Employee Ref W-2 Wage an Statem	nd Tax <b>2022</b>				
Copy C for employee's records. d Control number Dept. 0000086426 TWH	Corp. Employer use only UAN5 E S 14281				
c Employer's name, address, a NORTHEASTERN UNI 360 HUNTINGTON AV BOSTON, MA 02115	VERSITY				
e/f Employee's name, address, and ZIP code ANIRUDH PRADEEP NAIR 15C SMITH STREET BOSTON, MA 02120		The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement, plus any additional compensation or adjustments received after the payroll close.			
b Employer's FED ID number 04-1679980	a Employee's SSA number XXX-XX-1782 2 Federal income tax withheld		may not match your box For GTL, 401(k), cafet	x 1 totals due to adju teria plans, etc	istments
1 Wages, tips, other comp. 5408.25 3 Social security wages	975.25 4 Social security tax withheld	To change your employee W-4 profile information file a new W-4 with your payroll department.			
5 Medicare wages and tips	6 Medicare tax withheld				
7 Social security tips	8 Allocated tips				
9 11 Nonqualified plans	10 Dependent care benefits 12a See instructions for box 12				
14 Other	12b   12c   12d   12d   13 Stat emp.  Ret, plan  3rd party sick pay	ANIRUDH PRADEEF 15C SMITH STREET BOSTON, MA 0212(		Social Security I	Number: XXX-XX-1782
15 State Employer's state ID no MA WTH-10702102-006	5408.25				
17 State income tax 19 Local income tax	18 Local wages, tips, etc. 20 Locality name				
		♥ 2022 ADP, Inc.	PAGE 1 OF 1	I	
1 Wages, tips, other comp. 5408.25	2 Federal income tax withheld 975.25	1 Wages, tips, other comp. 5408.25	2 Federal income tax withheld 975.25	1 Wages, tips, other comp. 5408.25	2 Federal income tax withheld 975.25
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept. 0000086426 TWH	Corp. Employer use only UAN5 E S 14281	d Control number Dept. 0000086426 TWH	Corp.         Employer use only           UAN5         E         S         14281	d Control number Dept. 0000086426 TWH	Corp.         Employer use only           UAN5         E S 14281
c Employer's name, address, a NORTHEASTERN UNI 360 HUNTINGTON AV BOSTON, MA 02115	VERSITY	c Employer's name, address, a NORTHEASTERN UNI 360 HUNTINGTON AV BOSTON, MA 02115	VERSITY	c Employer's name, address, a NORTHEASTERN UN 360 HUNTINGTON AV BOSTON, MA 02115	IVERSITY
b Employer's FED ID number 04-1679980	a Employee's SSA number XXX-XX-1782	b Employer's FED ID number 04-1679980	a Employee's SSA number XXX-XX-1782	b Employer's FED ID number 04-1679980	a Employee's SSA number XXX-XX-1782
7 Social security tips	8 Allocated tips 10 Dependent care benefits	7 Social security tips	8 Allocated tips 10 Dependent care benefits	7 Social security tips	8 Allocated tips 10 Dependent care benefits
11 Nonqualified plans	-	11 Nonqualified plans	12a	11 Nonqualified plans	12a
	12a See instructions for box 12	11 Nonquainea plano	120		120
14 Other	12a See instructions for box 12 12b	14 Other	12b	14 Other	12b
14 Other	12b 12c 12d		12b 12c 12d	14 Other	12b 12c 12d
14 Other e/f Employee's name, address ANIRUDH PRADEEP 15C SMITH STREET BOSTON, MA 02120	12b 12c 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code		12b 12c 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code	e/f Employee's name, address	12b       12c       12d       13 Stat emp. Ret. plan
e/f Employee's name, address ANIRUDH PRADEEP 15C SMITH STREET	12b 12c 12d 13 Stat emplRet, plan 3rd party sick pay and ZIP code NAIR	14 Other e/f Employee's name, address ANIRUDH PRADEEP 15C SMITH STREET BOSTON, MA 02120	12b 12c 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code	e/f Employee's name, address ANIRUDH PRADEEP 15C SMITH STREET BOSTON, MA 02120	12b 12c 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code

MA. State Filing Copy Wage and Tax

Statement

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

or Local Filing Cop Wage and Tax

Statement

Copy 2 to be filed with employee's City or Local Income Tax Return.

City

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ederal Filing Wage and	2022			
Statem	ent	OMB No. 1545-0008		
with employee's Federal Income Tax Return.				

## 2022 W-2 and EARNINGS SUMMARY