2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Employer use only 000033 KB/Z60 Employer's name, address, and ZIP code

INNOVATECLIN SOLUTIONS 370 CAMPUS DR STE 139 SOMERSET, NJ 08873 1181

Batch #93417

33278.82

18 Local wages, tips, etc.

20 Locality name

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

BALA GANGADHARA S MEDICHERLA 3336 JEFFERSON AVENUE **APT 37**

CINCINNATI, OH 45220

17 State income tax

19 Local income tax

Employer's FED ID number a Employee's SSA number 47-1071609 XXX-XX-1249 Wages, tips, other comp. Federal income tax withheld 33278.82 3407.33 Social security wages Social security tax withheld 10573.74 655.57 5 Medicare wages and tips 6 Medicare tax withheld 10573.74 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. OH 54-185965 8 332

Wages, tips, other comp 33278.82 3407.33 Social security wages 10573.74 withheld 655.57 Medicare tax withheld 153.32 Medicare wages and tips 10573.74 Employer use only 000033 KB/Z60 Employer's name, address, and ZIP code

INNOVATECLIN SOLUTIONS INC 370 CAMPUS DR STE 139 SOMERSET, NJ 08873 1181

b	Employer's FED ID number 47-1071609		yee's SS	A number X-1249
7	Social security tips	8 Alloca	ted tips	
9		10 Depend	dent care	benefits
11	Nonqualified plans	12a See i	nstruction	s for box 12
14	Other	12b		
		12c		
		12d		
		13 Stat em	p. Ret. plan	3rd party sick pay
e/f	Employee's name, address ar	d ZIP cod	е	

BALA GANGADHARA S MEDICHERLA 3336 JEFFERSON AVENUE APT 37

CINCINNATI, OH 45220

5 State | Employer's state | ID no. | 16 State wages, tips, etc. | 33278.82

17 State income tax 18 Local wages, tips, etc. 883.91 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. 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	OH. State Wages,
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2
Gross Pay	36,247.20	36,247.20	36,247.20	36,247.20
Less Other Cafe 125 Reported W-2 Wages	2,968.38	989.46	989.46	2,968.38
	33,278.82	10,573.74	10,573.74	33,278.82

2. Employee Name and Address.

BALA GANGADHARA S MEDICHERLA 3336 JEFFERSON AVENUE **APT 37** CINCINNATI, OH 45220

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1	1 Wages, tips, other comp. 33278.82			2 Federal income tax withheld 3407.33				
3	Social security wages 10573.74		4 Social security tax withheld 655.57					
5	Medicare wages and tips 10573.74		6 Medicare tax withheld 153.32					
d	Control number	Dept.	Corp).	Employ	er use only		
00	0033 KB/Z60				Α			
С	Employer's name, add	ress, ar	nd ZIP	cod	е			
	INNOVATECLIN SOLUTIONS INC 370 CAMPUS DR STE 139 SOMERSET, NJ 08873 1181							
b	Employer's FED ID nu 47-1071609	mber	a Em		ree's SSA			
7	Social security tips		8 All	ocat	ed tips			
9			10 De	oenc	lent care	benefits		
11	Nonqualified plans	*************	12 a	ı				
14	Other		12b	i				
			12c	ī				
			12d	ī				
			13 Stat	emp	Ret. plan	3rd party sick pay		
e/f Employee's name, address and ZIP code BALA GANGADHARA S MEDICHERLA 3336 JEFFERSON AVENUE APT 37								

1	Wages, tips, other comp. 33278.82			2 Federal income tax withheld 3407.33			
3	3 Social security wages 10573.74			4 Social security tax withheld 655.57			
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d	Control	number	Dept.	Corp.	Employer use only		
00	0033	KB/Z60			Α		
c Employer's name, address, and ZIP code							
	INNOVATECLIN SOLUTIONS INC						

370 CAMPUS DR STE 139 SOMERSET, NJ 08873 1181

Employer's FED ID number 47-1071609	a Employee's SSA number XXX-XX-1249			
Social security tips	8 Allocated tips			
	10 Dependent care benefits			
Nonqualified plans	12a			
Other	12b			
	12c			
	12d			
	13 Stat emp. Ret. plan 3rd party sick pay			
	47-1071609 Social security tips			

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

BALA GANGADHARA S MEDICHERLA 3336 JEFFERSON AVENUE **APT 37** CINCINNATI, OH 45220

15 State OH	Employer's state ID no. 54-185965 8	16	State	wages,	tips, etc. 33278.82
17 State	income tax	18	Local	wages,	tips, etc.
	883.91				
19 Local	income tax	20	Local	ity nam	е
		l			

OH.State Filing Copy Wage and Tax Statement

Wage and Tax Statement

OH.State Reference

5 State CH S4-185965 8 Employer's state ID no. 16 State wages, tips, etc. 33278.82

18 Local wages, tips, etc.

20 Locality name

CINCINNATI, OH 45220

17 State income tax

19 Local income tax

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

883.91

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