2020 W-2 and EARNINGS SUMMARY



2 Federal income tax withheld

Social security tax withheld

Medicare tax withheld

13013.30

938.99

563.98

RD

party sick pay

Employer use only

Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Corp. Employer use only RK/TO4 000197 Employer's name, address, and ZIP code

ISITE TECHNOLOGIES 379 PRINCETON HIGHTSTOWN BLDG 3 FLOOR CRANBURY, NJ 08512

Batch #91838

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

4900 MEDICAL DR APT 1407 SAN ANTONIO, TX 78229

b	Employer's FED ID number 20-3491774	a Employee's SSA number XXX-XX-9347					
1	Wages, tips, other comp.	2 Federal income tax withheld					
	95195.00	13013.30					
3	Social security wages 15145.00	4 Social security tax withheld 938.99					
5	Medicare wages and tips 38895.00	6 Medicare tax withheld 563.98					
7	Social security tips	8 Allocated tips					
9		10 Dependent care benefits					
11	Nonqualified plans	12a See instructions for box 12					
11	Other	12b					
14	Other	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 Social Security Medicare Wages Wages Box 3 of W-2 Box 5 of W-2 Box 1 of W-2

Gross Pay 95,195.00 95,195.00 95,195.00 Reported W-2 Wages 95,195.00 15,145.00 38,895.00

2. Employee Name and Address.

MUKTESH ADUSUMILLI 4900 MEDICAL DR APT 1407 SAN ANTONIO, TX 78229

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1 \	Wages, t	ips, other c 951	omp. 95.00	2 Federal income tax withheld 13013.30					
3 \$	Social se		45.00	4 Social security tax withheld 938.99					
5 Medicare wages and tips 38895.00			6 Medica	re tax withh	eld 563.98				
d C	Control n	umber	Dept.	Corp.	Employer	use only			
000	197	RK/TO4			Α	1			
C Employer's name, address, and ZIP code									

ISITE TECHNOLOGIES INC 379 PRINCETON HIGHTSTOWN BLDG 3 FLOOR 2 RD

CRANBURY, NJ 08512

b	Employer's FED ID number 20-3491774	a Employee's SSA number XXX-XX-9347						
7	Social security tips	8 Allocated tips						
9		10 Depen	dent care	benefits				
11	Nonqualified plans	12a See i	nstruction	s for box 12				
14	Other	12b						
		12c						
		12d						
		13 Stat em	p. Ret. plan	3rd party sick pay				
e/f	Employee's name, address an	d ZIP cod	le					

MUKTESH ADUSUMILLI 4900 MEDICAL DR APT 1407 SAN ANTONIO, TX 78229

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
				-

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

1	Wages, t	ips, other c 9519	2 Federal income tax withheld 13013.30			
3	Social se	ecurity wage	es 45.00	4 Social	security tax	withheld 938.99
5 Medicare wages and tips 38895.00			6 Medica	re tax withh	eld 563.98	
d	Control n	umber	Dept.	Corp.	Employer	use only
00	0197	RK/TO4			Α	1

ISITE TECHNOLOGIES INC 379 PRINCETON HIGHTSTOWN BLDG 3 FLOOR 2 RD CRANBURY, NJ 08512

b	Employer's FED ID number 20-3491774	a Employee's SSA number XXX-XX-9347				
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

MUKTESH ADUSUMILLI 4900 MEDICAL DR APT 1407 SAN ANTONIO, TX 78229

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	Local	ity nam	е	

State Reference Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return

c Employer's name, a	ddress, a	nd ZIP co	de	
ISITE TEC 379 PRINC BLDG 3 I CRANBURY	CETON FLOOR	HIGH 2		N R
b Employer's FED ID 20-349177		a Emplo	yee's SSA	
7 Social security tips		8 Alloca	ated tips	
9		10 Depen	dent care	benefits
11 Nonqualified plans		12a	1	
14 Other		12b	! 	
		12c	l I	
		12d	Ĺ	
		13 Stat er	mp. Ret. plan	3rd party
e/f Employee's name, a	address ar	d ZIP co	de	
MUKTESH ADU 4900 MEDICAL SAN ANTONIO,	DR A	PT 14	07	
15 State Employer's s	tate ID no.	16 State	wages, tip	s, etc.
17 State income tax		18 Local	wages, tip	os, etc.
		1		

20 Locality name

or Local Reference

Wage and Tax

Statement

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

Wages, tips, other comp

3 Social security wages 15145.00

Control number

000197 RK/TO4

19 Local income tax

Medicare wages and tips 38895.00

95195.00