



Prisma Health-University Medical Group 300 E McBee Ave Ste 500 Greenville, SC 29601 (864) 797-7729

Kinsey Santamassino 103 Jasmine Cove Cir 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	04/20/2025	05/03/2025	05/09/2025	

	Gross Pay	Pre-Tax Deductions	Employee Taxes	Post Tax Deductions	Net Pay
Current	1,434.81	109.69	243.59	17.81	1,063.72
YTD	13,611.69	1,046.38	2,355.17	156.10	10,054.04

Earnings							
Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount	
Regular	04/20/2025 - 05/03/2025	76.0833	17.96	1,366.47	686.4332	11,742.48	
Ben-Holiday Floating			0		8	136.00	
Ben-PTO	04/20/2025 - 04/26/2025	3.6167	17.96	64.96	98.5335	1,678.59	
Diff-Shift Evening/Night			0		1.0666	1.34	
Diff-Weekend	04/20/2025 - 04/26/2025	2.7	1.25	3.38	42.5665	53.28	
Non-Cash Wellness Rewards Mail			0		0	389.00	
Earnings				1,434.81		14,000.69	

Employee Taxes			
Description	Amount	YTD	
OASDI	86.61	844.52	
Medicare	20.26	197.51	
Federal Withholding	80.61	770.48	
State Tax - SC	56.11	542.66	
Employee Taxes	243.59	2,355.17	

Pre-Tax Deductions			Post Tax Deductions		
Description	Amount	YTD	Description	Amount	YTD
403b EE Contribution	71.75	666.98	Accident Basic	2.22	22.20
Dental Low Employee Pre Tax	7.73	77.30	ID Theft	4.59	45.90
Non-HDHP Employee Pre Tax	30.21	302.10	Retirement Loan (RSP 403B Loan 1)	11.00	88.00
Pre-Tax Deductions	109.69	1,046.38	Post Tax Deductions	17.81	156.10

Employer Paid Benefits			Taxable Wages		
Description	Amount	YTD	Description	Amount	YTD
401(a) ER Per Pay Period Contribution	43.05	408.41	OASDI - Taxable Wages	1,396.87	13,621.29
401(a) Employer Contribution		1,034.07	Medicare - Taxable Wages	1,396.87	13,621.29
AD&D Basic	0.21	2.02	Federal Withholding - Taxable Wages	1,325.12	12,954.31
Dental Low Employer	4.26	42.60	State Tax Taxable Wages - SC	1,325.12	12,954.31
LTD	2.46	23.56			
Life Basic	0.53	5.06			
NON-HDHP Employer	351.46	3,514.60			
STD	8.91	85.10			
Employer Paid Benefits	410.88	5,115.42			

Federal		State	Absence Plans			
Marital Status	Single or Married filing separately	Single	Description	Accrued	Reduced	Available
Allowances	0	0	PTO	7.97	3.6167	60.4101
Additional Withholding	0	0				

Payment Information				
Bank	Account Name	Account Number	USD Amount	Amount
Wells Fargo	Wells Fargo *****2984	*****2984		763.72 USD
Chase	Chase *****0653	*****0653		300.00 USD