2021 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Employer use only RF/ZJP Employer's name, address, and ZIP code INC

FINSOFT CONSULTANTS 545 EIGHTH AVE SUITE 930 NEW YORK, NY 10018

Batch #90146

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

BABITHA BOBBA 5760 HATHAWAY PARKWAY APT # 2304 PHASE1 PLANO, TX 75024

Employer's FED ID number a Employee's SSA number 13-3862191 XXX-XX-7024 Wages, tips, other comp. Federal income tax withheld 101316.74 14115.24 Social security wages Social security tax withheld 101316.74 6281.64 Medicare wages and tips 6 Medicare tax withheld 1469.09 101316.74 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other 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 Reported W-2 Wages 101,316.74 101,316.74

101,316.74 101,316.74

101,316.74 101,316.74

2. Employee Name and Address.

BABITHA BOBBA 5760 HATHAWAY PA APT # 2304 PHASE1 PLANO, TX 75024 PARKWAY

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1	Wages, tips, other c	omp. 16.74	2 Federal income tax withheld 14115.24				
3	Social security wage 1013	4 Social security tax withheld 6281.64					
5	Medicare wages and 1013	6 Medica	re tax withh	eld I 469.09			
d	Control number	Dept.	Corp.	Employer	use only		
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_	C Employer's name address and ZIP code						

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b	Employer's FED ID number 13-3862191	a Employee's SSA number XXX-XX-7024
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 an	d ZIP code

BABITHA BOBBA 5760 HATHAWAY PARKWAY **APT # 2304 PHASE1** PLANO, TX 75024

15	State	Employer's	state	ID no.	16 State w	vages,	tips, etc.
17	State	income tax			18 Local v	wages,	tips, etc.
19	Local	income tax			20 Locality	y name	9
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Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

		-	2 Federal income tax withheld 14115.24			
3 Social security wages 101316.74			4 Social security tax withheld 6281.64			
5 Medicare wages and tips 101316.74			6 Medica		eld 1469.09	
Control n	umber	Dept.	Corp.	Employer	use only	
052	RF/ZJP			Α	3	
)	Control n	Medicare wages and 1013° Control number 1052 RF/ZJP	Medicare wages and tips 101316.74 Control number Dept.	Medicare wages and tips 101316.74 6 Medica Control number 052 Dept. Corp. Corp.	Medicare wages and tips 101316.74 6 Medicare tax withh Control number Dept. Corp. Employer 052 RF/ZJP A	

FINSOFT CONSULTANTS INC 545 EIGHTH AVE SUITE 930 NEW YORK, NY 10018

b	Employer's FED ID number 13-3862191	a Employee's SSA number XXX-XX-7024
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

BABITHA BOBBA 5760 HATHAWAY PARKWAY APT # 2304 PHASE1 PLANO, TX 75024

15	State	Employer's	state I	D 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

1	Wages,	tips, other c		2	Federa	income tax 14	withl	
3	Social	security wage	es 16.74	4	Social	security tax	withh	
5	Medicare wages and tips 101316.74			6	Medica	re tax withhe	ld 469	.09
d	Control	number	Dept.		Corp.	Employer	use	only
00	0052	RF/ZJP				Α		3
_	Employe				71D1	_		

c Employer's name, address, and ZIP code FINSOFT CONSULTANTS

INC 545 EIGHTH AVE SUITE 930 NEW YORK, NY 10018

	Formitaria FED ID	- Familiana la COA manda a
b	Employer's FED ID number 13-3862191	a Employee's SSA number XXX-XX-7024
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

BABITHA BOBBA 5760 HATHAWAY PARKWAY APT # 2304 PHASE1 PLANO, TX 75024

		•			
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

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