## 2023 W-2 and EARNINGS SUMMARY

d Contro	l number	Dept.	Corp.	Employer use only				
	019 WTB	101965	NK25	A E S 26630				
c Employer's name, address, and ZIP code PRESIDENT AND FELLOWS OF HARVARD COLLEGE 1033 MASSACHUSETTS AVE 2ND FL CAMBRIDGE, MA 02138								
VENU 275 M UNIT I SOME	RVILLE,	A PE. STREET MA 021	IAVAR 「 43					
b Employ	b Employer's FED ID number a Employee's SSA number 04-2103580 XXX-XX-4391							
1 Wages,	tips, other co		2 Federal income tax withheld					
3 Social •	53742.71 7447.44 Social security wages 4 Social security tax withh							
C COOILII C	oounty wage	-	4 Cociai	security tax withineid				
5 Medican	e wages and	tips	6 Medicare tax withheld					
7 Social security tips			8 Allocated tips					
11 Nonqualified plans 14 Other			12a See Instructions for box 12 DD I 9996.22					
E Ctata E	immlevente et	ete ID ne		Ret, plan 3rd party sick pay X wages, tips, etc.				
	NTH-107981		10 State	53742.71				
	7 State income tax 2601.90 18 Local wages, tips, etc.							
9 Local in			20 Locality name					
Wages, tip	ps, other cor 53742.		2 Federal income tax withheld 7447.44					
Social security wages			4 Social security tax withheld					
5 Medicare wages and tips			6 Medicare tax withheld					
Control	number	Dept.	Corp.	Employer use only				
00000560		101965	NK25	A E S 26630				
PRES COLL 1033		ND FELI HUSET	LOWS O	F HARVARD				

Federal Filing Copy
Wage and Tax

Statement

Employee Reference Copy

Wage and Tax
Statement

VENU MADHAVA PEJAVAR 275 MEDFORD STREET UNIT B SOMERVILLE, MA 02143

> MA. State Filing Copy Wage and Tax

Copy 2 to be filed with employee's State Income Tax Ret

Statement

Social Security Number: XXX-XX-4391

2 Federal income tax withheld

4 Social security tax withheld

7447.44

1 Wages, tips, other comp.

3 Social security wages

53742.71

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Wages, tips, other comp. 53742.71

3 Social security wages

PAGE 1 OF 1

7447.44

2 Federal income tax withheld

4 Social security tax withheld

			88		_					
Medicare wages and tips		6 Medica	6 Medicare tax withheld		5 Medicare wages and tips		6 Medicare tax withheld			
Control r	number Dep	t. Corp.	Employer use	only	d Con	rol number	Dept.	Corp.	Employe	er use only
0000056019	9 WTB 1019	65 NK25	AES 266	30	00000	56019 WTB	101965	NK25	AES	26630
PRESIDENT TO THE PRESID		ELLOWS ( ETTS AVE	OF HARVARI	)	PRI CO 103	yer's name, ESIDENT A LLEGE 3 MASSAC MBRIDGE,	ND FEL	LOWS (	OF HARV	'ARD
	s FED ID num	ber a Emplo	yee's SSA num XXX-XX-439	ber	b Empl	oyer's FED II 04-21035		a Emplo	yee's SSA XXX-X)	number (-4391
7 Social sec		8 Alloca			7 Social	security tips		8 Alloca	ted tips	
9		10 Depe	ndent care benef	its	g			10 Depe	ndent care	benefits
11 Nonquali	fied plans	12a See in	nstructions for be	6.22	11 None	ualified plans		12a DD		9996.22
14 Other		12b		1	14 Othe	ř.		12b		
		12c		1				12c		
		12d						12d		
		13 Stat emp	Ret. plan 3rd party	eick pay				13Stat em	Ret plan 3	nd party sick pay
VENU M 275 MEI UNIT B SOMER	e's name, addre IADHAVA I DFORD STRI VILLE, MA	PEJAVAR EET 02143		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	VENI 275 I UNIT SOM	ERVILLE,	A PE. STREET MA 021	IAVAR T 43		
MA W	TH-10798176-04	4	wages, tips, etc. 53742.7	1	15 State MA	Employer's a WTH-10798		0000 0000000	537	742.71
17 State inco	ome tax 2601.90	18 Local	wages, tips, etc.	DAND C		Income tax 260	1.90	18 Loca	wages, tip	s, etc.

	) is seemed the Casternate Casternate December					
5 Medicare wages and tips	6 Medicare tax withheld					
d Control number Dept.	Corp.	Employ	ver use only			
0000056019 WTB 101965	NK25	AES	26630			
PRESIDENT AND FEL COLLEGE 1033 MASSACHUSET CAMBRIDGE, MA 021	LOWS (	F HAR				
b Employer's FED ID number 04-2103580	a Emplo	yee's SS/ XXX-X	A number X-4391			
7 Social security tips	8 Alloca	8 Allocated tips				
	10 Depe	ndent care	e benefits			
11 Nonqualified plans	12a DD		9996.22			
4 Other	12b					
	12c					
	12d					
	13 Stat em	p. Ret. plan :	3rd party sick pa			
of Employee's name, address VENU MADHAVA PE 275 MEDFORD STREE UNIT B SOMERVILLE, MA 021	JAVAR T	code				
15 State Employer's state ID no WTH-10798176-044	53742.71					
17 State income tax 2601.90	18 Local	wages, tij	ps, etc.			
19 Local income tax	20 Locality name					
W-2 City or Local Wage ar	Filing nd Tax	Copy	023			

Copy 2 to be filed with employee's City or Local income Tax Return.