2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Employer use only 000066 K7/AZ9 Employer's name, address, and ZIP code CIBERLYNX INC 1200 W WALNUT HILL LN STE 2275 IRVING, TX 75038 Batch #91002 e/f Employee's name, address, and ZIP code DEVANAND ALE 38255 SARATOGA CIRCLE APT 26-102 **FARMINGTON** HILLS, MI 48331 a Employee's SSA number XXX-XX-3908 Employer's FED ID number 81-4310365 Wages, tips, other comp Federal income tax withheld 182241.76 20037.30 Social security wages Social security tax withheld 147000.00 9114.00 Medicare wages and tips 6 Medicare tax withheld 2642.51 182241.76 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.

1 Wages, tips, other comp. 182241.76			2 Federal income tax withheld 20037.30			
3 Social security wages 147000.00			4 Social security tax withheld 9114.00			
5 Medicare wages and tips 182241.76			6 Medicare tax withheld 2642.51			
d	Control r	number	Dept.	Corp.	Employer	use only
00	00066	K7/AZ9			Α	2
c Employer's name, address, and ZIP code						

18 Local wages, tips, etc.

20 Locality name

17 State income tax

19 Local income tax

CIBERLYNX INC 1200 W WALNUT HILL LN STE 2275 IRVING, TX 75038

b	Employer's FED ID number 81-4310365	a Employee's SSA number XXX-XX-3908
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 ar	d ZIP code

DEVANAND ALE

38255 SARATOGA CIRCLE APT 26-102

FARMINGTON HILLS, MI 48331

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

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
	Compensation	Wages	Wages
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
Gross Pay	191,710.00	191,710.00	191,710.00
Less Other Cafe 125	9,468.24	9,468.24	9,468.24
Less Wages Over Limit Reported W-2 Wages	N/A	35,241.76	N/A
	182,241.76	147,000.00	182,241.76

2. Employee Name and Address.

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1 Wages, tips, other comp. 182241.7	6 Prederal income tax withheld 20037.30
3 Social security wages 147000.0	o Social security tax withheld 9114.00
5 Medicare wages and tips 182241.7	6 Medicare tax withheld 2642.51
d Control number De	pt. Corp. Employer use only
000066 K7/AZ9	A 2

c Employer's name, address, and ZIP code

CIBERLYNX INC 1200 W WALNUT HILL LN STE 2275 IRVING, TX 75038

b	Employer's FED ID number 81-4310365	a Employee's SSA number XXX-XX-3908
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 pay

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

DEVANAND ALE 38255 SARATOGA CIRCLE APT 26-102 **FARMINGTON** HILLS, MI 48331

ı						
	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

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

b Employer's FED ID number 81-4310365	a Employee's SSA number XXX-XX-3908
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 pay
e/f Employee's name, address	and ZIP code
DEVANAND ALE 38255 SARATOGA (APT 26-102 FARMINGTON HILLS	
15 State Employer's state ID r	no. 16 State wages, tips, etc.

Wages, tips, other comp

3 Social security wages 147000.00

d Control number

000066 K7/AZ9

Medicare wages and tips 182241.76

182241.76

c Employer's name, address, and ZIP code

CIBERLYNX INC

City or Local Reference Wage and Tax

17 State income tax

19 Local income tax

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

20 Locality name

18 Local wages, tips, etc.

2 Federal income tax withheld

4 Social security tax withheld

Medicare tax withheld

1200 W WALNUT HILL LN STE 2275 IRVING, TX 75038

20037.30

9114.00

2642.51

Employer use only