

				Federal Box 1	Soc. Sec. Box 3 & 7	Medicare Box 5	
To the right is an explanation of the contents of the wage boxes on your W-2. Please note that the Gross amount shown may include adjustments.				Gross Wages	91817.39	91817.39	91817.39
				Txbl Benefits			
				Group Term Life	40.50	40.50	40.50
				Adoption			
				Deferred Comp			
				Section 125	(1565.94)	(1565.94)	(1565.94)
				Other Pretax/Wage Limit			
				W-2 Wages	90291.95	90291.95	90291.95
D. CONTROL NUMBER 000245809801	This Information is being furnished to the Internal Revenue Service	2021	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION	90291.95	2. FEDERAL INCOME TAX WITHHELD	15367.81
B. EMPLOYER IDENTIFICATION NUMBER 04-2437166	A. EMPLOYEE'S SOCIAL SECURITY NUMBER XXX-XX-3152			3. SOCIAL SECURITY WAGES	90291.95	4. SOCIAL SECURITY TAX WITHHELD	5598.10
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE NTT DATA, Inc 7950 Legacy Dr Suite 900 Plano TX 75024				5. MEDICARE WAGES AND TIPS	90291.95	6. MEDICARE TAX WITHHELD	1309.24
				7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS	
				9.		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL Mastan V		LAST NAME Shaik	SUFF.	11. NONQUALIFIED PLANS		12.a-d C	40.50
				14. OTHER		W	1007.00
						DD	4068.58
USA EMPLOYEE'S ADDRESS AND ZIP CODE				13. STATUTORY EMPLOYEE <input type="checkbox"/> RETIREMENT PLAN <input type="checkbox"/> THIRD PARTY SICK PAY <input type="checkbox"/>			
15. STATE NC	EMPLOYER'S STATE I.D. NO. 101028224	16. STATE WAGES, TIPS, ETC. 90291.95	17. STATE INCOME TAX 4302.00	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

D. CONTROL NUMBER 000245809801	This Information is being furnished to the Internal Revenue Service	2021	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION	90291.95	2. FEDERAL INCOME TAX WITHHELD	15367.81
B. EMPLOYER IDENTIFICATION NUMBER 04-2437166	A. EMPLOYEE'S SOCIAL SECURITY NUMBER XXX-XX-3152			3. SOCIAL SECURITY WAGES	90291.95	4. SOCIAL SECURITY TAX WITHHELD	5598.10
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE NTT DATA, Inc 7950 Legacy Dr Suite 900 Plano TX 75024				5. MEDICARE WAGES AND TIPS	90291.95	6. MEDICARE TAX WITHHELD	1309.24
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E. EMPLOYEE'S FIRST NAME AND INITIAL Mastan V		LAST NAME Shaik	SUFF.	11. NONQUALIFIED PLANS		12.a-d C	40.50
				14. OTHER		W	1007.00
						DD	4068.58
USA EMPLOYEE'S ADDRESS AND ZIP CODE				13. STATUTORY EMPLOYEE <input type="checkbox"/> RETIREMENT PLAN <input type="checkbox"/> THIRD PARTY SICK PAY <input type="checkbox"/>			
15. STATE NC	EMPLOYER'S STATE I.D. NO. 101028224	16. STATE WAGES, TIPS, ETC. 90291.95	17. STATE INCOME TAX 4302.00	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return 2021 Dept. of the Treasury - Internal Revenue Service

FORM **W-2 Wage and Tax Statement**

D. CONTROL NUMBER 000245809801	This Information is being furnished to the Internal Revenue Service	2021	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION	90291.95	2. FEDERAL INCOME TAX WITHHELD	15367.81
B. EMPLOYER IDENTIFICATION NUMBER 04-2437166	A. EMPLOYEE'S SOCIAL SECURITY NUMBER XXX-XX-3152			3. SOCIAL SECURITY WAGES	90291.95	4. SOCIAL SECURITY TAX WITHHELD	5598.10
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE NTT DATA, Inc 7950 Legacy Dr Suite 900 Plano TX 75024				5. MEDICARE WAGES AND TIPS	90291.95	6. MEDICARE TAX WITHHELD	1309.24
				7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS	
				9.		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL Mastan V		LAST NAME Shaik	SUFF.	11. NONQUALIFIED PLANS		12.a-d C	40.50
				14. OTHER		W	1007.00
						DD	4068.58
USA EMPLOYEE'S ADDRESS AND ZIP CODE				13. STATUTORY EMPLOYEE <input type="checkbox"/> RETIREMENT PLAN <input type="checkbox"/> THIRD PARTY SICK PAY <input type="checkbox"/>			
15. STATE NC	EMPLOYER'S STATE I.D. NO. 101028224	16. STATE WAGES, TIPS, ETC. 90291.95	17. STATE INCOME TAX 4302.00	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

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FORM **W-2 Wage and Tax Statement**

D. CONTROL NUMBER 000245809801	This Information is being furnished to the Internal Revenue Service	2021	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION	90291.95	2. FEDERAL INCOME TAX WITHHELD	15367.81
B. EMPLOYER IDENTIFICATION NUMBER 04-2437166	A. EMPLOYEE'S SOCIAL SECURITY NUMBER XXX-XX-3152			3. SOCIAL SECURITY WAGES	90291.95	4. SOCIAL SECURITY TAX WITHHELD	5598.10
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FORM **W-2 Wage and Tax Statement**