2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Corp. Employer use only 000056 R8/27G Employer's name, address, and ZIP code

AWOIT SYSTEMS INC 12600 DEERFIELD PKWY SUITE 100 GA 30004 ALPHARETTA,

Batch #99367

e/f Employee's name, address, and ZIP code SINDOORI NUTHIKATTU 1324 SOUTH FINLEY ROAD

LOMBARD, IL 60148

Employer's FED ID number a Employee's SSA number 45-4375251 XXX-XX-8435 Wages, tips, other comp Federal income tax withheld 44000.00 4858.64 Social security wages Social security tax withheld 44000.00 2728.00 Medicare wages and tips 6 Medicare tax withheld 638.00 44000.00 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. 45-4375251 000 IL 44000.00 17 State income tax 8 Local wages, tips, etc. 2178.00 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 IL. State Wages, Compensation Wages Wages Tips, Etc. Box 16 of W-2 Box 3 of W-2 Box 1 of W-2 Box 5 of W-2

Gross Pay Reported W-2 Wages 44,000.00 44,000.00

44,000.00

44,000.00

44,000.00

2 Federal income tax withheld

4 Social security tax withheld 2728.00

4858.64

44,000.00

44,000.00

Wages, tips, other comp

3 Social security wages 44000.00

44000.00

44,000.00

2. Employee Name and Address.

SINDOORI NUTHIKATTU 1324 SOUTH FINLEY ROAD 30 LOMBARD, IL 60148

© 2022 ADP, Inc.

1	Wages,	tips, other c 4400	omp. 00.00	2 Federal	income tax	withheld 1858.64
3	Social se		s 00.00	4 Social	security tax	withheld 2728.00
5	5 Medicare wages and tips 44000.00		6 Medicare tax withheld 638.00			
d	Control	number	Dept.	Corp.	Employer	use only
00	0056	R8/27G			Α	12
С	c Employer's name, address, and ZIP code					

AWOIT SYSTEMS INC 12600 DEERFIELD SUITE 100 **PKWY** GA 30004 ALPHARETTA,

b	Employer's FED ID number 45-4375251	a Employee's SSA number XXX-XX-8435
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

SINDOORI NUTHIKATTU 1324 SOUTH FINLEY ROAD 30

LOMBARD, IL 60148

16 State wages, tips, etc. 44000.00 15 State | Employer's state ID no. | 45-4375251 | 000 17 State income tax 18 Local wages, tips, etc. 2178.00 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, tips, other 440	2 Federal income tax withheld 4858.64			
3 Social security wag	4 Social	security tax	withheld 2728.00	
5 Medicare wages an 440	6 Medica	re tax with	neld 638.00	
d Control number	Dept.	Corp.	Employer	use only
000056 R8/27G			Α	12
c Employer's name, a	YSTEMS			

b	Employer's FED ID number 45-4375251	a Employee's SSA number XXX-XX-8435
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 a	nd ZIP code

SINDOORI NUTHIKATTU 1324 SOUTH FINLEY ROAD

LOMBARD, IL 60148

15 State	Employer's state ID no. 45-4375251 000	16 State wages, tips, etc. 44000.00
17 State	income tax	18 Local wages, tips, etc.
	2178.00	
19 Local	income tax	20 Locality name
	IL State Refe	erence Copy

Wage and Tax Statement

5 Medicare wages and tips 44000.00	6 Medicare tax withheld 638.00			
d Control number Dept.	Corp. Employer use only			
000056 R8/27G	A 12			
c Employer's name, address, a	nd ZIP code			
AWOIT SYSTEMS INC 12600 DEERFIELD PKWY SUITE 100 ALPHARETTA, GA 30004				
b Employer's FED ID number 45-4375251	a Employee's SSA number XXX-XX-8435			
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				
SINDOORI NUTHIKATT	U			
1324 SOUTH FINLEY ROAD				
30				
LOMBARD, IL 60148				
15 State Employer's state ID no. 45-4375251 000	16 State wages, tips, etc. 44000.00			
17 State income tax 2178.00	18 Local wages, tips, etc.			
19 Local income tax	20 Locality name			
IL.State Filing Copy				

Wage and Tax

Statement

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