## 2021 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement

Copy C for employee's records. d Control number Employer use only 207431 CLI2/S6S ID1

Employer's name, address, and ZIP code IBM INDIA PRIVATE LIMITED 3039 CORNWALLIS RD RESEARCH TRIANGLE PK NC 27709-21

Batch #02593

e/f Employee's name, address, and ZIP code SANJIVAN CHIMANGAONKAR

2401 S APPLE ST L 105

-	103								
В	OISE	ID	837	07					
b	Emplo	yer's F	ED IC	number		а	Emplo	οує	ee's SSA number
		52-2	20614	430				Х	XX-XX-5202
1	Wages	, tips,	other	comp.		2	Feder	al	income tax withheld
			30	897.52	2				1496.51
3	Social	securi	ity wa	ges		4	Socia	l s	security tax withheld
			30	897.52	2				1915.65
5	Medica	are wa	ges a	nd tips		6	Medic	are	e tax withheld
			30	897.52	2				448.01
7	Social	securi	ty tip	s		8	Alloca	ite	d tips
9					1	10	Depen	de	nt care benefits
11	Nonqu	alified	plans	;		12a	See in	str	uctions for box 12
					L		С	느	4.41
14	Other				- ⊢	12b		_	1600.00
l · ·	• • • • • • • • • • • • • • • • • • • •				- ⊢	12c		_	5784.00
						12d		Ц	
						13	Stat en	np.	Ret. plan 3rd party sick pay
15	State	Emplo	yer's	state ID	no.	16	State	wa	ages, tips, etc.
]	ID	0032	4824	5					30897.52
17	State	income	tax			18 Local wages, tips, etc.			
				744.00	)	30893.11			

1	Wages, tips, other c	omp. 97.52	2 Federa	I income tax	withheld	
3	Social security wage 308	4 Social security tax withheld 1915.65				
5	Medicare wages and 308	6 Medica	re tax withh	eld 448.01		
d	d Control number Dept.		Corp.	Employer	use only	
20	7431 CLI2/S6S		T	284		
С	c Employer's name, address, and ZIP code					

20 Locality name

150902

IBM INDIA PRIVATE

LIMITED

19 Local income tax

3039 CORNWALLIS RD

RESEARCH TRIANGLE PK NC 27709-21

	- 004
Employer's FED ID number	a Employee's SSA number
52-2061430	XXX-XX-5202
Social security tips	8 Allocated tips
	10 Dependent care benefits
Nonqualified plans	12a See instructions for box 12 C   4.41
Other	<sup>12b</sup> W   1600.00
	12c DD   5784.00
	12d
	13 Stat emp Ret. plan 3rd party sick pa
	52-2061430 Social security tips  Nonqualified plans

e/f Employee's name, address and ZIP code

SANJIVAN CHIMANGAONKAR 2401 S APPLE ST L 105

**BOISE ID 83707** 

15 State Employer's state ID no. 16 State wages, tips, etc. ID 003248245 30897.52 17 State income tax 18 Local wages, tips, etc.

30893.11 19 Local income tax 20 Locality name 150902

Federal Filing Сору Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

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	ID. State Wages, Tips, Etc. Box 16 of W-2	150902 TREDY Local Wages, Tips, Etc. Box 18 of W-2
Gross Pay	32,432.07	32,432.07	32,432.07	32,432.07	32,432.0
Plus GTL (C-Box 12)	4.41	4.41	4.41	4.41	N/A
Less Other Cafe 125	1,538.96	1,538.96	1,538.96	1,538.96	1,538.96
Reported W-2 Wages	30,897.52	30,897.52	30,897.52	30,897.52	30,893.13

2. Employee Name and Address.

## SANJIVAN CHIMANGAONKAR 2401 S APPLE ST L 105 **BOISE ID 83707**

\* PA local wages and withholding are reported to employee work © 2021 ADP, Inc. location PSD unless it is ouside of PA (Per Act 32)

1 Wages, tips, other c	2 Federal income tax withheld					
308	97.52	1496.51				
3 Social security wage 308	4 Social security tax withheld 1915.65					
5 Medicare wages and 308	6 Medica	re tax withh	eld 448.01			
d Control number	d Control number Dept.		Employer	use only		
207431 CLI2/S6S		T	284			
c Employer's name, address, and ZIP code						
c Employers name, a	uui ess, ai	iu Zir cou	C			

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3039 CORNWALLIS RD

RESEARCH TRIANGLE PK NC 27709-21

b	Employer's FED ID number 52-2061430	a Employee's SSA number
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a C   4.41
14	Other	<sup>12b</sup> W   1600.00
		12c DD   5784.00
		12d
		13 Stat emp Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code

SANJIVAN CHIMANGAONKAR 2401 S APPLE ST L 105

**BOISE ID 83707** 

15 State	Employer's	state	ID no.	16	State	wages,	tips, etc.	
ID	00324824	<b>!</b> 5					30897.52	2
17 State	income tax			18	Local	wages,	tips, etc.	
		744	.00				30893.11	L
19 Local	income tax			20	Local	ity nam	е	
						1509	02	
			_		$\overline{}$			

ID.State Filing Copy Wage and Tax Statement

Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other of	2	Federal	income tax	withheld	
	308			1	496.51	
3	Social security wage	4	Social	security tax 1	withheld 915.65	
5	Medicare wages and 308	6	Medica	re tax withh	eld 448.01	
d	Control number	Dept.		Corp.	Employer	use only
20	7431 CLI2/S6S	ID1			T	284
_	Employer's name a	-		710		

c Employer's name, address, and ZIP code

IBM INDIA PRIVATE LIMITED

3039 CORNWALLIS RD RESEARCH TRIANGLE PK NC 27709-21

Employer's FED ID number a Employee's SSA number 52-2061430 Social security tips XXX-XX-5202 Allocated tips 10 Dependent care benefits 11 Nongualified plans 12b W | 14 Other 1600.00 12c DD | 5784.00 12d

13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code

SANJIVAN CHIMANGAONKAR 2401 S APPLE ST L 105 **BOISE ID 83707** 

15		Employer's state ID no.	16	State wages, tips, etc.
I	D	003248245		30897.52
17	State	income tax	18	Local wages, tips, etc.
		744.00		30893.11
19	Local	income tax	20	Locality name
			1	150902

or Local Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's City or Local Inco