



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.

<b>Employee Reference Copy</b>			
<b>W-2 Wage and Tax Statement</b>		<b>2023</b>	
Copy C for employee's records. OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only
000055 KD/C5H			A 12
c Employer's name, address, and ZIP code			
PIEDMONT PHYSICAL THERAPY INC 8551 RIXLEW LANE SUITE 340 MANASSAS, VA 20109			
Batch #91196			
e/f Employee's name, address, and ZIP code			
HARIPRIYA GOVARDHANAM 42303 STONEMONT CIRCLE ASHBURN, VA 20148-1798			
b Employer's FED ID number	a Employee's SSA number		
26-4579985	XXX-XX-4688		
1 Wages, tips, other comp.	2 Federal income tax withheld		
19656.35	1179.86		
3 Social security wages	4 Social security tax withheld		
19656.35	1218.69		
5 Medicare wages and tips	6 Medicare tax withheld		
19656.35	285.02		
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		
15 State VA	Employer's state ID no. 30264579985F001	16 State wages, tips, etc. 19656.35	
17 State income tax	841.13	18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	VA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	19,656.35	19,656.35	19,656.35	19,656.35
Reported W-2 Wages	19,656.35	19,656.35	19,656.35	19,656.35

2. Employee Name and Address.

HARIPRIYA GOVARDHANAM  
42303 STONEMONT CIRCLE  
ASHBURN, VA 20148-1798

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