

# 2023 W-2 and EARNINGS SUMMARY

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.

<b>Employee Reference Copy</b>			
<b>W-2</b>		<b>2023</b>	
Wage and Tax Statement		OMB No. 1545-0008	
Copy C for employee's records.			
d Control number 01829122 732	Dept. DCMG	Corp. G S	Employer use only 28930
c Employer's name, address, and ZIP code <b>TATA CONSULTANCY SERVICES LIMITED</b> 379 THORNALL STREET 4TH FLOOR EDISON, NJ 08837  (CORRECTED STATEMENT)			
e/f Employee's name, address, and ZIP code <b>NANDAKUMAR THRIKKASSERY</b> 9631 BAYTOWN COAST SAN ANTONIO, TX 78254			
b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-4760		
1 Wages, tips, other comp. 115865.66	2 Federal income tax withheld 8311.71		
3 Social security wages 126790.28	4 Social security tax withheld 7861.00		
5 Medicare wages and tips 126790.28	6 Medicare tax withheld 1838.46		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C   94.81		
14 Other 50.00 TFB	12b D   10924.62		
	12c W   4400.00		
	12d AA   405.20		
	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	

GROSS PAY	138,027.15	SOCIAL SECURITY TAX WITHHELD	7,861.00
FED. INCOME TAX WITHHELD	8,311.71	BOX 04 OF W-2	
BOX 02 OF W-2		MEDICARE TAX WITHHELD	1,838.46
BOX 06 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-4760

**NANDAKUMAR THRIKKASSERY**  
9631 BAYTOWN COAST  
SAN ANTONIO, TX 78254

(CORRECTED STATEMENT)

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

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

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

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ADDITIONAL W-2 FOR BOX 12 OR 14 OVERFLOW

Social Security Number: XXX-XX-4760

NANDAKUMAR THRIKKASSERY 9631 BAYTOWN COAST SAN ANTONIO, TX 78254

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