

1 Wages, tips, other compensation 56614.28		2 Federal Income tax withheld 8167.51	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number 652-13-9519		Employer use only	
b Employer's FED ID number 06-1454513		d Control number 00636472	
c Employer's name, address, and ZIP code Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 4261.05	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. Shourya Madishetty 1319 W Javelina Dr Chandler AZ 85286			
f Employee's address and ZIP code			
15 State AZ	Employer's state ID 061454513	18 Local wages, tips, etc.	
16 State wages, tips, etc. 56614.28		19 Local income tax	
17 State income tax 1019.03		20 Locality name	
Form W-2 Wage and Tax Statement 2021 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy C for Employee's records			

1 Wages, tips, other compensation 56614.28		2 Federal Income tax withheld 8167.51	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number 652-13-9519		Employer use only	
b Employer's FED ID number 06-1454513		d Control number 00636472	
c Employer's name, address, and ZIP code Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 4261.05	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. Shourya Madishetty 1319 W Javelina Dr Chandler AZ 85286			
f Employee's address and ZIP code			
15 State AZ	Employer's state ID 061454513	18 Local wages, tips, etc.	
16 State wages, tips, etc. 56614.28		19 Local income tax	
17 State income tax 1019.03		20 Locality name	
Form W-2 Wage and Tax Statement 2021 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation 56614.28		2 Federal Income tax withheld 8167.51	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number 652-13-9519		Employer use only	
b Employer's FED ID number 06-1454513		d Control number 00636472	
c Employer's name, address, and ZIP code Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 4261.05	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. Shourya Madishetty 1319 W Javelina Dr Chandler AZ 85286			
f Employee's address and ZIP code			
15 State AZ	Employer's state ID 061454513	18 Local wages, tips, etc.	
16 State wages, tips, etc. 56614.28		19 Local income tax	
17 State income tax 1019.03		20 Locality name	
Form W-2 Wage and Tax Statement 2021 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation 56614.28		2 Federal Income tax withheld 8167.51	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number 652-13-9519		Employer use only	
b Employer's FED ID number 06-1454513		d Control number 00636472	
c Employer's name, address, and ZIP code Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 4261.05	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. Shourya Madishetty 1319 W Javelina Dr Chandler AZ 85286			
f Employee's address and ZIP code			
15 State AZ	Employer's state ID 061454513	18 Local wages, tips, etc.	
16 State wages, tips, etc. 56614.28		19 Local income tax	
17 State income tax 1019.03		20 Locality name	
Form W-2 Wage and Tax Statement 2021 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			