

2022 W-2 and EARNINGS SUMMARY

Employee Reference Copy W-2 Wage and Tax Statement 2022

Copy C for employee's records
OMB No. 1545-0048

d Control number		Dept.	Corp.	Employer use only
000005851 T98		UQD1	A S	651
c Employer's name, address, and ZIP code				
NC HEALTH AFFILIATES LLC P.O. BOX 2291 DURHAM, NC 27702-2291				
e/f Employee's name, address, and ZIP code				
NARENDRA LENKA 1000 ALEXAN DRIVE APT #204 DURHAM, NC 27707				
b Employer's FED ID number		a Employee's SSA number		
36-4864944		XXX-XX-1899		
1 Wages, tips, other comp.	2 Federal income tax withheld			
26666.12	3084.99			
3 Social security wages	4 Social security tax withheld			
28223.84	1749.88			
5 Medicare wages and tips	6 Medicare tax withheld			
28223.84	409.25			
7 Social security tips	8 Allocated tips			
11 Nonqualified plans		12a See instructions for box 12		
		C 47.80		
14 Other		12b D 1557.72		
		12c W 876.33		
		12d DD 3179.85		
		13 Stat emp. (Ret. plan) 3rd party sick pay		
		X		
15 State	Employer's state ID no.	16 State wages, tips, etc.		
NC	601374915	26666.12		
17 State income tax	18 Local wages, tips, etc.			
1107.00				
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.

GROSS PAY	29,144.00	SOCIAL SECURITY TAX WITHHELD	1,749.88
FED. INCOME TAX WITHHELD	3,084.99	BOX 04 OF W-2	
BOX 02 OF W-2		MEDICARE TAX WITHHELD	409.25
STATE INCOME TAX	1,107.00	BOX 06 OF W-2	
BOX 17 OF W-2		SUI/SDI	0.00
LOCAL INCOME TAX	0.00	BOX 14 OF W-2	
BOX 19 OF W-2			

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

Social Security Number: XXX-XX-1899

NARENDRA LENKA
1000 ALEXAN DRIVE
APT #204
DURHAM, NC 27707



© 2022 ADP, Inc

PAGE 1 OF 1

1 Wages, tips, other comp.	2 Federal income tax withheld		
26666.12	3084.99		
3 Social security wages	4 Social security tax withheld		
28223.84	1749.88		
5 Medicare wages and tips	6 Medicare tax withheld		
28223.84	409.25		
d Control number	Dept.	Corp.	Employer use only
000005851 T98	UQD1	A S	651
c Employer's name, address, and ZIP code			
NC HEALTH AFFILIATES LLC P.O. BOX 2291 DURHAM, NC 27702-2291			
b Employer's FED ID number		a Employee's SSA number	
36-4864944		XXX-XX-1899	
7 Social security tips	8 Allocated tips		
11 Nonqualified plans		12a See instructions for box 12	
		C 47.80	
14 Other		12b D 1557.72	
		12c W 876.33	
		12d DD 3179.85	
		13 Stat emp. (Ret. plan) 3rd party sick pay	
		X	
15 State	Employer's state ID no.	16 State wages, tips, etc.	
NC	601374915	26666.12	
17 State income tax	18 Local wages, tips, etc.		
1107.00			
19 Local income tax	20 Locality name		
Federal Filing Copy W-2 Wage and Tax Statement 2022 OMB No. 1545-0048 Copy B to be filed with employee's Federal Income Tax Return.			

1 Wages, tips, other comp.	2 Federal income tax withheld		
26666.12	3084.99		
3 Social security wages	4 Social security tax withheld		
28223.84	1749.88		
5 Medicare wages and tips	6 Medicare tax withheld		
28223.84	409.25		
d Control number	Dept.	Corp.	Employer use only
000005851 T98	UQD1	A S	651
c Employer's name, address, and ZIP code			
NC HEALTH AFFILIATES LLC P.O. BOX 2291 DURHAM, NC 27702-2291			
b Employer's FED ID number		a Employee's SSA number	
36-4864944		XXX-XX-1899	
7 Social security tips	8 Allocated tips		
11 Nonqualified plans		12a See instructions for box 12	
		C 47.80	
14 Other		12b D 1557.72	
		12c W 876.33	
		12d DD 3179.85	
		13 Stat emp. (Ret. plan) 3rd party sick pay	
		X	
15 State	Employer's state ID no.	16 State wages, tips, etc.	
NC	601374915	26666.12	
17 State income tax	18 Local wages, tips, etc.		
1107.00			
19 Local income tax	20 Locality name		
NC State Filing Copy W-2 Wage and Tax Statement 2022 OMB No. 1545-0048 Copy 2 to be filed with employee's State Income Tax Return.			

1 Wages, tips, other comp.	2 Federal income tax withheld		
26666.12	3084.99		
3 Social security wages	4 Social security tax withheld		
28223.84	1749.88		
5 Medicare wages and tips	6 Medicare tax withheld		
28223.84	409.25		
d Control number	Dept.	Corp.	Employer use only
000005851 T98	UQD1	A S	651
c Employer's name, address, and ZIP code			
NC HEALTH AFFILIATES LLC P.O. BOX 2291 DURHAM, NC 27702-2291			
b Employer's FED ID number		a Employee's SSA number	
36-4864944		XXX-XX-1899	
7 Social security tips	8 Allocated tips		
11 Nonqualified plans		12a See instructions for box 12	
		C 47.80	
14 Other		12b D 1557.72	
		12c W 876.33	
		12d DD 3179.85	
		13 Stat emp. (Ret. plan) 3rd party sick pay	
		X	
15 State	Employer's state ID no.	16 State wages, tips, etc.	
NC	601374915	26666.12	
17 State income tax	18 Local wages, tips, etc.		
1107.00			
19 Local income tax	20 Locality name		
City or Local Filing Copy W-2 Wage and Tax Statement 2022 OMB No. 1545-0048 Copy 2 to be filed with employee's City or Local Income Tax Return.			