PAGE 1

Wage       and       Tax       202020         Copy C for employee's records.       Control number       Dept.       Corp.       Employer use only         351475       CL12/TLS       000       Corp.       Employer use only         a       7804         c       Employer's name, address, and ZIP code       TATA CONSULTANCY         SERVICES       LIMITED       379 THORNALL       STREET         EDISON NJ 08837       Batch #02445         e/f       Employee's name, address, and ZIP code         SRINITHI SOUNDARARAJAN       11         11       PALISADES RD         OLD BRIDGE NJ 08857         b       Employer's FED ID number         98-0429806       A         2       Federal income tax withheld         82340.24       12266.44         3       Social security wages         4       Social security tax withheld         82340.24       1105.09         5       Medicare wages and tips         6       Medicare tax withheld         82340.24       1193.93         7       Social security tips         8       Allocated tips         9       10 Dependent care benefits         11 <td< th=""><th>Employee Refe</th><th>erence Copy</th></td<>	Employee Refe	erence Copy
VV-2       Statement       Zueve         Copy C for employee's records.       Control number       Dept.       Corp.       Employer use only         351475       CLI2/TLS       000       Corp.       Employer use only         a       7804         c       Employer's name, address, and ZIP code         TATA CONSULTANCY       SERVICES LIMITED         379       THORNALL STREET         EDISON NJ 08837         Batch #02445         e/f Employee's name, address, and ZIP code         SRINITHI SOUNDARARAJAN         11       PALISADES RD         OLD BRIDGE NJ 08857         b       Employer's FED ID number         98-0429806       XXX-XX-0667         1       Wages, tips, other comp.         2       Federal income tax withheld         82340.24       12266.44         3       Social security wages         4       Social security tax withheld         82340.24       5105.09         5       Medicare wages and tips         6       Medicare tax withheld         82340.24       1193.93         7       Social security tips         8       Allocated tips         9       10 Dependent car	10/202	
Other amployee's records.         d       OMB No. 1545-0008         d       OMB No. 1545-0008         351475       CLI2/TLS       OMB No. 1545-0008         d       Conv C orp.       Employee's use only         351475       CLI2/TLS       OMB No. 1545-0008         Corp.       Employee's use only         A       7804         c       Employee's name, address, and ZIP code         SRINITHI SOUNDARARAJAN         11 PALISADES RD         OLD BRIDGE NJ 08857         b       Employee's SSA number         XXX-XX-0667         1 Wages, tips, other comp.       2       Federal income tax withheld         82340.24       12266.44         3       Social security wages       4       Social security tax withheld         82340.24       10206.44       1193.03         5       Medicare wages and tips       6       Medicare tax withheld         82340.24       1		
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351475       CLI2/TLS       000       A       7804         c       Employer's name, address, and ZIP code       TATA CONSULTANCY       SERVICES LIMITED         379       THORNALL       STREET       EDISON NJ 08837         Batch #02445         eff Employee's name, address, and ZIP code         SRINITHI SOUNDARARAJAN         11       PALISADES RD         OLD BRIDGE NJ 08857         b       Employer's FED ID number         a       Employee's SSA number         98-0429806       XXX-XX-0667         1       Wages, tips, other comp.         2       Federal income tax withheld         82340.24       12266.44         3       Social security wages         4       Social security tax withheld         82340.24       1193.93         7       Social security tips         8       Allocated tips         9       10 Dependent care benefits         11       Nonqualified plans       12a See instructions for box 12         13       DD       3056.14         14       Other       300.00 TFB         15       State       Employer's state ID no.         16       State wages, tip		
c       Employer's name, address, and ZIP code         TATA CONSULTANCY SERVICES LIMITED 379 THORNALL STREET EDISON NJ 08837         Batch #02445         e/f Employee's name, address, and ZIP code         SRINITHI SOUNDARARAJAN 11 PALISADES RD OLD BRIDGE NJ 08857         b       Employer's FED ID number 98-0429806         a       Employee's SSA number XXX-XX-0667         1       Wages, tips, other comp.         2       Federal income tax withheld 82340.24         3       Social security wages 82340.24         5       Medicare wages and tips 9         10       Dependent care benefits         11       Nonqualified plans         12a See instructions for box 12 DD         13       State Employer's state ID no. I 17.80 NJ/VPDI DI PF#         15       State Employer's state ID no. I PF#         15       State Income tax         17       State income tax         18       Local wages, tips, etc. 3771.78		
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379 THORNALL STREET EDISON NJ 08837         Batch #02445         e/f Employee's name, address, and ZIP code         SRINITHI SOUNDARARAJAN         11 PALISADES RD       OLD BRIDGE NJ 08857         b       Employer's FED ID number 98-0429806       a Employee's SSA number XXX-XX-0667         1       Wages, tips, other comp.       2 Federal income tax withheld 82340.24         3       Social security wages 82340.24       4 Social security tax withheld 82340.24         5       Medicare wages and tips 8       6 Medicare tax withheld 82340.24         7       Social security tips       8 Allocated tips         9       10 Dependent care benefits         11       Nonqualified plans       12a See instructions for box 12 DD         12       DD         13       State FLI 117.80 NJVPDI DI PP#         15       State       Employer's state ID no. 16         15       State       Income tax 3771.78         18       Local wages, tips, etc. 3771.78		
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Batch #02445         e/f Employee's name, address, and ZIP code         SRINITHI SOUNDARARAJAN         11 PALISADES RD         OLD BRIDGE NJ 08857         b Employer's FED ID number 98-0429806         a Employee's SSA number XXX-XX-0667         1 Wages, tips, other comp.         2 Federal income tax withheld         82340.24         3 Social security wages         4 Social security tax withheld         82340.24         5 Medicare wages and tips         6 Medicare tax withheld         82340.24         10 Dependent care benefits         11 Nonqualified plans         12a See instructions for box 12 DD         10 Dependent care benefits         11 Nonqualified plans         12a See instructions for box 12 DD         13 Stat emp Ret. plan 3rd party sick parts         14 Other         300.00 TFB 15 State Employer's state ID no. IPP#         15 State Employer's state ID no. IPP#         16 State wages, tips, etc.         TOTAL STATE         17 State income tax         18 Local wages, tips, etc.         3771.78         3391.67		
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SRINITHI SOUNDARARAJAN         11 PALISADES RD         OLD BRIDGE NJ 08857         b Employer's FED ID number 98-0429806       a Employee's SSA number XXX-XX-0667         1 Wages, tips, other comp.       2 Federal income tax withheld         1 Wages, tips, other comp.       2 Federal income tax withheld         3 Social security wages       4 Social security tax withheld         5 Medicare wages and tips       6 Medicare tax withheld         8 2340.24       5105.09         5 Medicare wages and tips       6 Medicare tax withheld         8 2340.24       1193.93         7 Social security tips       8 Allocated tips         9       10 Dependent care benefits         11 Nonqualified plans       12a See instructions for box 12 DDI         13 State in Con UTFB 150.03 SUI 134.61 FLI 117.80 NJVPDI DI PP#       13 Stat emp Ret. plan 3rd party sick part         15 State Employer's state ID no. In State income tax       16 State wages, tips, etc.         17 State income tax       18 Local wages, tips, etc.         19 Local income tax       20 Locality name	e/f Employee's name, address, a	and ZIP code
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OLD BRIDGE NJ 08857         b Employer's FED ID number 98-0429806       a Employee's SSA number XXX-XX-0667         1 Wages, tips, other comp.       2 Federal income tax withheld         3 Social security wages       4 Social security tax withheld         82340.24       5105.09         5 Medicare wages and tips       6 Medicare tax withheld         7 Social security tips       8 Allocated tips         9       10 Dependent care benefits         11 Nonqualified plans       12a See instructions for box 12 DDI         14 Other       300.00 TFB 150.03 SUI 134.61 FLI 117.80 NJVPDI DI PP#       12b I         15 State       Employer's state ID no. IPP#       16 State wages, tips, etc.         17 State income tax       3771.78       3391.67         19 Local income tax       20 Locality name		
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98-0429806     XXX-XX-0667       1     Wages, tips, other comp.     2     Federal income tax withheld       3     Social security wages     4     Social security tax withheld       3     Social security wages     4     Social security tax withheld       5     Medicare wages and tips     6     Medicare tax withheld       7     Social security tips     8     Allocated tips       9     10     Dependent care benefits       11     Nonqualified plans     12a See instructions for box 12 DDI     3056.14       14     Other     300.00 TFB 150.03 SUI 134.61 FLI 117.80 NJVPDI DI PP#     12b     12c       15     State     Employer's state ID no IPP#     16 State wages, tips, etc.       17     State income tax     18 Local wages, tips, etc.       19     Local income tax     20 Locality name		
1       Wages, tips, other comp.       2       Federal income tax withheld         82340.24       12266.44         3       Social security wages       4       Social security tax withheld         5       Medicare wages and tips       6       Medicare tax withheld         7       Social security tips       8       Allocated tips         9       10       Dependent care benefits         11       Nonqualified plans       12a See instructions for box 12 DD         150.03 SUI       12b       12c         154.61 FLI       12d       12d         17.80 NJVPDI       DI       3056.14         15       State       Employer's state ID no.       16 State wages, tips, etc.         17       State income tax       3771.78       3391.67         19       Local income tax       20 Locality name		
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3       Social security wages 82340.24       4       Social security tax withheld 5105.09         5       Medicare wages and tips 82340.24       6       Medicare tax withheld 1193.93         7       Social security tips       8       Allocated tips         9       10       Dependent care benefits         11       Nonqualified plans       12a See instructions for box 12 DDI       3056.14         14       Other       300.00 TFB 150.03 SUI 134.61 FLI 117.80 NJVPDI DI PP#       12b       12b         15       State       Employer's state ID no IPP#       16 State wages, tips, etc.       17 State income tax 3771.78         19       Local income tax       20       Locality name		
82340.24     5105.09       5     Medicare wages and tips 82340.24     6     Medicare tax withheld 1193.93       7     Social security tips     8     Allocated tips       9     10     Dependent care benefits       11     Nonqualified plans     12a See instructions for box 12 DDI       14     Other     300.00 TFB 150.03 SUI 134.61 FLI 134.61 FLI 13.61 FLI 13.61 FLI     12b 12c 12d       15     State     Employer's state ID no. IPP#     16 State wages, tips, etc.       17     State income tax     18 Local wages, tips, etc.       19     Local income tax     20 Locality name		
5     Medicare wages and tips 82340.24     6     Medicare tax withheld 1193.93       7     Social security tips     8     Allocated tips       9     10     Dependent care benefits       11     Nonqualified plans     12a See instructions for box 12 DD     3056.14       14     Other     300.00 TFB 150.03 SUI 134.61 FLI 134.61 FLI 134.61 FLI 137.80 NJVPDI DI PP#     12b 12c 13 State emp Ret. plan 3rd party sick party 16 State income tax       15     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		
82340.24         1193.93           7         Social security tips         8         Allocated tips           9         10 Dependent care benefits           11         Nonqualified plans         12a See instructions for box 12 DD         3056.14           14         Other         300.00 TFB 150.03 SUI 134.61 FLI         12b 12c         12d           15         State         Employer's state ID no. DI PP#         16 State wages, tips, etc.           15         State income tax         18 Local wages, tips, etc.           19         Local income tax         20 Locality name		
9     10 Dependent care benefits       11 Nonqualified plans     12a See instructions for box 12 DDI       14 Other     300.00 TFB 150.03 SUI 134.61 FLI 117.80 NJVPDI DI PP#     12b 12c 12d 13 State emp 15 State       15 State     Employer's state ID no TOTAL STATE     16 State wages, tips, etc.       17 State income tax     3771.78 3391.67		
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19 Local income tax 20 Locality name		
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### 2020 W-2 and EARNINGS SUMMARY

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 Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	NJ. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	84,140.24	84,140.24	84,140.24	84,140.24
Less Other Cafe 125	1,800.00	1,800.00	1,800.00	N/A
Reported W-2 Wages	82,340.24	82,340.24	82,340.24	84,140.24

2. Employee Name and Address.

### SRINITHI SOUNDARARAJAN 11 PALISADES RD OLD BRIDGE NJ 08857

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1 Wages, tips, other comp. 82340.24	2 Federal income tax withheld 12266.44	1 Wages, tips, other comp. 82340.24	2 Federal income tax withheld 12266.44	1 Wages, tips, other comp. 82340.24	2 Federal income tax withheld 12266.44
3 Social security wages 82340.24	4 Social security tax withheld 5105.09	3 Social security wages 82340.24	4 Social security tax withheld 5105.09	3 Social security wages 82340.24	4 Social security tax withheld 5105.09
5 Medicare wages and tips 82340.24	6 Medicare tax withheld 1193.93	5 Medicare wages and tips 82340.24	6 Medicare tax withheld 1193.93	5 Medicare wages and tips 82340.24	6 Medicare tax withheld 1193.93
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
351475 CLI2/TLS 000	A 7804	351475 CLI2/TLS 000	A 7804	351475 CLI2/TLS 000	A 7804
c Employer's name, address, a	and ZIP code	c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	nd ZIP code
TATA CONSUL SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET	TATA CONSULT SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET	TATA CONSUL SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET
b Employer's FED ID number	a Employee's SSA number	b Employer's FED ID number	a Employee's SSA number	b Employer's FED ID number	a Employee's SSA number
<b>98-0429806</b> 7 Social security tips	XXX-XX-0667 8 Allocated tips	98-0429806           7         Social security tips	XXX-XX-0667 8 Allocated tips	98-0429806 7 Social security tips	XXX-XX-0667 8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 DD 3056.14	11 Nonqualified plans	DD 3056.14	11 Nonqualified plans	DD 3056.14
14 Other 300.00 TFB 150.03 SUI 134.61 FLI 117.80 NJVPDI DI PP#	12b         1           12c         1           12d         1           13 Stat emp         Ret. plan         3rd party sick pay	14 Other 300.00 TFB 150.03 UI/WF/SWF 134.61 FLI 117.80 NJ/VPDI DIPP#	12b         1           12c         1           12d         1           13 Stat emp         Ret. plan         3rd party sick pay	14 Other 300.00 TFB 150.03 U/WF/SWF 134.61 FLI 117.80 NJVPDI D IPP#	12b                     12c                     12d                     13 Stat emp Ret. plan 3rd party sick party
e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	nd ZIP code
SRINITHI SOUNDARA 11 PALISADES RD OLD BRIDGE NJ 088	RAJAN	SRINITHI SOUNDARA 11 PALISADES RD OLD BRIDGE NJ 088	RAJAN	SRINITHI SOUNDARA 11 PALISADES RD OLD BRIDGE NJ 088	RAJAN
15 State Employer's state ID no TOTAL STATE	. 16 State wages, tips, etc.	15 State Employer's state ID no NJ 980429806/000	.16 State wages, tips, etc. 84140.24	15 State Employer's state ID no NJ 980429806/000	. 16 State wages, tips, etc. 84140.24
17 State income tax 3771.78	18 Local wages, tips, etc. 3391.67	17 State income tax 3745.70	18 Local wages, tips, etc.	17 State income tax 3745.70	18 Local wages, tips, etc.
<sup>19</sup> Local income tax <b>122.26</b>	20 Locality name NYC RES	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fil	ling Copy	NJ.State Re	ference Copy	NJ.State Fili	ng Copy
W-2 Wage a Stateme Copy B to be filed with employee's File	nd Tax <b>2020</b> ent OMB No. 1545-0008 ederal Income Tax Return.	W-2 Wage an Statement Copy 2 to be filed with employee's State	<b>ZUZU</b> OMB No. 1545-0008	W-2 Wage and Statemer	

PAGE 2

		Employee	e Refe	ere	nce	Сор	у	
	N-	<b>.</b>	Vage ar	١d	Tax	20	าว	n
		_	Stateme	nt		OMB		545-0008
Co d		employee's reco rol number	Dept.		Corp.	Empl		use only
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с	Fmn	lover's name,	address, a	nd	ZIP co	de		
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		-		-				
b	Empl	oyer's FED ID		а		yee's S		
1	Mog	98-04298 es, tips, other		2		XXX-X al incom		
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3	Socia	al security wa	qes	4	Social	security	tax v	vithheld
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5	Medi	care wages ar	nd tips	6	Medic	are tax w	vithhe	ld
7	Seein	al security tips		0	Alloop	ted tips		
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9				10	Depen	dent car	e ben	efits
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11	Nonq	ualified plans		128	a See ins	tructions	or dox	12
14	Othe	r		12				
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15	State	TOTAL S		16	State	vayes, ti	ps, et	<b>U.</b>
17	State	income tax		18	Local	wages, t	ps, et	c.
Ľ								
19	Loca	I income tax		20	Locali	ty name	RFS	

## 2020 W-2 and EARNINGS SUMMARY



ADDITIONAL W-2 FOR BOX 12 OR BOX 14 OVERFLOW

# SRINITHI SOUNDARARAJAN 11 PALISADES RD OLD BRIDGE NJ 08857

¤© 2020 ADP, Inc.

1 Wages, tips, other comp.	2 Federal income tax withheld	1 Wages, tips, other comp.	2 Federal income tax withheld	1 Wages, tips, other comp.	2 Federal income tax withheld
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
351475 CLI2/TLS 000	A 7805	351475 CLI2/TLS 000	A 7805	351475 CLI2/TLS 000 c Employer's name, address, a	A 7805
c Employer's name, address, a		c Employer's name, address, a			
TATA CONSULT SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET	TATA CONSUL SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET	TATA CONSUL SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET
b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-0667	b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-0667	b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-0667
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	<b>12</b> a	11 Nonqualified plans	12a
14 Other	12b	14 Other	12b	14 Other	12b
300.00 TFB	12c	300.00 TFB	12c	300.00 TFB	12c
	12d		12d		12d
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick p
e/f Employee's name, address ar	d ZIP code	e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	nd ZIP code
SRINITHI SOUNDARA	RAJAN	SRINITHI SOUNDARA	RAJAN	SRINITHI SOUNDARA	RAJAN
11 PALISADES RD	57	11 PALISADES RD OLD BRIDGE NJ 088	57	11 PALISADES RD OLD BRIDGE NJ 088	57
OLD BRIDGE NJ VOO	007	OLD BRIDGE NJ 000	557	OLD BRIDGE NJ VOO	57
15 State Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.	15 State Employer's state ID no NJ 980429806/000	.16 State wages, tips, etc.	15 State Employer's state ID no NJ 980429806/000	.16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name NYC RES	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fil	ing Copy		ference Copy	NJ.State Fili	ng Copy
W-2 Wage an Stateme Copy B to be filed with employee's Fe	nd Tax 2020 nt OMB No. 1545-0008	W-2 Copy 2 to be filed with employee's State		W-2 Wage and Statemer	

PAGE 3

NY.State Re	eference Copy
W-2 Wage a Statement	
Statement	CMB No. 1545-0008
Copy 2 to be filed with employee's Stat	e Income Tax Return.
d Control number Dept.	Corp. Employer use only A 7806
351475 CLI2/TLS 000	
c Employer's name, address, a	
TATA CONSUL	
SERVICES LIMI	
379 THORNALL	
EDISON NJ 088	337
	Batch #02445
	Batch #02445
e/f Employee's name, address, a	and ZIP code
SRINITHI SOUNDARA	RAJAN
11 PALISADES RD	
OLD BRIDGE NJ 08	357
	551
b Employer's FED ID number	a Employee's SSA number
98-0429806	XXX-XX-0667
1 Wages, tips, other comp.	2 Federal income tax withheld
82340.24	12266.44
3 Social security wages	4 Social security tax withheld
82340.24	5105.09
5 Medicare wages and tips 82340.24	6 Medicare tax withheld 1193.93
7 Social security tips	8 Allocated tips
	- · ··································
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
14 Other	12b
300.00 TFB	12c
300.00 TFB	12d   13 Stat emp Ret. plan 3rd party sick party
15 State Employer's state ID no	
NY 98-0429806	82340.24
17 State income tax	18 Local wages, tips, etc.
26.08	
19 Local income tax	20 Locality name

### 2020 W-2 and EARNINGS SUMMARY

NY. State Wages, NYC RES

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

3,466.67

75.00

3,391.67

Tips, Etc. Box 16 of W-2

3,466.67

75.00

3,391.67



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.

Gross Pay	
Less Other Cafe 125	
Reported W-2 Wages	

2. Employee Name and Address.

### SRINITHI SOUNDARARAJAN 11 PALISADES RD OLD BRIDGE NJ 08857

\* New York requires total Federal wages to be reported in Box 16 © 2020 ADP, Inc. and applicable Fed wages in Box 18.

1 Wages, tips, other comp. 82340.24	2 Federal income tax withheld 12266.44	1 Wages, tips, other comp. 82340.24	2 Federal income tax withheld 12266.44	1 Wages, tips, other comp. 82340.24	2 Federal income tax withheld 12266.44
3 Social security wages 82340.24	4 Social security tax withheld 5105.09	3 Social security wages 82340.24	4 Social security tax withheld 5105.09	<sup>3</sup> Social security wages 82340.24	4 Social security tax withheld 5105.09
5 Medicare wages and tips 82340.24	6 Medicare tax withheld 1193.93	5 Medicare wages and tips 82340.24	6 Medicare tax withheld 1193.93	5 Medicare wages and tips 82340.24	6 Medicare tax withheld 1193.93
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
351475 CLI2/TLS 000	A 7806	351475 CLI2/TLS 000	A 7806	351475 CLI2/TLS 000	A 7806
c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	nd ZIP code
TATA CONSULT SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET	TATA CONSULT SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET	TATA CONSULT SERVICES LIMI 379 THORNALL EDISON NJ 088	TED STREET
b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-0667	b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-0667	b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-0667
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	<b>12</b> a	11 Nonqualified plans	12a
14 Other	12b	14 Other	12b	14 Other	12b
300.00 TFB	12c	300.00 TFB 14.74 UI/WF/SWF	12c	300.00 TFB 14.74 UI/WF/SWF	12c
300.00 TFB	12d	5.54 FLI	12d	5.54 FLI	12d
	13 Stat emp.Ret. plan 3rd party sick pay	4.85 VPDI	13 Stat emp. Ret. plan 3rd party sick pay	4.85 VPDI	13 Stat emp. Ret. plan 3rd party sick pa
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e/f Employee's name, address ar		e/f Employee's name, address a		e/f Employee's name, address a	
SRINITHI SOUNDARA	RAJAN	SRINITHI SOUNDARA	RAJAN	SRINITHI SOUNDARA	RAJAN
11 PALISADES RD		11 PALISADES RD		11 PALISADES RD	
OLD BRIDGE NJ 088	357	OLD BRIDGE NJ 088	57	OLD BRIDGE NJ 088	57
15 State Employer's state ID no NY 98-0429806	. 16 State wages, tips, etc. 82340.24	15 State Employer's state ID no	.16 State wages, tips, etc.	15 State Employer's state ID no	. 16 State wages, tips, etc.
17 State income tax 26.08	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc. 3391.67	17 State income tax	18 Local wages, tips, etc. 3391.67
19 Local income tax	20 Locality name	19 Local income tax 122.26	20 Locality name NYC RES	19 Local income tax 122.26	20 Locality name NYC RES
NY.State Fili	ng Copy		Reference Copy		Filing Copy
	nd Tax <b>2020</b> ent 00MB No 1545,0008	W-2 Wage and Statemer Copy 2 to be filed with employee's City of	nd Tax 2020		nd Tax 2020

### 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 amounts.

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 thris 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, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you acopy.

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.

 ${\bf A-}$  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.  ${\bf B-}$  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

 ${\rm G-Elective}$  deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

 ${\rm H-Elective}$  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.

 $\label{eq:L-Substantiated employee business expense reimbursements (nontaxable)$ 

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

2-income under a hondpaline deterred compensation plan that has 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.

**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 filing 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):

TAX	RETURN
THIS FORM W-2	OTHER W-2'S

### 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 Tax.