



Prisma Health-University Medical Group 300 E McFee Ave Ste 500 Greenville, SC 29601 (864) 797-7729  
Kinsey Santamassino 302 Waterbury Ct Simpsonville, SC 29680

Name	Company	Employee ID	Pay Period Begin	Pay Period End	Check Date	Check Number
Kinsey Santamassino	Prisma Health-University Medical Group	1093358	05/19/2024	06/01/2024	06/07/2024	

	Gross Pay	Pre-Tax Deductions	Employee Taxes	Post Tax Deductions	Net Pay
Current	1,407.06	92.99	243.66	2.22	1,068.19
YTD	15,312.88	1,040.06	2,588.32	26.64	11,657.86

Earnings						
Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount
Regular	05/19/2024 - 06/01/2024	77.5833	16.09	1,248.32	890.4333	14,327.15
Ben-PTO	05/26/2024 - 06/01/2024	8	16.09	128.72	53.6	862.47
Diff-Shift Evening/Night	05/26/2024 - 06/01/2024	0.5333	1.25	0.67	0.5333	0.67
Diff-Weekend	05/19/2024 - 06/01/2024	6.65	1.25	7.57	24.4833	30.64
Non-Cash-Inspire Award			0	0	0	17.00
Non-Cash Wellness Rewards Mail			0	0	0	213.00
OT Hours-Regular	05/19/2024 - 05/25/2024	0.9	16.09	14.49	3.8	61.17
OTM-Overtime Premium	05/19/2024 - 05/25/2024	0.9	8.09	7.29	3.8	30.78
Earnings				1,407.06		15,542.88

Employee Taxes			Amount	YTD
Description				
OASDI			84.96	936.36
Medicare			19.87	218.99
Federal Withholding			81.36	824.65
State Tax - SC			57.45	608.33
Employee Taxes			243.66	2,588.32

Pre-Tax Deductions			Post Tax Deductions		
Description	Amount	YTD	Description	Amount	YTD
403b EE Contribution	56.29	599.66	Accident Basic	2.22	26.64
Dental Low Employee Pre Tax	7.73	92.76			
Non-HDHP Employee Pre Tax	28.97	347.64			
Pre-Tax Deductions	92.99	1,040.06	Post Tax Deductions	2.22	26.64

Employer Paid Benefits			Taxable Wages		
Description	Amount	YTD	Description	Amount	YTD
401(a) Employer Contribution		787.78	OASDI - Taxable Wages	1,370.36	15,102.48
AD&D Basic	0.19	2.28	Medicare - Taxable Wages	1,370.36	15,102.48
Dental Low Employer	4.26	51.12	Federal Withholding - Taxable Wages	1,314.07	14,502.82
LTD	4.74	56.88	State Tax Taxable Wages - SC	1,314.07	14,502.82
Life Basic	0.50	6.00			
NON-HDHP Employer	284.17	3,410.04			
STD	8.16	97.92			
Employer Paid Benefits	302.02	4,412.90			

		Federal	State	Absence Plans		
Marital Status	Single or Married filing separately		Single	Description	Accrued	Reduced Available
PTO					6.768	8 34.611
Allowances		0	0			
Additional Withholding		0	0			

Payment Information			
Bank	Account Name	Account Number	USD Amount
Chase	Chase *****0653	*****0653	160.23 USD
Sofi	Sofi	*****3288	907.96 USD