## 2022 W-2 and EARNINGS SUMMARY

Employee Reference Copy 2 Wage and Tax 2 copy C for employee's records.

Dept. Statement d Control number Corp. Employer use only 054918 NCN3/953 A08632

Employer's name, address, and ZIP code SDH EDUCATION WEST LLC P.O. BOX 17033 AUGUSTA GA 30903

Batch #04059

e/f Employee's name, address, and ZIP code BHAVYASREE KOSANAM 923 W UNIVERSITY AVE 4-119

FLAGSTAFF AZ 86001-3076

Employer's FED ID number | a Employee's SSA number 52-2282038 XXX-XX-1177

4287.38 100.37 3 Social security wages Social security tax withheld

5 Medicare wages and tips 6 Medicare tax withheld 7 Social security tips

8 Allocated tips

10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12 DI 12.75 12b 14 Other

13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wage AZ 52-2282038

17 State income tax 18 Local wages, tips, etc. 34.31 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.

AZ. State Wages, Wages, Tips, other Social Security Medicare Compensation Tips, Etc. Wages Wages Box 16 of W-2 Box 1 of W-2 Box 3 of W-2 Box 5 of W-2 **Gross Pay** 4,300.13 4,300.13 4,300.13 4,300.13 Less 401(k) (D-Box 12) 12.75 12.75 N/A N/A Less Exempt Wages N/A N/A 4,300.13 4,300.13 Reported W-2 Wages 4,287.38 4,287.38 0.00 0.00

2. Employee Name and Address.

BHAVYASREE KOSANAM 923 W UNIVERSITY AVE 4-119 FLAGSTAFF AZ 86001-3076

2 Federal income tax withheld

4 Social security tax withheld

100.37

1277

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Wages, tips, other comp.

Social security wages

Wages, tips, other comp 4287.38 100.37 Social security wages 4 Social security tax withheld Medicare wages and tips 6 Medicare tax withheld d Control number Dept Corp. **Employer use only** 054918 NCN3/953 A08632 1277

Employer's name, address, and ZIP code SDH EDUCATION WEST LLC P.O. BOX 17033 AUGUSTA GA 30903

b Employer's FED ID number 52-2282038 Employee's SSA number XXX-XX-1177 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 D 12.75 14 Other 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code BHAVYASREE KOSANAM 923 W UNIVERSITY AVE 4-119

FLAGSTAFF AZ 86001-3076

19 Local income tax

15 State Employer's state ID no. 16 State wages, tips, etc. 52-2282038 4287.38 17 State income tax 18 Local wages, tips, etc. 34.31

20 Locality name Federal Filing Copy 2 Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

Medicare wages and tips 6 Medicare tax withheld d Control number Dept. Employer use only 054918 NCN3/953 A08632 Employer's name, address, and ZIP code SDH EDUCATION WEST LLC P.O. BOX 17033 AUGUSTA GA 30903

Fold and Detach Here

4287 38

Employer's FED ID number 52-2282038 a Employee's SSA number XXX-XX-1177 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans D 12.75 14 Other 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code BHAVYASREE KOSANAM 923 W UNIVERSITY AVE

4-119

19 Local income tax

FLAGSTAFF AZ 86001-3076

15 State Employer's state ID no. 16 State wages, tips, etc. 4287.38 17 State income tax 18 Local wages, tips, etc. 34.31

AZ.State Reference Copy W-2 Wage and Tax 2022
Statement
Copy 2 to be filed with employee's State Income Tax Refurn.

20 Locality name

Wages, tips, other comp. 2 Federal income tax withheld 4287.38 100.37 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 054918 NCN3/953 A08632 1277 Employer's name, address, and ZIP code SDH EDUCATION WEST LLC P.O. BOX 17033 AUGUSTA GA 30903

Employer's FED ID number 52-2282038 a Employee's SSA number XXX-XX-1177 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12.75 14 Other 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code BHAVYASREE KOSANAM 923 W UNIVERSITY AVE 4-119

FLAGSTAFF AZ 86001-3076

15 State Employer's state ID no. 16 State wages, tips, etc. AZ 52-2282038 4287.38 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

AZ.State Filing Copy 2 Wage and Tax Statement TAX Return. No. 1545-0006 Copy 2 to be filed with employee's State Income Tax