## 2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy
Wage and Tax
Statement

Mage Company Statement

Statement

 Copy C for employee'srecords.
 Statement
 OMB No. 1545-0008

 d Control number
 Dept. Ocrp. Employer use only 00102
 Employer use only 11

Employer's name, address, and ZIP code

101 US 130 S SUITE 411

CINNAMINSON, NJ 08077

Batch #90861

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

16 PEARSALL FARM LN CLAYTON, NC 27527

b	Emplo	yer's FED 1 <b>61-1773</b>		а	Empl		ee's SS/	\ number <b>(-4748</b>
1	Wages	s, tips, othe	r comp.	2	Feder	al	income	tax withheld
		39	9100.00					1570.21
3	Social	security w	ages	4	Socia	1 8	security	tax withheld
5	Medica	are wages	and tips	6	Medic	ar	e tax wi	thheld
7	Social	security tip	os	8	Alloca	ate	d tips	
9				10	Depen	de	nt care	benefits
11	Nonqu	alified plan	s	12	a See ir	str 	ructionsfo	r box 12
14	Other	Othor 12b						
14 0111	Other	.38 SUI		12				
				12		<u> </u>		
				13	Stat ei	np.	Ret. plan	3rd party sick pay
		Employer's EXEMPT	state ID no.	16	State	wa	ages, tip	s, etc. 39100.00
17	State	income tax	1200.39	18	Local	w	ages, tip	s, etc. 39100.00
19	Local	income tax	391.00	20	Local		name 720102	2

SICL AMERICA INC

101 US 130 S SUITE 411

CINNAMINSON, NJ 08077

b	Employer's FED ID number 61-1773696	a Employee's SSA number XXX-XX-4748			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	12a See instructions for box 12			
14	Other	12b			
	.38 SUI	12c			
	100 001	12d			
		13 Stat emp Ret. plan 3rd party sick pay			
٠,,					

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

SUMAN KUMAR ENDLA 16 PEARSALL FARM LN CLAYTON, NC 27527

	15 State Employer's state ID no. EXEMPT	16 State wages, tips, etc. 39100.00
I	17 State income tax	18 Local wages, tips, etc.
-	1200.39	39100.00
	19 Local income tax 391.00	20 Locality name 720102
	Federal Fil	ing Copy

W-2 Wage and Tax 2022
Statement
Copy B to be filed with employee's Federal Income Tax Return.

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.

Social Security 720102 Wages, Tips, other Medicare PA. State Wages, Compensation Wages Local Wages, Wages Box 3 of W-2 Box 16 of W-2 Box 1 of W-2 Box 5 of W-2 Tips, Etc. Box 18 of W-2 39,100.00 39,100.00 39,100.00 39,100.00 39,100.00 Gross Pav Reported W-2 Wages 39,100.00 39,100.00 0.00 0.00 39,100.00

2. Employee Name and Address.

## SUMAN KUMAR ENDLA 16 PEARSALL FARM LN CLAYTON, NC 27527

© 2022 ADP, Inc.

1 Wages, tips, other comp. 39100.00	2 Federal income tax withheld 1570.21		
3 Social security wages	4 Social security tax withheld		
Medicare wages and tips	6 Medicare tax withheld		
d Control number Dept.	Corp. Employer use only		
D00102 RB/GVM  Employer's name, address, a	10		
SICL AMERICA 101 US 130 S SUITE 411 CINNAMINSON,			
Employer's FED ID number 61-1773696	a Employee's SSA number		
Social security tips	8 Allocated tips		
)	10 Dependent care benefits		
11 Nonqualified plans	12a		
14 Other	12b		
.38 SUI	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
e/f Employee's name, address a			
SUMAN KUMAR END 16 PEARSALL FARM			
CLAYTON, NC 27527	LIV		
15 State Employer's state ID no EXEMPT	39100.00		
PA EXEMPT  17 State income tax	18 Local wages, tips, etc.		
PA EXEMPT			

Wage and Tax

Statement

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

1 Wages, tips, other comp. 39100.00	2 Federal income tax withheld 1570.21			
3 Social security wages	4 Social security tax withheld			
5 Medicare wages and tips	6 Medicare tax withheld			
d Control number Dept.	Corp. Employer use only			
000102 RB/GVM	10			
c Employer's name, address, SICL AMERICA	and ZIP code			
101 US 130 S SUITE 411 CINNAMINSON,	NJ 08077			
b Employer's FED ID number 61-1773696	a Employee's SSA number XXX-XX-4748			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a			
14 Other	12b			
.38 SUI	12c			
	12d			
.50 001				
.50 001	13 Stat emp. Ret. plan 3rd party sick p			
e/f Employee's name, address	13 Stat emp. Ret. plan 3rd party sick p			

15 State PA EXEMPT State ID no. 16 State wages, tips, etc. 39100.00

Wage and Tax

Statement

1200.39

391.00 City or Local Filing

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

18 Local wages, tips, etc.

20 Locality name 720102

17 State income tax

19 Local income tax