips 5500.00 | 6 Medicare tax withheld 79.75 | 5 Medicare wages and tips 5500.00 | 6 Medicare tax withheld 79.75 |
| d Control number Dept. | Corp. Employer use only | d Control number Dept. | Corp. Employer use only | d Control number Dept. | Corp. Employer use only |
| 000017 KG/R9E | Α | 000017 KG/R9E | A | 000017 KG/R9E | A |
| c Employer's name, address, a | and ZIP code | c Employer's name, address, a | nd ZIP code | c Employer's name, address, and ZIP code | |
| DIGITAL INTELLIGENT SYSTEMS CORPORA | | DIGITAL INTELLIGENT SYSTEMS CORPORA | | DIGITAL INTELLIGENT SYSTEMS CORPORA | |
| 5225 HICKORY | PARK DR | 5225 HICKORY PARK DR | | 5225 HICKORY PARK DR | |
| UNIT A | | UNIT A | | UNIT A | |
| GLEN ALLEN, | VA 23059 2620 | GLEN ALLEN, V | VA 23059 2620 | GLEN ALLEN, Y | VA 23059 2620 |
| b Employer's FED ID number 85-2611923 | a Employee's SSA number XXX-XX-0671 | b Employer's FED ID number 85-2611923 | a Employee's SSA number XXX-XX-0671 | b Employer's FED ID number 85-2611923 | a Employee's SSA number XXX-XX-0671 |
| 7 Social security tips | 8 Allocated tips | 7 Social security tips | 8 Allocated tips | 7 Social security tips | 8 Allocated tips |
| 9 | 10 Dependent care benefits | 9 | 10 Dependent care benefits | 9 | 10 Dependent care benefits |
| 11 Nonqualified plans | 12a See instructions for box 12 | 11 Nonqualified plans | 12a | 11 Nonqualified plans | 12a |
| 14 Other | 12b | 14 Other | 12b | 14 Other | 12b |
| | 12c | | 12c | | 12c |
| | 12d | | 12d | | 12d |
| | 13 Stat emp. Ret. plan 3rd party sick pay | | 13 Stat emp. Ret. plan 3rd party sick pay | | 13 Stat emp. Ret. plan 3rd party sick part |
| | | | | | First sector party stories party |
| e/f Employee's name, address ar | nd ZIP code | e/f Employee's name, address and ZIP code | | e/f Employee's name, address a | nd ZIP code |
| GOUTHAMI NAGEELY | | GOUTHAMI NAGEELY | | GOUTHAMI NAGEELY | |
| 9506 PLEASANT LEV | EL ROAD | 9506 PLEASANT LEVEL ROAD | | 9506 PLEASANT LEVEL ROAD | |
| MECHANICSVILLE, V | A 23116 | MECHANICSVILLE, VA 23116 | | MECHANICSVILLE, V | A 23116 |
| 15 State Employer's state ID no VA 30852611923F001 | . 16 State wages, tips, etc. 5500.00 | 15 State Employer's state ID no VA 30852611923F001 | . 16 State wages, tips, etc. 5500.00 | 15 State Employer's state ID no VA 30852611923F001 | |
| 17 State income tax 256.46 | 18 Local wages, tips, etc. | 17 State income tax 256.46 | 18 Local wages, tips, etc. | 17 State income tax 256.46 | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name | 19 Local income tax | 20 Locality name | 19 Local income tax | 20 Locality name |
| Federal Fi | ling Copy | VA.State Reference Copy | | VA.State Fil | ling Copy |
| W-2 Wage and Tax 2023 Statement Come Tax Return. Copy B to be filed with employee's Federal Income Tax Return. Copy 2 to be filed with employee's State Income Tax Return. | | W-2 Wage and Tax 2023 Statement Statement | | | |
| Copy b to be filed with employee's Fe | ederal income lax keturn. | Copy 2 to be filed with employee's State | e income i ax keturn. | Copy 2 to be filed with employee's State | e income i ax Keturn. |