## 2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement

Copy C for employee's records.
d Control number Dept. 060850 NCN3/95Z D973XX

Employer use only 2877

Employer's name, address, and ZIP code 921917AAAA SDH EDUCATION WEST LLC P.O. BOX 17033 AUGUSTA GA 30903

Batch #02419

| e/I Employee's name, address, and ZIP code |                        |   |  |  |
|--|------------------------|---|--|--|
| CHANDU MARRU                               |                        |   |  |  |
| 194 N HAMILTON ST                          |                        |   |  |  |
| 5 S  |                        | ı   |  |  |
| APT :                                      | 2                      |   |  |  |
| POUG                                       | HKEEPSIE NY            | 12601-2011                                |  |  |
| b Empl                                     | oyer's FED ID number   | a Employee's SSA number                   |  |  |
|  | 52-2282038             | XXX-XX-7553                               |  |  |
| 1 Wage                                     | es, tips, other comp.  | 2 Federal income tax withheld             |  |  |
|  | 3445.29                | 23.44                                     |  |  |
| 3 Socia                                    | al security wages      | 4 Social security tax withheld            |  |  |
| 5 Medic                                    | care wages and tips    | 6 Medicare tax withheld                   |  |  |
| 7 Socia                                    | l security tips        | 8 Allocated tips                          |  |  |
| 9  |                        | 10 Dependent care benefits                |  |  |
|  |                        |   |  |  |
| 11 Nonqualified plans                      |                        | 12a See instructions for box 12           |  |  |
| 50.  |                        | D 34.81                                   |  |  |
| 14 Other                                   | •                      | 120 I                                     |  |  |
|  | 7.98 SDI               | 12d                                       |  |  |
|  | 15.84 NY PFL           | 13 Stat emp. Ret. plan 3rd party sick pay |  |  |
|  |                        | X X X                                     |  |  |
| 15 State                                   | Employer's state ID no | 2. 16 State wages, tips, etc.             |  |  |
|  | 52-2282038             | 3445.29                                   |  |  |
| 17 State i                                 | income tax             | 18 Local wages, tips, etc.                |  |  |
|  | 63.53                  |   |  |  |
| 19 Local income tax                        |                        | 20 Locality name                          |  |  |

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<br>Compensation<br>Box 1 of W-2 | Social Security Wages Box 3 of W-2 | Medicare<br>Wages<br>Box 5 of W-2 | NY. State Wages,<br>Tips, Etc.<br>Box 16 of W-2 |
|------------------------|--|------------------------------------|-----------------------------------|---|
| Gross Pay              | 3,480.10   | 3,480.10                           | 3,480.10                          | 3,480.10  |
| Less 401(k) (D-Box 12) | 34.81  | N/A                                | N/A                               | 34.81   |
| Less Exempt Wages      | N/A  | 3,480.10                           | 3,480.10                          | N/A   |
| Reported W-2 Wages     | 3,445.29   | 0.00                               | 0.00                              | 3,445.29  |

23.44

4 Social security tax withheld

2. Employee Name and Address.

CHANDU MARRU 194 N HAMILTON ST APT 2 POUGHKEEPSIE NY 12601-2011

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Social security wages

| Wages, tips, other comp.<br>3445.29<br>3 Social security wages   |                                 | 2 Federal income tax withheld<br>23.44 |                                   |                      |
|--|---------------------------------|--|-----------------------------------|----------------------|
|  |                                 | 4 Social security tax withheld         |                                   |                      |
| 5 Medicare wages and tips  |                                 | 6 Medicare tax withheld                |                                   |                      |
| 060850 NCN3/95Z DS   |                                 | Corp.                                  | Employer use only<br>T 2877       |                      |
| c Employer's name, add<br>SDH EDUC<br>P.O. BOX<br>AUGUSTA  | ATION<br>17033                  | WES                                    |                                   |                      |
| b Employer's FED ID nu<br>52-2282038   |                                 |  | yee's SSA number<br>XXX-XX-7553   | I                    |
| 7 Social security tips   | 8                               | Alloca                                 | ted tips                          |                      |
| g  | 1                               | 0 Depen                                | dent care benefits                |                      |
| 11 Nonqualified plans  | 12                              | Za See ii<br>D                         | nstructions for box 12<br>34.81   |                      |
| 14 Other<br>7.98 SDI<br>15.84 NY F   | 1:<br>PFL 1:                    | 2b<br>2c<br>2d                         | p. Ret. plan   3rd party sick pay |                      |
|  | - 1                             | o Stat emp                             | X Single party sick pay           |                      |
| e/l Employee's name, ad<br>CHANDU MARR<br>194 N HAMILTO<br>APT 2<br>POUGHKEEPSIE                       | dress and<br>U<br>ON ST         | ZIP cod                                | 2011                              | H HERE               |
| CHANDU MARR<br>194 N HAMILTO<br>APT 2  | dress and<br>U<br>ON ST         | ZIP cod                                | 2011                              | DETACH HERE          |
| CHANDU MARR 194 N HAMILTO APT 2 POUGHKEEPSIE 15 State Employer's sta NY 52-2282038 17 State income tax | dress and<br>U<br>DN ST<br>NY 1 | ZIP cod                                | 2011 wages, tips, etc.            | FOLD AND DETACH HERE |

Wage and Tax

Statement

| 5 Medicare wages and tips                         | edicare wages and tips 6 Medicare tax withheld |              | Medicare wages an                                 | 6 Medic                    |           |
|---|--|--------------|---|----------------------------|-----------|
| d Control number Dept.                            | Corp. Employer u                               | ise only d   | Control number                                    | Dept.                      | Corp.     |
| 060850 NCN3/95Z D973XX                            | T  | 2877 0       | 60850 NCN3/95Z                                    | D973XX                     | •         |
| c Employer's name, address, a                     | nd ZIP code 921917/                            | AAAA c       | Employer's name, a                                | ddress, an                 | d ZIP cod |
| SDH EDUCATIO<br>P.O. BOX 1703:<br>AUGUSTA GA      | 3  |              | SDH EDU<br>P.O. BOX<br>AUGUSTA                    | 17033                      |           |
| b Employer's FED ID number<br>52-2282038          | a Employee's SSA nur                           |              | Employer's FED ID 1                               |                            | a Emplo   |
| 7 Social security tips                            | 8 Allocated tips                               | 7            | Social security tips                              |                            | 8 Alloca  |
| 9   | 10 Dependent care bend                         | ofits 9      |   | 1                          | 10 Depen  |
| 11 Nonqualified plans                             | 12a<br>D   34                                  | 1.81         | 1 Nonqualified plans                              | 1                          | 12a<br>D  |
| 14 Other  | 12b  | 1.           | 4 Other   | 1                          | 12b       |
| 7.98 SDI  | 12c  |              | 7.98 SDI  | 1                          | 12c       |
| 15.84 NY PFL                                      | 12d  |              | 15.84 NY  | PFL 1                      | 2d        |
|   | 13 Stat emp. Ret. plan 3rd pa                  | rty sick pay |   | 1                          | 3 Stat em |
| e/f Employee's name, address a                    | nd ZIP code                                    | e/           | f Employee's name, a                              | ddress and                 | ZIP cod   |
| CHANDU MARRU                                      |  |              | HANDU MARR  |                            |           |
| 194 N HAMILTON ST<br>APT 2                        |  |              | 94 N HAMILTO<br>PT 2                              | ON ST                      |           |
| POUGHKEEPSIE NY 12601-2011                        |  |              | OUGHKEEPSIE                                       |                            |           |
| 15 State Employer's state ID no.<br>NY 52-2282038 | 16 State wages, tips, etc. 34                  | 45.29        | State Employer's sta<br>NY 52-2282038             | ite ID no. 1               | 6 State v |
| 17 State income tax<br>63.53                      | 18 Local wages, tips, et                       | C QNAC       | State income tax                                  | 3.53                       | 8 Local   |
| 19 Local income tax                               | 20 Locality name                               | 15           | Local income tax                                  |                            | 0 Localit |
| W-2 Wage a  |  | 23           | NY.Sta<br>N-2 Wa<br>So 2 to be filed with explain | te Fili<br>ige an<br>tatem | d Tax     |

|    | 0110120                 |            |                  |                    |                |
|----|-------------------------|------------|------------------|--------------------|----------------|
| 3  | Social security wag     | 4 Socia    | al security      | tax withheld       |                |
| 5  | Medicare wages and tips |            | 6 Medic          | care tax w         | rithheld       |
| d  | Control number          | Dept.      | Corp.            | Emp                | loyer use only |
| 06 | 0850 NCN3/95Z           | D973XX     |                  | T                  | 2877           |
| 6  | Employer's name, a      | ddress, ar | d ZIP co         | de 921             | 917AAAA        |
|    | SDH EDU                 | CATIO      | N WE             | ST LL              | С              |
|    | P.O. BOX                | 17033      |                  |                    | -              |
|    | AUGUSTA                 |            |                  |                    |                |
|    |                         |            |                  |                    |                |
|    |                         |            |                  |                    |                |
|    |                         |            |                  |                    |                |
|    |                         |            |                  |                    |                |
| •  | Employer's FED ID       |            |                  |                    | A number       |
| _  | 52-228203               | _          | XXX-XX-7553      |                    |                |
| 0  | Social security tips    |            | 8 Allocated tips |                    |                |
|    |                         |            | IO Denen         | dont or a          | benefits       |
|    |                         |            | io peheri        | uent care          | benefits       |
| 11 | Nonqualified plans      |            | 12a              |                    |                |
|    |                         |            | D                |                    | 34.81          |
| 14 | Other                   | -          | 12b              |                    |                |
|    | 7.98 SDI                |            | 12c              |                    |                |
|    | 15.84 NY                |            | 2d .             |                    |                |
|    |                         |            |                  | la                 |                |
|    |                         | 3 Stat em  | P. Ret. plan     | 3rd party sick par |                |
|    |                         |            |                  | 1 X                | 1              |

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CHANDU MARRU 194 N HAMILTON ST APT 2 POUGHKEEPSIE NY 12601-2011

| 15 State Employer's state ID no.<br>NY 52-2282038 | 16 State wages, tips, etc.<br>3445 . 2 |
|---|--|
| 03.33   | 18 Local wages, tips, etc.             |
| 19 Local income tax                               | 20 Locality name                       |

NY.State Filing Copy Wage and Tax Statement