2022 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement Copy C for employee's records.

Control number | Dept. OMB No. 1545-0008 Corp Employer use only c Employer's name, address, and ZIP code ACS 16170 ZF NORTH AMERICA INC 9445 ROCKSIDE RD VALLEY VIEW, OH 44125 e/f Employee's name, address, and ZIP code SYAM KURAMSETTI 30852 CENTENNIAL DR NOVI, MI 48377

b Employer's FED ID number a Employee's SSA number 61-1462969 1 Wages, tips, other comp XXX-XX-6687 80523.93 12310.52 3 Social security wages security tax withheld 86662.45 5373.07 5 Medicare wages and tips 6 Medicare tax withheld 86662.45 1256.61 7 Social security tips 10 Dependent care benefits 12a See instructions for box 1 12b D 12c W 14 Other 12d DD I 13 Stat emp 4518.36 15 State Employer's state ID no. 16 State wages, tips, etc. MI 61-1462969 80523.93 17 State Income tax 18 Local wages, tips, etc. 3421.79 19 Local income tax 20 Locality name

This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that you may also find helpful. The following reflects your final pay stub, plus

any adjustments made by your employer. 5,373.07 GROSS PAY SOCIAL SECURITY TAX WITHHELD BOX 04 OF W-2 MEDICARE TAX FED. INCOME 1,256.61 12.310.52 TAX WITHHELD WITHHELD BOX 02 OF W-2 BOX 06 OF W-2 0.00 SUI/SDI STATE INCOME TAX 3,421.79 BOX 17 OF W-2 LOCAL INCOME TAX BOX 14 OF W-2 0.00

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

Social Security Number: XXX-XX-6687

SYAM KURAMSETTI 30852 CENTENNIAL DR NOVI, MI 48377

BOX 19 OF W-2



© 2022 ADP, Inc

PAGE 1 OF 1

Wages, tips, other comp. 80523.93		2 Federal income tax withheld 12310.52		
Social security wages 86662.45		4 Social	security tax withheld 5373.07	
Medicare wages and tips 8662.45		6 Medica	re tax withheld 1256.61	
d Control number 0000000623 R79	Dept. 000015	Corp.	Employer use only A C S 16170	

ZF NORTH AMERICA INC 9445 ROCKSIDE RD VALLEY VIEW, OH 44125

b Employer's FED ID numb 61-1462969	per a Employee's SSA number XXX-XX-6687
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See Instructions for box 12 C 56.81
14 Other	^{12b} D 6138.52
	12c W 1513.50
	12d DD 4518.36
	13 Stat emp. Ret. plan 3rd party sick pay

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

30852 CENTENNIAL DR NOVI, MI 48377

	Employer's state ID no. 61-1462969	16	State wages, tips, etc. 80523.93
17 State income tax 3421.79		18	Local wages, tips, etc.
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 comp. 80523.93 3 Social security wages 86662.45		2 Federal income tax withheld 12310.52 4 Social security tax withheld 5373.07		
d Control number	Dept.	Corp.	Employer use only	
0000000623 R79	000015	CKQ0	A C S 16170	
ZF NORTH AI 9445 ROCKSI VALLEY VIEW	MERICA DE RD	INC	ode	

b Employer's FED ID number 61-1462969	a Employee's SSA number XXX-XX-6687			
7 Social security tips	8 Allocated tips			
T ************************************	10 Depende	ent care benefits		
11 Nonqualified plans	12a C	56.81		
14 Other	^{12b} D	6138.52		
	12¢W	1513.50		
	12dDD	4518.36		
	13Stat emp. R	et plan 3rd party sick pay		

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

30852 CENTENNIAL DR NOVI, MI 48377

15 State MI	Employer's state ID no. 61-1462969	16	State wages, tips, etc. 80523.93	
17 State income tax 3421.79		18	Local wages, tips, etc.	
19 Local	income tax	20	Locality name	

MI. State Filing Copy
Wage and Tax
Statement Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tlps, other comp. 80523.93 Social security wages 8662.45 Medicare wages and tlps 86662.45		2 Federal Income tax withheld 12310.52 4 Social security tax withheld 5373.07		
3					
5			6 Medicare tax withheld 1256.61		
d	Control number	Dept.	Corp.	Employer use only	
	0000000623 R79	000015	CKQ0	ACS 16170	
С	Employer's name, a ZF NORTH AM 9445 ROCKSIE VALLEY VIEW	ERICA DE RD	INC	ode	
b	Employer's FED ID 61-146296	number 9	a Employ	/ee's SSA number XXX-XX-6687	
7	Social security tine		8 Allocat	- 4 1	

b Employer's FED ID numb 61-1462969	er a Employee's SSA number XXX-XX-6687
7 Social security tips	8 Allocated tips
Q	10 Dependent care benefits
11 Nonqualified plans	12a C 56.81
14 Other	12b D 6138.52
	12c W 1513.50
	12d DD 4518.36
	13 Stat emp. Ret. plan 3rd party sick p
e/f Employee's name, addre	ss and ZIP code

SYAM KURAMSETTI 30852 CENTENNIAL DR NOVI, MI 48377

MI	Employer's state ID no. 61-1462969	16	State wages, tips, etc. 80523.93	
	3421.79	18	Local wages, tips, etc.	
19 Local	income tax	20	Locality name	

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