

2023 W-2 and EARNINGS SUMMARY

| Employee Reference Copy | | | |
|---|---|----------------------------|-------------------|
| W-2 Wage and Tax Statement | | 2023 | |
| Copy C for employee's records. OMB No. 1545-0008 | | | |
| d Control number | Dept. | Corp. | Employer use only |
| 02400523 732 | | DCMG | G S 16623 |
| c Employer's name, address, and ZIP code | | | |
| TATA CONSULTANCY SERVICES LIMITED 379 THORNALL STREET 4TH FLOOR EDISON, NJ 08837 | | | |
| (CORRECTED STATEMENT) | | | |
| e/f Employee's name, address, and ZIP code | | | |
| SAI MARKA 12733 ROYAL OAKS LANE FARMERS BRANCH, TX 75234 | | | |
| b Employer's FED ID number | a Employee's SSA number | | |
| 98-0429806 | XXX-XX-9521 | | |
| 1 Wages, tips, other comp. | 2 Federal income tax withheld | | |
| 115679.58 | 18170.91 | | |
| 3 Social security wages | 4 Social security tax withheld | | |
| 115679.58 | 7172.13 | | |
| 5 Medicare wages and tips | 6 Medicare tax withheld | | |
| 115679.58 | 1677.35 | | |
| 7 Social security tips | 8 Allocated tips | | |
| | | | |
| 9 | 10 Dependent care benefits | | |
| | | | |
| 11 Nonqualified plans | 12a See instructions for box 12 | | |
| | C 24.45 | | |
| 14 Other | 12b DD 6387.61 | | |
| | 12c | | |
| | 12d | | |
| | 13 Stat emp. Ret. plan 3rd party sick pay | | |
| 15 State | Employer's state ID no. | 16 State wages, tips, etc. | |
| | | | |
| 17 State income tax | 18 Local wages, tips, etc. | | |
| | | | |
| 19 Local income tax | 20 Locality name | | |
| | | | |

This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that you may also find helpful. The following reflects your final pay stub, plus any adjustments made by your employer.

| | | | |
|--------------------------|------------|------------------------------|----------|
| GROSS PAY | 118,277.62 | SOCIAL SECURITY TAX WITHHELD | 7,172.13 |
| | | BOX 04 OF W-2 | |
| FED. INCOME TAX WITHHELD | 18,170.91 | MEDICARE TAX WITHHELD | 1,677.35 |
| BOX 02 OF W-2 | | BOX 06 OF W-2 | |
| STATE INCOME TAX | 0.00 | SUI/SDI | 0.00 |
| BOX 17 OF W-2 | | BOX 14 OF W-2 | |
| LOCAL INCOME TAX | 0.00 | | |
| BOX 19 OF W-2 | | | |

To change your employee W-4 profile information file a new W-4 with your payroll department

Social Security Number: XXX-XX-9521

SAI MARKA
12733 ROYAL OAKS LANE
FARMERS BRANCH, TX 75234

(CORRECTED STATEMENT)

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PAGE 1 OF 1

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| | | | |
| Federal Filing Copy | | | |
| W-2 Wage and Tax Statement | | 2023 | |
| Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008 | | | |

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| State Filing Copy | | | |
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