## 2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement Corp. Employer use only Control number DCMH G S 45895 c Employer's name, address, and ZIP code

SABARI RAJAN VENKATESAN 8727 FREDERICKSBURG ROAD; APT SAN ANTONIO, TX 78240

b Emp	oyer's FED ID number 98-0429806	аЕ	mplo		A number X-2580	
1 Wages, tips, other comp.			2 Federal income tax withheld			
	83205.93			10	565.89	
3 Socia	I security wages	4 S	4 Social security tax withheld			
	87337.82		5414.94			
5 Medic	are wages and tips	6 N	/ledic	are tax wit	hheld	
	87337.82			1	266.40	
7 Social security tips			8 Allocated tips			
9		10	Depe	ndent car	e benefits	
11 Non	qualified plans		D I	nstruction	s for box 12 4131.89	
14 Othe	er		DD !		3870.09	
		12c				
		12d				
		13 St	at emp	D. Ret, plan	3rd party sick pay	
15 State	Employer's state ID no	16	State	wages, ti	ps, etc.	
17 State	income tax	18	Loca	l wages, ti	ps, etc.	
19 Local income tax		20	20 Locality name			

TATA CONSULTANCY SERVICES LIMITED 379 THORNALL STREET 4TH FLOOR **EDISON, NJ 08837** e/f Employee's name, address, and ZIP code

1 Wages, tips, other co 83205.	•	2 Federal income tax withheld 10565.89		
3 Social security wages 87337.		4 Social security tax withheld 5414.94		
5 Medicare wages and tips 87337.82		6 Medicare tax withheld 1266.40		
d Control number	Dept.	Corp.	Employer use only	
00772757 732		DCMH	G S 45895	
c Employer's name, address, and ZIP code				

TATA CONSULTANCY SERVICES LIMITED **379 THORNALL STREET** 4TH FLOOR **EDISON, NJ 08837** 

J					
	b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-2580			
7 Social security tips		8 Allocated tips			
	9.	10 Dependent care benefits			
	11 Nonqualified plans	D	structio	ns for box 12 4131.89	
	14 Other	<sup>12b</sup> DD		3870.09	
		12c			
		12d			
		13 Stat emp.	. Ret. plan <b>X</b>	3rd party sick pay	
	e/f Employee's name, address and ZIP code				
	SABARI RAJAN VENKATESAN 8727 FREDERICKSBURG ROAD: APT				
e/f Employee's name, address and ZIP code  SABARI RAJAN VENKATESAN					

SAN ANTONIO, TX 78240

1	15	State	Employer's state ID no.	16	State wages, tips, etc.
			. ,		•
1	17	Stata	income tax	10	Local wages, tips, etc.
	17	State	income tax	10	Local wages, tips, etc.
	19	Local	income tax	20	Locality name
1			Endoral Eiling		ony

ral Filing Copy Wage and Tax Statement

Copy B to be filed with employee's Federal Income Tax Return

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

У	adjustments made b	y your employer.		
	GROSS PAY	89,962.34	SOCIAL SECURITY	5,414.94
			TAX WITHHELD	
			BOX 04 OF W-2	
	FED. INCOME	10,565.89	MEDICARE TAX	1,266.40
	TAX WITHHELD		WITHHELD	
	BOX 02 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-2580

SABARI RAJAN VENKATESAN 8727 FREDERICKSBURG ROAD; APT SAN ANTONIO, TX 78240

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1 Wages, tips, other comp

3 Social security wages

5 Medicare wages and tips 87337.82

d Control number

00772757 732

83205.93

87337.82

c Employer's name, address, and ZIP code

Dept.

## PAGE 1 OF 1

10565.89

5414.94

1266.40

Employer use only

G S 45895

2 Federal income tax withheld

4 Social security tax withheld

6 Medicare tax withheld

Corp.

**DCMH** 

TATA CONSULTANCY SERVICES LIMITED 379 THORNALL STREET 4TH FLOOR EDISON, NJ 08837				
b Employer's FED ID number 98-0429806	a Employee's SSA number XXX-XX-2580			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a D 4131.89			
14 Other	<sup>12b</sup> DD 3870.09			
	12c			
	12d			
	13 Stat emp. Ret. plan 3rd party sick pay			
e/f Employee's name, address and ZIP code SABARI RAJAN VENKATESAN 8727 FREDERICKSBURG ROAD; APT SAN ANTONIO, TX 78240				
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			
. State Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.				

00772757 732	DCMH G S 45895		
d Control number Dept	Corp. Employer use only		
5 Medicare wages and tips 87337.82	6 Medicare tax withheld 1266.40		
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7 Social security tips	8 Allocated tips			
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11 Nonqualified plans	12a			
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14 Other	<sup>12b</sup> DD 3870.09			
	12c			
	12d			
	13 Stat emp. Ret. plan 3rd party sick pay			
e/f Employee's name, address	and ZIP code			

SABARI RAJAN VENKATESAN 8727 FREDERICKSBURG ROAD; APT SAN ANTONIO, TX 78240

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

City or Local Filing Wage and Tax Statement

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