

Employee Reference Copy Wage and Tax Statement Copy C for employee's record Control number Employer use onl 880 BOST/YGM 400

Employer's name, address, and ZIP code VIRTUSA CORPORATION 132 TURNPIKE RD STE 300 SOUTHBOROUGH MA 01772

Batch #02195

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

SURENDHAR GUTTA 715 LOCKEFIELD STREET APT B

IN	IDIANAPOLIS IN 46	20	2		
b	Employer's FED ID number 04-3512883	а	Empl	oyee's SS. XXX-XX	
1	Wages, tips, other comp.	2	Feder	al income	tax withheld
	108971.42				19773.57
3	Social security wages 108971.42	4	Socia	l security	tax withheld 6756.23
5	Medicare wages and tips 108971.42	6	Medic	are tax wi	thheld 1580.09
7	Social security tips	8	Alloca	ated tips	
9		10	Depen	dent care	benefits
11	Nonqualified plans		C	structions fo	42.56
14	Other	12	b DD		4978.51
		12	- '		
		13	Stat en	np. Ret. plan	3rd party sick pa
	State Employer's state ID no 0119738350 001	16	State	• .	s, etc. 08971.42
17 State income tax 3518.42		18 Local wages, tips, etc. 108971.42			os, etc. 08971.42
19	Local income tax 2200.40	20	Local	ity name C-49	

Federal income tax withheld 108971.42 19773.57 Social security wages 108971.42 Social security tax withheld 6756.23 Medicare tax withheld 1580.09 Medicare wages and tips 108971.42 d Control number Dept. Employer use only 114549 BOST/YGM 400 880 Employer's name, address, and ZIP code

VIRTUSA CORPORATION 132 TURNPIKE RD STE 300 SOUTHBOROUGH MA 01772

b	Employer's FED ID number 04-3512883	a Empl			A number X-2564
7	Social security tips	8 Alloc	ated	tips	
9		10 Deper	nden	t care	benefits
11	Nonqualified plans	12a See C	instr	uctio	ns for box 12 42.56
14	Other	^{12b} DD			4978.51
		12c			
		12d			
		13 Stat em	p.Re	t. plan	3rd party sick pay
e/f	Employee's name, address ar	d ZIP cod	de		

SURENDHAR GUTTA 715 LOCKEFIELD STREET APT B

INDIANAPOLIS IN 46202

15 State	Employer's state ID no. 0119738350 001	16 State	wages, tips, etc. 108971.42
17 State	income tax	18 Local	wages, tips, etc.
	3518.42		108971.42
19 Loca	income tax 2200.40	20 Local	ty name C-49
	Federal Fili	ng C	opy

Filing Wage and

Statement Copy B to be filed with employee's Federal Income Tax Return 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.

	Wages, Tips, other	Social Security	Medicare	IN. State Wages,
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2
Gross Pay	110,222.68	110,222.68	110,222.68	110,222.68
Plus GTL (C-Box 12)	42.56	42.56	42.56	42.56
Less Other Cafe 125 Reported W-2 Wages	1,293.82	1,293.82	1,293.82	1,293.82
	108,971.42	108,971.42	108,971.42	108,971.42

2. Employee Name and Address.

SURENDHAR GUTTA 715 LOCKEFIELD STREET APT B **INDIANAPOLIS** IN 46202

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1 Wages, tips, other comp. 108971.42		2 Federal income tax withheld 19773.57				
3 Social security wages 108971.42		4 Social	security	tax withheld 6756.23		
5 Medicare wages and tips 108971.42		6 Medica	are tax wit	thheld 1580.09		
d	Contr	ol number	Dept.	Corp.	Employ	er use only
11	4549	BOST/YGM	400		T	880
c Employer's name, address, and ZIP code						

VIRTUSA CORPORATION 132 TURNPIKE RD STE 300 SOUTHBOROUGH MA 01772

b	Employer's FED ID number 04-3512883	a Emplo	yee's SSA number XXX-XX-2564
7	Social security tips	8 Alloca	ated tips
9		10 Deper	ndent care benefits
11	Nonqualified plans	12a C	42.56
14	Other	12b DD	4978.51
		12c	
		12d	
		13 Stat em	p. Ret. plan 3rd party sick pa

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

SURENDHAR GUTTA 715 LOCKEFIELD STREET **INDIANAPOLIS IN 46202**

15 State Employer's state ID no. 0119738350 001	16 State wages, tips, etc. 108971.42
17 State income tax	18 Local wages, tips, etc.
3518.42	108971.42
19 Local income tax	20 Locality name
2200.40	C-49
IN.State Refe	rence Copy

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Retui

1	Wages, tips, other of 1089		2	Federa	I income tax	withheld 773.57
3	Social security wag 1089	es 71.42	4	Social	security tax v	vithheld 756.23
5	Medicare wages and tips 108971.42			Medica	are tax withhe	eld 580.09
d	Control number	Dept.		Corp.	Employer	use only
114	4549 BOST/YGM	400			T	880

c Employer's name, address, and ZIP code

VIRTUSA CORPORATION 132 TURNPIKE RD STE 300 SOUTHBOROUGH MA 01772

b	Employer's FED ID number 04-3512883	аЕ				number -2564	
7	Social security tips	8 A	lloca	ate	d tips		
9		10 D	epen	de	ent care	benefits	
11	Nonqualified plans	12a	С			42.56	
14	Other	12b	DD			4978.51	
		12c	Ī				
		12d	Ī				
		13 S	stat en	np.	Ret. plan	3rd party sick	pay
-16	of Employee's name address and ZID ands						

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

SURENDHAR GUTTA 715 LOCKEFIELD STREET APT B **INDIANAPOLIS IN 46202**

15 State	Employer's state ID no. 0119738350 001	16 State wages, tips, etc. 108971.42
17 State	income tax	18 Local wages, tips, etc.
	3518.42	108971.42
19 Loca	income tax	20 Locality name
	2200.40	Č-49

IN.State Filing Copy Wage and Statement

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

2020 W-2 and EARNINGS SUMMARY

City or Local Reference Copy

Wage and Tax 2020

Statement Office Statemen

c Employer's name, address, and ZIP code

VIRTUSA CORPORATION 132 TURNPIKE RD STE 300 SOUTHBOROUGH MA 01772

Batch #02195

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

SURENDHAR GUTTA 715 LOCKEFIELD STREET APT B

INDIANAF	POLIS	IN	46202

Employer's FED ID number				
108971.42	b Employer's FED ID number 04-3512883			
3 Social security wages 108971.42 6756.23 5 Medicare wages and tips 108971.42 1580.09 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 C 42.56 12b DD 4978.51 12c 12d 13 State Employer's state ID no. 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name 108971.42 10 Medicare tax withheld 6756.23 6 Medicare tax withheld 6756.23 8 Allocated tips 10 Dependent care benefits 10 Dependent care benefits 12a See instructions for box 12 C 42.56 12b DD 4978.51 12c 13 State wages, tips, etc. 16 State wages, tips, etc. 18 Local wages, tips, etc. 18 Local wages, tips, etc. 19 Local income tax 20 Locality name 20 Locality nam	1 Wages, tips, other comp.	2 Federal income tax withheld		
108971.42 6756.23	108971.42	19773.57		
5 Medicare wages and tips 108971.42 6 Medicare tax withheld 1580.09 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 C 42.56 42.56 12b DD 4978.51 12c 12d 12d 13 State mp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. 18 Local wages, tips, etc. 18 Local wages, tips, etc. 19 Local income tax 108971.42 19 Local income tax 20 Locality name 1580.09 10 Locality name	3 Social security wages	4 Social security tax withheld		
108971.42 1580.09 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 C 42.56 12b DD	108971.42	0.00.00		
To Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12				
10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12		1580.09		
12a See instructions for box 12	7 Social security tips	8 Allocated tips		
12b DD	9	10 Dependent care benefits		
12c 12d 13 State	11 Nonqualified plans	C 42.56		
12c 12d 13 State emp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. IN 0119738350 001 18 Local wages, tips, etc. 108971.42 19 Local income tax 20 Locality name	14 Other			
13 State mp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. IN 0119738350 001 18 Local wages, tips, etc. 108971.42 19 Local income tax 20 Locality name	14 Guiei			
15 State Employer's state ID no. 16 State wages, tips, etc. N 0119738350 001 18 Local wages, tips, etc. 18 Local wages, tips, etc. 108971.42 19 Local income tax 20 Locality name				
IN 0119738350 001 17 State income tax 18 Local wages, tips, etc. 108971.42 19 Local income tax 20 Locality name		13 Stat empl Ret. plan 3rd party sick pay		
108971.42 19 Local income tax 20 Locality name		o. 16 State wages, tips, etc.		
2200.40 C-49				
2200.10	2200.40	C-49		

1	Wages, tips, other of	omp.	2 Federa	al income tax withheld		
108971.42			19773.57			
3	Social security wag	es	4 Social security tax withheld			
108971.42			6756.23			
5	5 Medicare wages and tips			6 Medicare tax withheld		
5 Medicare wages and tips 108971.42				1580.09		
Ч			_			
	Control number	Dept.	Corp. Employer use only			
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~		"	00.6.	l _ ' ' '		
~	4549 BOST/YGM	400	Ос.р.	T 881		

c Employer's name, address, and ZIP code

VIRTUSA CORPORATION 132 TURNPIKE RD STE 300 SOUTHBOROUGH MA 01772

b	Employer's FED ID number 04-3512883	a Employee's SSA number XXX-XX-2564				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a See C	instructio	ns for box 12 42.56		
14	Other	12b DD	l	4978.51		
		12c				
		12d				
		13 Stat em	p. Ret. plan	3rd party sick pay		
e/f Employee's name, address and ZIP code						

SURENDHAR GUTTA 715 LOCKEFIELD STREET

APT B INDIANAPOLIS IN 46202

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	15 State IN	Employe 011973	r's state ID no. 8350 001	16 State wages, ti	ps, etc.
	17 State	income ta	ıx	18 Local wages, t	ips, etc. 108971.42
	19 Local income tax 2200.40		20 Locality name C-49		
ĺ		City o	or Local I	Filing Copy	
1				. —	

W-2 Statement OMB No. 1545-0

Copy 2 to be filed with employee's City or Local Income Tax Return.

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.

Local Wages, Tips, Etc. Box 18 of W-2 110,222.68

 Gross Pay
 110,222.68

 Plus GTL (C-Box 12)
 42.56

 Less Other Cafe 125
 1,293.82

 Reported W-2 Wages
 108,971.42

2. Employee Name and Address.

SURENDHAR GUTTA 715 LOCKEFIELD STREET APT B INDIANAPOLIS IN 46202

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Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2020, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year

A-Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. B-Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR

C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E-Elective deferrals under a section 403(b) salary reduction agreement F-Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J-Nontaxable sick pay (information only, not included in box 1, 3, or 5) K-20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L-Substantiated employee business expense reimbursements (nontaxable)

M-Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N-Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P-Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q-Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p)

SIMPLE plan (not included in box 1)

T-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts

V-Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525 Taxable and Nontaxable Income, for reporting requirements.

W-Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y-Deferrals under a section 409A nonqualified deferred compensation plan Z-Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA-Designated Roth contributions under a section 401(k) plan

BB-Designated Roth contributions under a section 403(b) plan DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF-Permitted benefits under a qualified small employer health reimbursement arrangement

GG-Income from qualified equity grants under section 83(i)

HH-Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filling your income tax return. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2020 or if income is earned for services provided while you were an inmate at a penal institution. For 2020 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form

W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2020 and more than \$8,537.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$5,012.70 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated