FORM W-2 Wage and Ta	X Statement	ony 2) This		ne Treasury • Internal Revenue Service.  ed to the Internal Revenue Service.  negligence penalty or other sanction  taxable and you fail to report it.	
These substitute W-2 Wage	and Tay Statements are accepted	impo	ur Federal State and Loc	al Income Tay Returns	n may b
If you worked in multiple local	tions, or had several forms of speci	ial compensation, y	ou may receive more mar	r one of these documents.	Trage
The white copies of the W-2 forms are for y	our Gross Wages	Box 1 120164.46	Box 3 and 7	Box 5 64.46	
tax returns; the blue copy is for your record General instructions, including an explanat of the letter codes in box 12, are on the oth	S. Txbl Benefits ion Group Term Life	72.00	72.00	72.00	
side of the page.	Adoption Deferred Comp	(6389.58)			
To the right is an explanation of your W-2 wages. Please note that the Gross amount	Section 125 Other Pretax/Wage Limit	(934.19)	(934.19) (9.	34.19)	
may include adjustments. W-2 Wages		112912.69	119302.27 1193	02.27	
D. CONTROL NUMBER This information is being furnished to the	° 2021 OMB NO. 1545 - 0	1. WAGES, TIPS, OTHE		2. FEDERAL INCOME TAX WITHHELD	
000245904501 Internal Revenue Service  B. EMPLOYER IDENTIFICATION NUMBER	A EMPLOYEE'S SOCIAL SECURITY NUMBER	3, SOCIAL SECURITY V		4. SOCIAL SECURITY TAX WITHHELD	729.85
04-2437166 C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE	XXX-XX-6893	5. MEDICARE VAGES A		6. MEDICARE TAX WITHHELD	396.52
NTT DATA, Inc 7950 Legacy Dr	13 Statutory Retirement Third-P	7. SOCIAL SECURITY TO	119302.27	8. ALLOCATED TIPS	729.83
Suite 900 Plano TX 75024	13. Statutory Retirement Third-P Sick P	9.		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME TATUN KOIII		UFF. 11. NONQUALIFIED PLA	NS	12. s-d C	72.00
Tarun Kolli 3939 Bidwell Drive Apt 463		14. OTHER	1434.79	D 63	389.58 280.00
Fremont CA 94538 USA		CA SDI	1434.75		376.06
F. EMPLOYEE'S ADDRESS AND ZIP CODE           15. STATE         EMPLOYER'S STATE I.D. NO.         16. STATE	WAGES, TIPS, ETC. 17. STATE INCOME TO		MAGES, TIPS, ETC. 19. LOCAL IN	COME TAX 20. LOCALITY NAME	
CA 325-4786-1	113247.69	5335.39		EAD ALONO SERVICE	
D. CONTROL NUMBER  O00245904501  This information is being furnished to Internal Revenue Service	omb NO. 1545 - 0008	1. WAGES, TIPS, OTHER, O	COMPENSATION 112912.69	FAR PEDERAL INCOME TAX WITHHELBN 137	29.85
B. EMPLOYER IDENTIFICATION NUMBER A.	EMPLOYEE'S SOCIAL SECURITY NUMBER	3. SOCIAL SECURITY WAS		4. SOCIAL SECURITY TAX WITHHELD 73	96.52
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE NTT DATA, Inc		5. MEDICARE WAGES AND		6. MEDICARE TAX WITHHELD	29.83
7950 Legacy Dr Suite 900		7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS	
Plano TX 75024		9.		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME TATUN KOIli	SUF	F. 11. NONQUALIFIED PLANS			72.00
3939 Bidwell Drive Apt 463	14. OTHER CA SDI	1434.79		89.58 80.00	
Fremont CA 94538 USA				13 Statutory Retirement V Third-	76.06
F. EMPLOYEE'S ADDRESS AND ZIP CODE           15. STATE         EMPLOYER'S STATE LD. NO.         16. STATE	E WAGES, TIPS, ETC. 17. STATE INCOME TO		MAGES, TIPS, ETC. 19. LOCAL IN		Pay
CA 325-4786-1  Copy 2 To be filed with Employee's STATE, CITY or L		5335.39		Dept. of the Treasury - Internal Reven	ue Service
FORM W-2 Wage and Tax Statem		<b>7.</b> Γ			
		1. WAGES, TIPS, OTHER, O		EAR ALONG PERFORATION  2. FEDERAL INCOME TAX WITHHELD	
D. CONTROL NUMBER This information is being furnished to Internal Revenue Service	OMB NO. 1545 - 0008		112912.69		29.85
04-2437166 X	EMPLOYEE'S SOCIAL SECURITY NUMBER  XX-XX-6893	SOCIAL SECURITY WAS     MEDICARE WAGES AND	119302.27		96.52
C EMPLOYERS NAME ADDRESS, AND ZIP CODE NTT DATA, Inc 7950 Legacy Dr Suite 900 Plano TX 75024		7. SOCIAL SECURITY TIPS	119302.27		29.83
		7. SOCIAL SECURITY TIPS		10. DEPENDENT CARE BENEFITS	
		•		12. a-d	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME  Tarun Kolli	SUF			С	72.00 89.58
3939 Bidwell Drive Apt 463 Fremont CA 94538		CA SDI	1434.79	W 2	80.00 76.06
USA				13. Statutory Retirement X Third Sick is	
	WAGES, TIPS, ETC. 17. STATE INCOME TA	18. LOCAL 1	MAGES, TIPS, ETC. 19. LOCAL IN		
copy 2 To be filed with Employee's STATE, CITY or LC	OCAL tax return			Dept. of the Treasury - Internal Reven	ue Service
ORM W-2 Wage and Tax Stateme	ent 201		FOLD AND T	EAR ALONG PERFORATION	
D. CONTROL NUMBER This information is being furnished to to the second Sec	omb NO. 1545 - 0008	1, WAGES, TIPS, OTHER, O	112912.69	2. FEDERAL INCOME TAX WITHHELD	29.85
	EMPLOYEE'S SOCIAL SECURITY NUMBER	3. SOCIAL SECURITY WAS		4. SOCIAL SECURITY TAX WITHHELD	396.52
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE	XX-XX-6893	5. MEDICARE WAGES AND		6. MEDICARE TAX WITHHELD	29.83
NTT DATA, Inc 7950 Legacy Dr		7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS	
Suite 900 Plano TX 75024		9.		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME	SUFI	F. 11. NONQUALIFIED PLANS		12 a-d	70.00
Tarun Kolli 3939 Bidwell Drive	14. OTHER		D 63	72.00	
Apt 463 Fremont CA 94538	CA SDI	1434.79	DD 38	280.00 376.06	
USA F, EMPLOYEE'S ADDRESS AND ZIP CODE					Pay
	WAGES, TIPS, ETC. 17. STATE INCOME TA	5335.39 18. LOCAL	WAGES, TIPS, ETC. 19. LOCAL II		
opy B To be filed with Employee's FEDERAL tax ref	- 2N2	1		Dept. of the Treasury - Internal Reven	ue Servic
ORM W-2 Wage and Tax Stateme	ent — — —		FOLD AND T	EAR ALONG PERFORATION	
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	W-2 AND WA	GE SUN	MARY		