



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	05/04/2025	05/17/2025	05/23/2025	

	Gross Pay	Pre-Tax Deductions	Employee Taxes	Post Tax Deductions	Net Pay
Current	1,397.60	107.82	252.65	17.81	1,019.32
YTD	15,009.29	1,154.20	2,607.82	173.91	11,073.36

Earnings						
Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount
Regular	05/04/2025 - 05/17/2025	71.5167	17.96	1,284.45	757.9499	13,026.93
Ben-Holiday Floating			0		8	136.00
Ben-PTO	05/04/2025 - 05/10/2025	6.3	17.96	113.15	104.8335	1,791.74
Diff-Shift Evening/Night			0		1.0666	1.34
Diff-Weekend			0		42.5665	53.28
Non Cash-Inspire Award	05/04/2025 - 05/17/2025	0	0	35.00	0	35.00
Non-Cash Wellness Rewards Mail	05/04/2025 - 05/17/2025	0	0	36.00	0	425.00
Earnings				1,468.60		15,469.29

Employee Taxes		
Description	Amount	YTD
OASDI	88.70	933.22
Medicare	20.74	218.25
Federal Withholding	84.89	855.37
State Tax - SC	58.32	600.98
Employee Taxes	252.65	2,607.82

Pre-Tax Deductions			Post Tax Deductions		
Description	Amount	YTD	Description	Amount	YTD
403b EE Contribution	69.88	736.86	Accident Basic	2.22	24.42
Dental Low Employee Pre Tax	7.73	85.03	ID Theft	4.59	50.49
Non-HDHP Employee Pre Tax	30.21	332.31	Retirement Loan (RSP 403B Loan 1)	11.00	99.00
Pre-Tax Deductions	107.82	1,154.20	Post Tax Deductions	17.81	173.91

Employer Paid Benefits			Taxable Wages		
Description	Amount	YTD	Description	Amount	YTD
401(a) ER Per Pay Period Contribution	41.93	450.34	OASDI - Taxable Wages	1,430.66	15,051.95
401(a) Employer Contribution		1,034.07	Medicare - Taxable Wages	1,430.66	15,051.95
AD&D Basic	0.21	2.23	Federal Withholding - Taxable Wages	1,360.78	14,315.09
Dental Low Employer	4.26	46.86	State Tax Taxable Wages - SC	1,360.78	14,315.09
LTD	2.46	26.02			
Life Basic	0.53	5.59			
NON-HDHP Employer	351.46	3,866.06			
STD	8.91	94.01			
Employer Paid Benefits	409.76	5,525.18			

		Federal	State	Absence Plans		
Marital Status	Single or Married filing separately		Single	Description	Accrued	Reduced Available
Allowances	0		0	PTO	7.782	6.3 61.8921
Additional Withholding	0		0			

Payment Information				
Bank	Account Name	Account Number	USD Amount	Amount
Wells Fargo	Wells Fargo *****2984	*****2984		719.32 USD
Chase	Chase *****0653	*****0653		300.00 USD