Form W-2 Wage and Tax Statement 2023

Copy C, for employee's records

b Employer identification number (EIN) a Employee's social security number 22-3524303 XXX-XX-4122		Vold	LTIMINDTREE LIMITED 25 INDEPENDENCE BLVD STE 401		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
					Wages, tips, other compensation 68562.74 Social security wages	2 Federal income tax withheld 5850.10	
	olan sick þay'		WARREN NJ 07059		71552.74	4436.27	
12 See instructions for box 12 14 Other W 2402.64 D 2990.00	14 Other		e Employee's name, address, and ZIP code SATHISH KUMAR SELVARAJU 8025 W RUSSELL RD		5 Medicare wages and tips 71552.74 7 Social Security Tips	6 Medicare tax withheld 1037.51 8 Allocated Tips	
			APT 1075 LAS VEGAS NV 89113		10 Dependent care benefits	11 Nonqualified plans	
15 State Employer's state ID a	number 16 State v	vages, tip	s, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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 fall to report it.

Form W-2 Wage and Tax Statement 2023

Copy B, to be filed with employee's FEDERAL tax return

d Control number 0940-P4088952 Vo 0061096252 - PAYROL b Employer identification number (EIN) a Employee's social security number 22-3524303 XXX-XX-4122		Void	c Employer's name, address, and ZIP code LTIMINDTREE LIMITED 25 INDEPENDENCE BLVD STE 401		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
					1 Wages, tips, other compensation 68562.74	2 Federal income tax withheld 5850.13	
	rement Third-party plan sick pay	,	WARREN NJ 07059		3 Social security wages 71552.74	4 Social security tax withheld 4436.27	
12 See instructions for box 12			e Employee's name, address, and ZIP code		5 Medicare wages and tips 71552.74	6 Medicare tax withheid 1037.51	
			SATHISH KUMAR SELVARAJU 8025 W RUSSELL RD		7 Social Security Tips	8 Allocated Tips	
			APT 1075 LAS VEGAS NV 89113		10 Dependent care benefits	11 Nonqualified plans	
State Employer's state ID nun	nber 16 Stale wa	ges, tips, e	etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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Form W-2 Wage and Tax Statement 2023

d Control number	Void c Employer	s name, address, and ZIP code		Department of the Treasury - I OMB No. 1545-0008	nternal Revenue Service
b Employer identification number (EIN) a Employee's social security	number			1 Wages, tips, other compensation	2 Federal income tax withheld
3 Statutory Retirement Th employee plan si	rd-party xx pay			3 Social security wages	4 Social security tax withheld
See instructions for box 12 14 Other	e Employe	e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
The second of the second of	4			7 Social Security Tips	8 Allocated Tips
				10 Dependent care benefits	11 Nonqualified plans
or was a common or an experience	de la companya de la				
state Employer's state ID number 16	State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
2	14				

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Form W-2 Wage and Tax Statement 2023

Control number Employer identification number (EIN) a Employee's social security number	Void C Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
			1 Wages, tips, other compensation	2 Federal income tax withheld
3 Statutory Retirement Third-party employée pian siok pay		3 Social security wages	4 Social security tax withheld	
12 See Instructions for box 12 14 Other	e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
. 7			7 Social Security Tips	8 Allocated Tips
			10 Dependent care benefits	11 Nonqualified plans
			62	
15 State Employer's state ID number 16 State	rages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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