APP .

NY. State Reference Wage and Tax Statement Statement Dept. Corp. 2 to be filed with employee's State Income Tax Return.

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

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

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

A STATE OF TAX TO TA

c Employer's name, address, and ZIP code

WISSENIT INC 775 ADDISON AVENUE SUITE 102 ROCKHILL, SC 29730

Batch #94087

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

BHAVYA KOMERNENI 47 ROMANIAN AVENUE JERSEY CITY, NJ 07306

b	Employer's FED ID number 82-4001510			а	a Employee's SSA number XXX-XX-9291				
1	Wages, tips, other comp.			2 Federal income tax withheld					
	43784.12				7513.20				
3	3 Social security wages			4	4 Social security tax withheld				
43784.12				2714.62					
5	5 Medicare wages and tips			6	6 Medicare tax withheld				
43784.12				634.87					
7	Social	security	tips	8	Alloca	ite	d tips		
9	9			10	10 Dependent care benefits				
11	11 Nonqualified plans			12	12a See instructions for box 12				
14	Other		121						
'	Caro			120		<u></u>			
			120	-					
				13	Stat er	np	Ret. plar	3rd party sick pay	
15 State Employer's state ID no. NY 82-4001510			16	16 State wages, tips, etc. 43784.12					
17 State income tax 1216.69			18	18 Local wages, tips, etc.					
			\perp						
19 Local income tax			20	20 Locality name					

1	Wages, tips, other of	omp. 84.12	2 Federal income tax withheld 7513.20			
3	Social security wag	s 84.12	4 Social security tax withheld 2714.62			
5	Medicare wages and 437	tips 84.12	6 Medicare tax withheld 634.87			
d	Control number	Dept.	Corp.	Employer use only		
00	0050 RU/VSB			A		

c Employer's name, address, and ZIP code

WISSENIT INC 775 ADDISON AVENUE SUITE 102 ROCKHILL, SC 29730

b	Employer's FED ID number 82-4001510	a Employee's SSA number XXX-XX-9291				
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 and ZIP code

BHAVYA KOMERNENI 47 ROMANIAN AVENUE JERSEY CITY, NJ 07306

15 State NY	Employer's state ID no. 82-4001510	16 State wage	es, tips, etc. 43784.12
17 State	income tax 1216 <u>.</u> 69	18 Local wag	es, tips, etc.
19 Local	income tax	20 Locality n	ame
	NY State Fili	na Copy	/

W-2 Wage and Tax Statement Statement Return. No. 1545-0008

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.

NY. State Wages, Tips, Etc. Box 16 of W-2

Gross Pay

Reported W-2 Wages

23,463.60 **43,784.12**

2. Employee Name and Address.

BHAVYA KOMERNENI 47 ROMANIAN AVENUE JERSEY CITY, NJ 07306

* New York requires total Federal wages to be reported in Box 16.

INTENTIONALLY