				1		Federal Box 1	Sor Ser	. Box 3 & 7	Medicare Box 5	
						rederal box 1	500.500	50% 5 0 7	Tredicare Box 3	
		which shows your total wages f any deferred compensation a	Gross Wages		154690.72	154	690.72	154690.72		
other		at were subtracted from total	Txbl Benefits Group Term Life		251.04		251.04	251.04		
_	•	z wayes. se forms, including an explan	Adoption							
of the	e letter codes used in l	box 12, are available on a	Deferred Comp							
separate document.				Section 125 Other Pretax/Wag	ae Limit	(1866.64)	(18	366.64)	(1866.64)	
				W-2 Wages	,	153075.12	153	075.12	153075.12	
a Employe	ee's social security number	b Employer identification number (EIN	I)	d Control number						
	XX-7556	04-2437166		000819726301						No. 1545-0008
c Employer's name, address, and ZIP code					1 Wages, tip	s, other compensation 15307		Prederal income	e tax withheld	26526.48
NTT DATA Americas, Inc 7950 Legacy Dr				3 Social seco		_	Social security	tax withheld		
Suite 1100 Plano TX 75024				153075.12		-			9490.66	
					5 Medicare v	vages and tips 15307		Medicare tax w	ithheld	2219.59
S 50	e's first name and initial nda Rajulu	Last name			7 Social seci	to the same of the		Allocated tips		
133 N	lua Kajulu lunk Ln der TX 78641	Gaduputi			9			10 Dependent care benefits		
USA	Jei 1X 76041							To Dependent care benefits		
					11 Nonqualif	fied plans		2a See instruct	tions for box 12	
	e's address and ZIP code	r			Statut	ory Retirement Third-		ode C		251.04
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State in	ncome tax	13 emplo	byee plan sick P	ay c	Code W	1	1300.00
					<u> </u>			2c Code DD	T	5705.28
18 Local w	rages, tips, etc.	19 Local income tax	20 Localit	ty name	14 Other			2d Code	1	
					1			,oue		
	Wage and Tax Statemen	t		2023					easury-Internal	
ору С—Го	or EMPLOYEE'S RECORDS			2023	г	This information is being funegligence penalty or other s	ırnished to the anction may b	Internal Revenue Se e imposed on you if	ervice. If you are require this income is taxable	ed to file a tax returr and you fail to repor
	ee's social security number XX-7556	b Employer identification number (EIN 04-2437166	1)	d Control number 000819726301					OMB	N- 4545 0000
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orm W-2 copy B—To	Wage and Tax Statemen Be Filed With Employee's FE	t DERAL Tax Return.		2023			рерап	ment of the Tr	easury - Internal	Revenue Servi
a Employe	ee's social security number	b Employer identification number (EIN	I)	d Control number						
	XX-7556	04-2437166	X.	000819726301					OMB	No. 1545-0008
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Leand USA	der TX 78641			9 10 Dependent care benef		re benefits				
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