

# 2023 W-2 and EARNINGS SUMMARY

**Employee Reference Copy**  
**W-2 Wage and Tax Statement 2023**  
Copy C for employee's records. OMB No. 1545-0048

d Control number		Dept.	Corp.	Employer use only
0000028180 U2D			YAHF	C S 16557
c Employer's name, address, and ZIP code				
CUMMINS INC 500 JACKSON ST COLUMBUS, IN 47201				
e/f Employee's name, address, and ZIP code				
VISHWANADHAM MANDALA 1311 HORSE SHOE BEND GREENWOOD, IN 46143				
b Employer's FED ID number		a Employee's SSA number		
35-0257090		XXX-XX-1706		
1 Wages, tips, other comp.	2 Federal income tax withheld			
127678.09	10932.45			
3 Social security wages	4 Social security tax withheld			
134090.59	8313.62			
5 Medicare wages and tips	6 Medicare tax withheld			
134090.59	1944.31			
7 Social security tips	8 Allocated tips			
9		10 Dependent care benefits		
11 Nonqualified plans		12a See instructions for box 12		
		C   295.48		
14 Other		12b D   6412.50		
		12c W   1025.24		
		12d DD   30246.35		
		13 Stat. emp. Ret. plan and partly sick pay		
		X		
15 State Employer's state ID no.	16 State wages, tips, etc.			
IN 0001763008 001	127678.09			
17 State income tax	18 Local wages, tips, etc.			
3898.16	113240.59			
19 Local income tax	20 Locality name			
1533.37	C-41			

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 adjustments made by your employer.

GROSS PAY	138,482.98	SOCIAL SECURITY TAX WITHHELD BOX 04 OF W-2	8,313.62
FED. INCOME TAX WITHHELD BOX 02 OF W-2	10,932.45	MEDICARE TAX WITHHELD BOX 06 OF W-2	1,944.31
STATE INCOME TAX BOX 17 OF W-2	3,898.16	SUI/SDI BOX 14 OF W-2	0.00
LOCAL INCOME TAX BOX 19 OF W-2	1,533.37		

To change your employee W-4 profile information file a new W-4 with your payroll department

Social Security Number: XXX-XX-1706

VISHWANADHAM MANDALA  
1311 HORSE SHOE BEND  
GREENWOOD, IN 46143



1 Wages, tips, other comp.	2 Federal income tax withheld	
127678.09	10932.45	
3 Social security wages	4 Social security tax withheld	
134090.59	8313.62	
5 Medicare wages and tips	6 Medicare tax withheld	
134090.59	1944.31	
d Control number	Dept.	Corp. Employer use only
0000028180 U2D		YAHF C S 16557
c Employer's name, address, and ZIP code		
CUMMINS INC 500 JACKSON ST COLUMBUS, IN 47201		
b Employer's FED ID number	a Employee's SSA number	
35-0257090	XXX-XX-1706	
7 Social security tips	8 Allocated tips	
9		10 Dependent care benefits
11 Nonqualified plans		12a See instructions for box 12
		C   295.48
14 Other		12b D   6412.50
		12c W   1025.24
		12d DD   30246.35
		13 Stat. emp. Ret. plan and partly sick pay
		X
e/f Employee's name, address and ZIP code		
VISHWANADHAM MANDALA 1311 HORSE SHOE BEND GREENWOOD, IN 46143		
15 State Employer's state ID no.	16 State wages, tips, etc.	
IN 0001763008 001	127678.09	
17 State income tax	18 Local wages, tips, etc.	
3898.16	113240.59	
19 Local income tax	20 Locality name	
1533.37	C-41	

**Federal Filing Copy**  
**W-2 Wage and Tax Statement 2023**  
Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0048

1 Wages, tips, other comp.	2 Federal income tax withheld	
127678.09	10932.45	
3 Social security wages	4 Social security tax withheld	
134090.59	8313.62	
5 Medicare wages and tips	6 Medicare tax withheld	
134090.59	1944.31	
d Control number	Dept.	Corp. Employer use only
0000028180 U2D		YAHF C S 16557
c Employer's name, address, and ZIP code		
CUMMINS INC 500 JACKSON ST COLUMBUS, IN 47201		
b Employer's FED ID number	a Employee's SSA number	
35-0257090	XXX-XX-1706	
7 Social security tips	8 Allocated tips	
9		10 Dependent care benefits
11 Nonqualified plans		12a See instructions for box 12
		C   295.48
14 Other		12b D   6412.50
		12c W   1025.24
		12d DD   30246.35
		13 Stat. emp. Ret. plan and partly sick pay
		X
e/f Employee's name, address and ZIP code		
VISHWANADHAM MANDALA 1311 HORSE SHOE BEND GREENWOOD, IN 46143		
15 State Employer's state ID no.	16 State wages, tips, etc.	
IN 0001763008 001	127678.09	
17 State income tax	18 Local wages, tips, etc.	
3898.16	113240.59	
19 Local income tax	20 Locality name	
1533.37	C-41	

**IN. State Filing Copy**  
**W-2 Wage and Tax Statement 2023**  
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0048

1 Wages, tips, other comp.	2 Federal income tax withheld	
127678.09	10932.45	
3 Social security wages	4 Social security tax withheld	
134090.59	8313.62	
5 Medicare wages and tips	6 Medicare tax withheld	
134090.59	1944.31	
d Control number	Dept.	Corp. Employer use only
0000028180 U2D		YAHF C S 16557
c Employer's name, address, and ZIP code		
CUMMINS INC 500 JACKSON ST COLUMBUS, IN 47201		
b Employer's FED ID number	a Employee's SSA number	
35-0257090	XXX-XX-1706	
7 Social security tips	8 Allocated tips	
9		10 Dependent care benefits
11 Nonqualified plans		12a See instructions for box 12
		C   295.48
14 Other		12b D   6412.50
		12c W   1025.24
		12d DD   30246.35
		13 Stat. emp. Ret. plan and partly sick pay
		X
e/f Employee's name, address and ZIP code		
VISHWANADHAM MANDALA 1311 HORSE SHOE BEND GREENWOOD, IN 46143		
15 State Employer's state ID no.	16 State wages, tips, etc.	
IN 0001763008 001	127678.09	
17 State income tax	18 Local wages, tips, etc.	
3898.16	113240.59	
19 Local income tax	20 Locality name	
1533.37	C-41	

**City or Local Filing Copy**  
**W-2 Wage and Tax Statement 2023**  
Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0048