## 2021 W-2 and EARNINGS SUMMARY

Copy C for employee's red	Stateme	ent	OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only			
0000078093 WZG		YAH7	1631			
c Employer's name, ERNST & YO 200 PLAZA D SECAUCUS,	UNG US	S LLP TE 4444	ļ			
e/f Employee's name, BHAVISHYA 1 3600 WINDHA 3318 LEWISVILLE,	YAGI VEN PK TX 75	(WY 056				
b Employer's FED ID 34-65655		a Emplo	yee's SSA number XXX-XX-0322			
1 Wages, tips, other		2 Federa	I income tax withheld			
268	98.74		5457.79			
3 Social security was	jes	4 Social	security tax withheld			
5 Medicare wages ar	ıd tips	6 Medicare tax withheld				
7 Social security tips	i	8 Alloca	ted tips			
9		10 Depen	dent care benefits			
11 Nonqualified plans			tructions for box 12			
14 Other		12b   12c   12d   13 Stat em	p. Ret. plan 3rd party sick pa			
15 State Employer's	state ID no	16 State v	vages, tips, etc.			
17 State income tax		18 Local	wages, tips, etc.			
19 Local income tax		20 Locali	ty name			
1 Wages, tips, other 268	comp. 98.74	2 Federa	I income tax withheld 5457.79			

Reference

Wage and Tax

Сору

2021

Employee

3 Social security wages

**BHAVISHYA TYAGI** 3600 WINDHAVEN PKWY 3318 LEWISVILLE, TX 75056

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Wages, tips, other comp. 26898.74

Social security wages

## **PAGE 01 OF 01**

5 Medicare wages and tips 6 M		6 Medic	Medicare tax withheld		5 Medicare wages and tips		6 Medicare tax withheld	
d Control nu 0000078093 W		Corp.	Employer use only 1631	d 00	Control number 00078093 WZG	Dept.	Corp.	Employer use only 163
ERNST 200 PLA	s name, address, & YOUNG US AZA DRIVE S CUS, NJ 070	S LLP TE 4444	<b>.</b>	С	Employer's name, a ERNST & YOU 200 PLAZA DI SECAUCUS, N	JNG US	LLP	<b>.</b>
	Employer's FED ID number a Employee's SSA number 34-6565596 XXX-XX-0322		b	b Employer's FED ID number 34-6565596			a Employee's SSA number XXX-XX-0322	
7 Social sec	urity tips	8 Allocated tips		7	7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits		9			10 Dependent care benefits	
11 Nonqualifie	ed plans	12a See instructions for box 12		11	11 Nonqualified plans		12a	
14 Other		12b		14	Other		12b	
		12c					12c	
		12d					12d	
		13 Stat emp	Ret. plan 3rd party sick pay				13 Stat emp	Ret. plan 3rd party sick p
BHAVISI 3600 WI 3318 LEWISV	s name, address a HYA TYAGI NDHAVEN PI ILLE, TX 75	(WY 6056		e/f	Employee's name, BHAVISHYA T 3600 WINDHA' 3318 LEWISVILLE,	YAGI VEN PK		e
15 State Emp	oloyer's state ID no	16 <b>State</b> v	wages, tips, etc.	15	State Employer's s	tate ID no	. 16 <b>State</b> v	wages, tips, etc.
17 State income tax 18 Local wages		wages, tips, etc.	17	State income tax		18 Local wages, tips, etc.		
19 Local income tax		20 Locality name		19 Local income tax		20 Locality name		
Fe	deral Filing	Сору			. State	Filing	Сору	
W-2 Copy B to be file	Wage a Statemo d with employee's Fed		QMB No. 1545-0008	C	N-2 copy 2 to be filed with em	Statem		OMB No. 1545-0008

Social security tax withheld

	2 Federa	l income tax withheld 5457.79	1 Wages, tips, other comp. 26898.74			2 Federal income tax withheld 5457.79			
	4 Social	security tax withheld	3	Social security wag	es	4 Social security tax withheld			
	6 Medica	are tax withheld	5 Medicare wages and tips			6 Medicare tax withheld			
	Corp. YAH7	Employer use only 1631	d 00	d Control number Dept. 0000078093 WZG		Corp. Employer use only YAH7 16			
ar	nd ZIP cod	е	С	Employer's name, a	ddress, a	nd ZIP cod	le		
37	LLP E 4444 94-3699			ERNST & YOU! 200 PLAZA DR SECAUCUS, N	IVE ST	E 4444			
	a Employ	yee's SSA number XXX-XX-0322	b Employer's FED ID number 34-6565596			a Employee's SSA number XXX-XX-0322			
	8 Alloca	Allocated tips 7 Social security tips				8 Allocated tips			
10 Dependent care benefits				9		10 Dependent care benefits			
12a			11	Nonqualified plans		12a			
			Other		12b				
	12c				12c				
	12d					12d			
	13 Stat emp	Ret. plan 3rd party sick pay					p. Ret. plan 3rd party sick pay		
ar	d ZIP cod	е	e/	f Employee's name, a	iddress ar	nd ZIP cod	е		
KWY 5056			BHAVISHYA TYAGI 3600 WINDHAVEN PKWY 3318 LEWISVILLE, TX 75056						
ο.	16 State v	vages, tips, etc.	15 State Employer's state ID no. 16 State wages, tips, etc.						
	18 Local	wages, tips, etc.	17	17 State income tax		18 Local wages, tips, etc.			
	20 Locali	ty name	19	Local income tax		20 Locality name			
9	Сору			City or	Local	Filing	Сору		
а	nd Ta	× 2021	V	<b>N</b> ₋2 <sup>₩</sup>	age a	nd Tax	2021		

Statement

Social Security Number: XXX-XX-0322