

2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy W-2 Wage and Tax Statement 2023

OMB No. 1545-0008

Copy C for employee's records.

d Control number 000005706 W9H	Dept.	Corp. BC95	Employer use only E S 5002
-----------------------------------	-------	---------------	-------------------------------

c Employer's name, address, and ZIP code
THE DEPOSITORY TRUST & CLEARING CORPORATION
 18301 BERMUDA GREEN DR
 TAMPA, FL 33647

e/f Employee's name, address, and ZIP code
SRIKANTH VYKUNTAPU
 8019 N MACARTHUR BLVD
 APT 2073
 IRVING, TX 75063

b Employer's FED ID number 13-4086405	a Employee's SSA number XXX-XX-0849
1 Wages, tips, other comp. 134809.23	2 Federal income tax withheld 22240.90
3 Social security wages 144033.09	4 Social security tax withheld 8930.05
5 Medicare wages and tips 144033.09	6 Medicare tax withheld 2088.48
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 224.03
14 Other	12b D 9223.86 12c W 7500.00 12d DD 13887.19 13 Stat emp. Ret. plan 3rd party sick pay X
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	154,054.79		SOCIAL SECURITY TAX WITHHELD BOX 04 OF W-2	8,930.05
FED. INCOME TAX WITHHELD BOX 02 OF W-2	22,240.90		MEDICARE TAX WITHHELD BOX 06 OF W-2	2,088.48
STATE INCOME TAX BOX 17 OF W-2	0.00		SUI/SDI BOX 14 OF W-2	0.00
LOCAL INCOME TAX BOX 19 OF W-2	0.00			

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

SRIKANTH VYKUNTAPU
 8019 N MACARTHUR BLVD
 APT 2073
 IRVING, TX 75063

Social Security Number: XXX-XX-0849



© 2023 ADP, Inc.

PAGE 1 OF 1

1 Wages, tips, other comp. 134809.23	2 Federal income tax withheld 22240.90
3 Social security wages 144033.09	4 Social security tax withheld 8930.05
5 Medicare wages and tips 144033.09	6 Medicare tax withheld 2088.48
d Control number 000005706 W9H	Dept. BC95
Employer use only E S 5002	
c Employer's name, address, and ZIP code THE DEPOSITORY TRUST & CLEARING CORPORATION 18301 BERMUDA GREEN DR TAMPA, FL 33647	
b Employer's FED ID number 13-4086405	a Employee's SSA number XXX-XX-0849
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 224.03
14 Other	12b D 9223.86 12c W 7500.00 12d DD 13887.19 13 Stat emp. Ret. plan 3rd party sick pay X
e/f Employee's name, address and ZIP code SRIKANTH VYKUNTAPU 8019 N MACARTHUR BLVD APT 2073 IRVING, TX 75063	
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

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

1 Wages, tips, other comp. 134809.23	2 Federal income tax withheld 22240.90
3 Social security wages 144033.09	4 Social security tax withheld 8930.05
5 Medicare wages and tips 144033.09	6 Medicare tax withheld 2088.48
d Control number 000005706 W9H	Dept. BC95
Employer use only E S 5002	
c Employer's name, address, and ZIP code THE DEPOSITORY TRUST & CLEARING CORPORATION 18301 BERMUDA GREEN DR TAMPA, FL 33647	
b Employer's FED ID number 13-4086405	a Employee's SSA number XXX-XX-0849
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 224.03
14 Other	12b D 9223.86 12c W 7500.00 12d DD 13887.19 13 Stat emp. Ret. plan 3rd party sick pay X
e/f Employee's name, address and ZIP code SRIKANTH VYKUNTAPU 8019 N MACARTHUR BLVD APT 2073 IRVING, TX 75063	
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

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

1 Wages, tips, other comp. 134809.23	2 Federal income tax withheld 22240.90
3 Social security wages 144033.09	4 Social security tax withheld 8930.05
5 Medicare wages and tips 144033.09	6 Medicare tax withheld 2088.48
d Control number 000005706 W9H	Dept. BC95
Employer use only E S 5002	
c Employer's name, address, and ZIP code THE DEPOSITORY TRUST & CLEARING CORPORATION 18301 BERMUDA GREEN DR TAMPA, FL 33647	
b Employer's FED ID number 13-4086405	a Employee's SSA number XXX-XX-0849
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 224.03
14 Other	12b D 9223.86 12c W 7500.00 12d DD 13887.19 13 Stat emp. Ret. plan 3rd party sick pay X
e/f Employee's name, address and ZIP code SRIKANTH VYKUNTAPU 8019 N MACARTHUR BLVD APT 2073 IRVING, TX 75063	
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

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