

2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy			
W-2		2023	
Wage and Tax Statement			
Copy C for employee's records. OMB No. 1545-0008			
d Control number 0000056578 TTX	Dept. MDLO	Corp. S	Employer use only 4051
c Employer's name, address, and ZIP code ALLSTATE INSURANCE COMPANY PO BOX 660594 DALLAS, TX 75266			
e/f Employee's name, address, and ZIP code SHYAM DEVARAJ 1647 BENTZ WAY BATAVIA, IL 60510			
b Employer's FED ID number 36-0719665	a Employee's SSA number XXX-XX-0774		
1 Wages, tips, other comp. 102418.36	2 Federal income tax withheld 13706.29		
3 Social security wages 108987.15	4 Social security tax withheld 6757.20		
5 Medicare wages and tips 108987.15	6 Medicare tax withheld 1580.31		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 D 6568.79		
14 Other	12b DD 15846.24		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay X		
15 State Employer's state ID no. IL 36-0719665 000 0	16 State wages, tips, etc. 102418.36		
17 State income tax 4972.07	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

EARNINGS	EMPLOYEE EARNINGS SUMMARY AMOUNT
REGULAR EARNINGS	105,316.91 +
COMPANY HOLIDAY PAID	4,162.40 +
RELONCASUPRSLTALTAIR*	3,123.87 +
CHOICE \$ PRE-TAX CAFu	2,196.02 +
OTHER DEDUCTION	5,812.05 -
401 (K) P/T	6,568.79 -
TOTAL W2 BOX 1 WAGES :	102,418.36

SHYAM DEVARAJ
1647 BENTZ WAY
BATAVIA, IL 60510

Social Security Number: XXX-XX-0774



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Federal Filing Copy			
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Wage and Tax Statement			
Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008			

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IL State Filing Copy			
W-2		2023	
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Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

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

