2021 W-2 and EARNINGS SUMMARY

	age a State	nd Tax ment	2(OMB)21 No. 1545-0008
d Control number 0000026603 NJ1	Dept. 999999	Corp. BHD5	Employ S	er use only 4654
c Employer's name, a CORPORATE E INC 3475 LENOX F SUITE 450 ATLANTA, GA	MPLC	YMENT		IRCES
e/f Employee's name, a DEVYANI DESH 13071 RARITAN FISHERS, IN	HPANE N DRIN	E	e	
b Employer's FED ID n 76-069650				number (X-1465
1 Wages, tips, other c	2 Federa	l income t	ax withheld	
3 Social security wage		4 Social	security t	ax withheld
5 Medicare wages and		6 Medica	re tax wit	hheld 921.56
7 Social security tips		8 Allocat	ed tips	
9		10 Depend	lent care	benefits
11 Nonqualified plans		12a See inst	ructions for	box 12
14 Other		12b 12c 12d 13 Stat emp	Ret. plan	Brd party sick pay
15 State Employer's st		o. 16 State w		s, etc. 3556 . 00
17 State income tax		18 Local v	ages, tip	s, etc.
2052.88 19 Local income tax		20 Localit	y name	3556.00
69	9.17	C-29		
1 Wages, tips, other c	omp. 66.00	2 Federa		tax withheld 6950.26
3 Social security wage	es 66.00	4 Social	security t	ax withheld 3940 . 47
5 Medicare wages and	tips	6 Medica	re tax wit	

his summary section is included with your W-2 to help describe this ortion in more detail. The reverse side includes general information that ou may also find helpful. The following reflects your final pay stub, plus adjustments made by your employer. 63,556.00 GROSS PAY SOCIAL SECURITY

TAX WITHHELD BOX 04 OF W-2 MEDICARE TAX FED. INCOME 6,950.26 921.56 TAX WITHHELD WITHHELD BOX 02 OF W-2 BOX 06 OF W-2 SUI/SDI 0.00 STATE INCOME TAX 2,052.88 BOX 14 OF W-2 BOX 17 OF W-2 LOCAL INCOME TAX 699.17 BOX 19 OF W-2

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

2 Federal income tax withheld

Social security tax withheld 3940.47

Medicare tax withheld

Corp.

BHD5

DEVYANI DESHPANDE 13071 RARITAN DRIVE FISHERS, IN 46038

63556.00

63556.00

Employer's name, address, and ZIP code

Dept.

CORPORATE EMPLOYMENT RESOURCES

Social Security Number: XXX-XX-1465

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Wages, tips, other comp.

Social security wages 63556.00

Medicare wages and tips

Control number

0000026603 NJ1

PAGE 01 OF 01

6950.26

921.56

4654

Employer use only

1 Wages, tips, other comp. 63556.00			2 Federa	al income tax withheld 6950.26
3 Social security wages 63556.00		4 Social	security tax withheld 3940.47	
5	Medicare wages and tips 63556.00		6 Medica	are tax withheld 921.56
d 00	Control number 000026603 NJ1	Dept. 999999	Corp. BHD5	Employer use only 4654

Employer's name, address, and ZIP code CORPORATE EMPLOYMENT RESOURCES INC 3475 LENOX RD NE SUITE 450 ATLANTA, GA 30326

b	Employer's FED ID number 76-0696504	a Employee's SSA number XXX-XX-1465		
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		
e/	f Employee's name, address a			

15	State IN	Employer's state ID no. 0111633036 001	16 State wages, tips, etc. 63556.00
17	State	income tax 2052.88	18 Local wages, tips, etc. 63556.00
19	Local	income tax 699 . 17	20 Locality name C - 29

13071 RARITAN DRIVE

FISHERS, IN 46038

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

3475 LENOX RD NE SUITE 450 ATLANTA, GA 30326 Employer's FED ID number 76-0696504 a Employee's SSA number XXX-XX-1465 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a 12b 14 Other 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay e/f Employee's name, address and ZIP code **DEVYANI DESHPANDE** 13071 RARITAN DRIVE FISHERS, IN 46038 15 State Employer's state ID no. 0111633036 001 16 State wages, tips, etc 63556.00 17 State income tax 8 Local wages, tips, etc. 2052.88 63556.00 19 Local income tax 699.17 C-29 IN. State Filing Copy Wage and Tax

Statement

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

	N. COLOR SERVICE ASSESS SERVICE SERVIC			
1 Wages, tips, other comp. 63556.00			2 Feder	al income tax withheld 6950 . 26
3 Social security wages 63556.00		4 Social security tax withheld 3940.47		
5 Medicare wages and tips 63556.00		6 Medic	are tax withheld 921 . 56	
d 00	Control number 000026603 NJ1	Dept. 999999	Corp. BHD5	Employer use only 4654
С	Employer's name, CORPORATE INC 3475 LENOX F SUITE 450 ATLANTA, GA	EMPLO	YMENT	

76-0696504	a Employee's SSA number XXX-XX-1465	
Social security tips	8 Allocated tips	
	10 Dependent care benefits	
Nonqualified plans	12a	
Other	12b	
	12c	
	12d	
	13 Stat emp. Ret. plan 3rd party sick pa	
	Social security tips Nonqualified plans	

DEVYANI DESHPANDE 13071 RARITAN DRIVE FISHERS, IN 46038

15	State IN	Employer's state ID no. 0111633036 001	16 State wages, tips, etc. 63556.00
17	State	income tax 2052.88	18 Local wages, tips, etc. 63556.00
19	Local	income tax 699.17	20 Locality name C-29

Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax