2023 W-2 and EARNINGS SUMMARY

V	V -2	2	Stateme	na ent	тах	20	023
		employee's reco					No. 1545-0008
d		ol number	Dept.		corp.	Emplo	yer use only
000	001022	13 WZG		YA	H7		84096
С	c Employer's name, address, and ZIP code ERNST & YOUNG US LLP 1201 ELM ST STE 1200 DALLAS, TX 75270						
	DEB: 507 APT	oyee's name, a SHIKHAR CENTRAL 3 SEY CITY,	DAS AVE	nd Z		de	
b	Emplo	yer's FED ID (а	Emplo		A number XX-5167
1	Wage	s, tips, other o		2	edera		tax withheld
		9710	04.37			1	6670.56
3	Socia	security wag		4 ;	Social		tax withheld
			98.93			•	1357.73
5	Medic	are wages and	d tips	6 I	Medica	are tax w	ithheld
		2189	98.93				317.53
7	Social	security tips		8 /	Alloca	ted tips	
9					•		benefits
11	Nonqu	ualified plans		12a 12b	See ins	tructions fo	or box 12 6540.00
14	Other	399.43 NY F 97104.37 NY	FL SRCINCOM		- 		
		31.20 NYS	DI	12d	-		
					Stat em	p. Ret. plan	3rd party sick pay
15	State	Employer's s	tate ID no	. 16	State v	wages, tip	os, etc.
		TOTAL STA	TE				
17	State	ncome tax	68.46	18 I	ocal	wages, ti	ps, etc.
19	Local	income tax		20 I	_ocali	ty name	
_							

Reference

Сору

Employee

DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307

¤© 2023 ADP, Inc.

PAGE 01 OF 02

1 Wages, tips, other comp. 97104.37
2 Social security wages 21898.93
5 Medicare wages and tips 21898.93
d Control number 0000102213 WZG

C Employer's name, address, and ZIP code ERNST & YOUNG US LLP 1201 ELM ST STE 1200 DALLAS, TX 75270

b Employer's FED ID number 34-6565596
7 Social security tax withheld 1357.73
6 Medicare tax withheld 1317.53
6 Medicare tax withheld 1357.73
6 Medicare tax withheld 1357.73
6 Medicare tax withheld 1357.73
8 Medicare tax withheld 1357.73
8 Lemployer use only YAH7
8 Allocated income tax withheld 1357.73
8 Medicare tax withheld 1357.73
8

b	Employer's FED ID number 34-6565596		a Employee's SSA number XXX-XX-5167			
7	Social	security tip	os	8 Allocated tips		
9				10 Dependent care benefits		
11	Nonqu	alified plan	s	DD		ons for box 12 6540.00
14	Other	399.43 N 97104.37 I	Y PFL NYSRCINCOM	12b		
		31.20 N		12c		
				12d		
				13 Stat en	p. Ret. plar	3rd party sick pa
e/f Employee's name, address and ZIP code						
DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307						
15 State Employer's state ID no. 16 State wages, tips, etc. TOTAL STATE						
17 State income tax 5168.46 18 Local wages, tips, etc.						
10	1	income tax		001	ity name	·

Сору

Filing

Wage and Tax

Statement

Federal

	Wages, tips, other comp. 97104.37		2 Federal income tax withheld 16670.56			
3	Social security wages 21898.93		4 Social security tax withheld 1357.73			
5	Medicare wages and 218	6 Medicare tax withheld 317.53				
d 00	Control number 00102213 WZG	Dept.	Corp.	Emplo	yer use only 84096	
c Employer's name, address, and ZIP code ERNST & YOUNG US LLP 1201 ELM ST STE 1200 DALLAS, TX 75270						
b	Employer's FED ID 34-65655	number 96			A number XX-5167	
7	Social security tips		8 Allocated tips			
9			10 Dependent care benefits			
11	11 Nonqualified plans		12a DD		6540.00	
		EI	12b		00.000	
14	Other 399.43 NYF 97104.37 NYS 31.20 NYS	SRCINCOM	12c			
14	97104.37 NYS	SRCINCOM				
14	97104.37 NYS	SRCINCOM	12c	. Ret. plan	3rd party sick pay	
	97104.37 NYS	address ar DAS AVE	12c 12d 13 Stat emp		3rd party sick pay	
e/f	97104.37 NY: 31.20 NYS Employee's name, a DEBSHIKHAR 507 CENTRAL APT 3	address ar DAS AVE NJ 0	12c 12d 13 Stat emp	e vages, tip		
e/f	97104.37 NYS 31.20 NYS Employee's name, a DEBSHIKHAR 507 CENTRAL APT 3 JERSEY CITY, State Employer's s	address ar DAS AVE NJ 0	12c 12d 13 Stat emp	e vages, tip 1	os, etc. 00482.55	
e/f 15	employee's name, a DEBSHIKHAR 507 CENTRAL APT 3 JERSEY CITY, State NJ Employer's s 346-565-596	address ar DAS AVE NJ 0	12c 12d 13 Stat emp	e vages, tip 1 wages, ti	os, etc. 00482.55	
e/f 15	Employee's name, a DEBSHIKHAR 507 CENTRAL APT 3 JERSEY CITY, State Employer's s NJ 346-565-596 State income tax	address ar DAS AVE NJ 0 tate ID no.	12c 12d 13 Stat emp d ZIP cod	e vages, tip 1 wages, ti	os, etc. 00482.55 ps, etc.	

Statement

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

3 Social security wages 21898.93 4 Social security tax withheld 1357.73 5 Medicare wages and tips 21898.93 6 Medicare tax withheld 317.53 6 Control number Dept. Corp. Employer use only YAH7 8409 7 C Employer's name, address, and ZIP code ERNST & YOUNG US LLP 1201 ELM ST STE 1200 DALLAS, TX 75270 6 Employer's FED ID number 34-6565596 a Employee's SSA number XXX-XX-5167 7 Social security tips 8 Allocated tips Allocated tips 9 10 Dependent care benefits DD 6540.00 14 Other 399.43 NYPEL NYSECINCOM 31.20 NY SDI 12c 12d 12d 13 State Employee's name, address and ZIP code DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307 15 State Employer's state ID no. 16 State State State Employer's state ID no. 16 State S	Wages, tips, other comp. 97104.37		2 Federal income tax withheld 16670.56		
21898.93 317.53 Control number Dept. Corp. Employer use only YAH7 8408 C Employer's name, address, and ZIP code ERNST & YOUNG US LLP 1201 ELM ST STE 1200 DALLAS, TX 75270 D Employer's FED ID number 34-6565596 XXX-XX-5167 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a DD 6540.00 14 Other 399.43 NYPFL 12b 31.20 NY SDI 12c 12d 13 Stat emp. Ret. plan 3rd party sick 13 Stat emp. Ret. plan 3rd party sick 14 STATE 15 State Employer's state ID no. 16 State wages, tips, etc. 15 State Employer's state ID no. 16 State wages, tips, etc. 15 State Employer's state ID no. 16 State wages, tips, etc. 15 State Employer's state ID no. 16 State wages, tips, etc. 15 State Employer's state ID no. 16 State wages, tips, etc. 15 State Employer's state ID no. 16 State wages, tips, etc. 15 State		4 Social security tax withheld 1357.73			
C					
ERNST & YOUNG US LLP		Dept.		Employ	ver use only 84096
34-6565596 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 11 Nonqualified plans 12a DD 6540.00 14 Other 399.43 NYPFL 97104.37 NYSRCINCOM 12c 12d 13 Stat emp. Ret. plan 3rd party sick per part of the plan side party side per part of the plan side party side per part of the plan side party side per party side per part of the plan side party side per part of the plan side party side per part of the plan side party side per part	1201 ELM ST \$				
10 Dependent care benefits 11 Nonqualified plans 12a DD 6540.00 14 Other 399.43 NYPFL 97104.37 NYSRCINCOM 31.20 NY SDI 12c 12d 12d 13 Stat emp. Ret. plan 3rd party sick performance in the state of			a Employ	ee's SS/	A number
11 Nonqualified plans 12 DD 6540.00 14 Other 399.43 NY PFL 97104.37 NYSRCINCOM 12c 12d 12d 13 State emp. Ret. plan 3rd party sick per plan state and the s	7 Social security tips		8 Allocat	ed tips	
14 Other 399.43 NYPFL 97104.37 NYSRCINCOM 31.20 NYSDI 12b 12d 13 Statemp. Ret. plan 3rd party sick 12d 13 Statemp. Ret. plan 3rd party sick 12d 13 Statemp. Ret. plan 3rd party sick 14d 15d	9		10 Depend	dent care	benefits
eff Employee's name, address and ZIP code DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307 15 State Employer's state ID no. 16 State wages, tips, etc.					
al.20 NY SDI 12c	11 Nonqualified plans				6540.00
e/f Employee's name, address and ZIP code DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307 15 State Employer's state ID no. 16 State wages, tips, etc.	14 Other 399.43 NY		DD 12b		6540.00
e/f Employee's name, address and ZIP code DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307 15 State Employer's state ID no. 16 State wages, tips, etc.	14 Other 399.43 NY 97104.37 NY	SRCINCOM	12b 12c		6540.00
DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307 15 State Employer's state ID no. 16 State wages, tips, etc.	14 Other 399.43 NY 97104.37 NY	SRCINCOM	12b 12c 12d		
	14 Other 399.43 NY 97104.37 NY 31.20 NY 8	ŚRCINCOM SDI	12b 12c 12d 13 Stat emp		
17 State income tax 18 Local wages, tips, etc.	e/f Employee's name, a DEBSHIKHAR I 507 CENTRAL APT 3 JERSEY CITY,	address ar DAS AVE NJ 07	DD 12b 12c 12d 13 Stat emp 12l Code 17307	•	3rd party sick pa

20 Locality name

Copy

Wage and Tax

Statement

19 Local income tax

NJ. State Filing

Social Security Number: XXX-XX-5167

NY. State Reference Copy Wage and Tax Statement Control number Corp. Employer use only 0000102213 WZG YAH7 84097 c Employer's name, address, and ZIP code **ERNST & YOUNG US LLP** 1201 ELM ST STE 1200 DALLAS, TX 75270 e/f Employee's name, address, and ZIP code **DEBSHIKHAR DAS 507 CENTRAL AVE** APT 3 JERSEY CITY, NJ 07307 Employer's FED ID number 34-6565596 a Employee's SSA number XXX-XX-5167 Wages, tips, other comp. Federal income tax withheld 97104.37 16670.56 Social security wages 4 Social security tax withheld 21898.93 1357.73 Medicare wages and tips 6 Medicare tax withheld 21898.93 317.53 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 DD 6540.00 12b 399.43 NY PFL 12b 97104.37 NY SRCINCOM 12c 31.20 NY SDI 12d 14 Other 12d 13 Stat emp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. NY 346565596 97104.37

1	Wages, tips, other o	omp. 04.37	2 Federa	Federal income tax withheld 16670.56	
3	Social security wag 2189	es 98.93	4 Social security tax withheld 1357.73		
5	5 Medicare wages and tips 21898.93			are tax withheld 317.53	
d 00	Control number 00102213 WZG	Dept.	Corp. YAH7	Employer use only 84097	

18 Local wages, tips, etc.

20 Locality name

c Employer's name, address, and ZIP code

5168.46

19 Local income tax

ERNST & YOUNG US LLP 1201 ELM ST STE 1200 DALLAS, TX 75270

b	Employer's FED ID number 34-6565596	a Employee's SSA number XXX-XX-5167		
7	Social security tips	8 Allocated tips		
9		10 Dependent care benefits		
11	Nonqualified plans	12a See instructions for box 12 DD 6540.00		
14	Other 399.43 NY PFL 97104.37 NYSRCINCOM	12b		
	31.20 NY SDI	12c		
		12d		
		13 Stat emp. Ret. plan 3rd party sick pay		
e/f	Employee's name, address ar	nd ZIP code		

DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307

15 State NY	Employer's stat 346565596	e ID no. 9	16 State wages, tips, etc. 97104.37
17 State	income tax 5168		18 Local wages, tips, etc.
19 Loca	I income tax		20 Locality name

NY. State Filing Copy Wage and Tax

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

2023 W-2 and EARNINGS SUMMARY

DEBSHIKHAR DAS 507 CENTRAL AVE APT 3 JERSEY CITY, NJ 07307

¤© 2023 ADP, Inc.

PAGE 02 OF 02

Social Security Number: XXX-XX-5167

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959. See the Form 1040 instructions to determine if you are required to complete Form 8959

Box 6. This amount includes the 1.45% Medicare tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137 with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$22,500 (\$15,500 if you only have SIMPLE plans; \$25,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$22,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2023, your employer may have allowed an additional deferral of up to \$7,500 (\$3,500 for section 401(k) (11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

B- Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E-Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

 $K{=}20\%$ excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839 to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525 for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889.

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA-Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A.

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2023 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2023 or if income is earned for services provided while you were an inmate at a penal institution.

For 2023 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2023 and more than \$9,932.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,821.20 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

rvice

Department of the Treasury - Internal Revenue Service

Department of the Treasury - Internal Revenue Service