## 2022 W-2 and EARNINGS SUMMARY



Employee Reference
W-2 Wage and Tax
Statement
Copy C for employee's records.
d Control number
000006 KY/MX4

C Employer's name, address, and ZIP code

PRECISESOFTINC 12100 FORD RD SUITE B330 FARMERS BRANCH, TX 75234

Batch #94580

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

PRATYUSHA MANYAM 3210 ESPERANZA CROSSING AUSTIN

AUSTIN. TX 78758

A	USTIN, TX 78758			
b	Employer's FED ID number 86-2305071	a Employee's SSA number XXX-XX-2908		
1	Wages, tips, other comp.	2 Federal income tax withheld		
	51333.31	7074.69		
3	Social security wages	4 Social security tax withheld		
	15166.66	940.33		
5	Medicare wages and tips	6 Medicare tax withheld		
	15166.66	219.92		
7	Social security tips	8 Allocated tips		
9		10 Dependent care benefits		
11	Nonqualified plans	12a See instructions for box 12		
11	Other	12b		
'*		12c		
		12d		
		13 Stat emp Ret. plan 3rd party sick page		
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 Wages Wages Wages Box 1 of W-2 Box 3 of W-2 Box 5 of W-2

Gross Pay 51,333.31 51,333.31 51,333.31 Reported W-2 Wages 51,333.31 15,166.66 15,166.66

2. Employee Name and Address.

## PRATYUSHA MANYAM 3210 ESPERANZA CROSSING AUSTIN AUSTIN, TX 78758

Federal income tax withheld

Social security tax withheld 940.33

7074.69

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Wages, tips, other comp

Social security wages 15166.66

Medicare wages and tips 15166.66

51333.31

Wages, tips, other comp 51333.		2 Federal	income tax	7074.69	
3 Social security wages 15166.	4 Social security tax withheld 940.33				
5 Medicare wages and tips 15166.66		6 Medicare tax withheld 219.92			
d Control number D	ept.	Corp.	Employer	use only	
000006 KY/MX4			Α		

Employer's name, address, and ZIP code

PRECISESOFTINC 12100 FORD RD SUITE B330

17 State income tax

19 Local income tax

FARMERS BRANCH, TX 75234

		,		
b	Employer's FED ID number 86-2305071	a Employee's SSA number XXX-XX-2908		
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	and ZIP code		
32	RATYUSHA MANYA 210 ESPERANZA C USTIN	•••		
Α	USTIN, TX 78758			
15	State Employer's state ID no	o. 16 State wages, tips, etc.		

Federal Filing Copy

Wage and Tax

Statement

Copy B to be filed with employee's Federal Income Tax Return.

18 Local wages, tips, etc.

20 Locality name

13100.00	219.32		
d Control number Dept.	Corp. Employer use only		
000006 KY/MX4	A		
c Employer's name, address, a PRECISESOFTINC 12100 FORD RI SUITE B330 FARMERS BRAN	)		
b Employer's FED ID number 86-2305071	a Employee's SSA number XXX-XX-2908		
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 p		
eff Employee's name, address a PRATYUSHA MANYAM 3210 ESPERANZA CI AUSTIN AUSTIN, TX 78758	M Rossing		
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		
W-2 State Refe Wage a Statemel Copy 2 to be filed with employee's State			

1	Wages, tips, other comp. 51333.31		2 Federal income tax withheld 7074.69			
3	Social security wages 15166.66		4 Social security tax withheld 940.33			
5	Medicare wages and tips 15166.66		6 Medicare tax withheld 219.92			
<b>d</b>	Control number 0006 KY/MX4	Dept.	Corp.	Employ	yer use only	
c	Employer's name, addre	.cc ar	d 7ID co			
	PRECISESOFTINC 12100 FORD RD SUITE B330 FARMERS BRANCH, TX 75234					
b	Employer's FED ID num 86-2305071	iber	a Employee's SSA number XXX-XX-2908			
7	Social security tips		8 Allocated tips			
9			10 Dependent care benefits			
11	Nonqualified plans		12a			
14	Other		12b			
			12c			
			12d			
			13 Stat er	np. Ret. plan	3rd party sick pay	
e/f Employee's name, address and ZIP code						
PRATYUSHA MANYAM 3210 ESPERANZA CROSSING AUSTIN AUSTIN, TX 78758						

15 State Employer's state ID no. 16 State wages, tips, etc.

City or Local Reference

Statement

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

Wage and Tax

18 Local wages, tips, etc.

20 Locality name

17 State income tax

19 Local income tax