| | | | | | r | ederal Box 1 | . 500.1 | Sec. Box 3 & 7 | Medicare Box 5 | |
|---|--|--|-------------------------|---|--|--|--|--|--|---|
| To the right is information which shows your total wages by | | | | Gross Wages | | 95317.2 | 9 | 95317.29 | 95317.29 | |
| W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total | | | | Txbl Benefits | | 330.0 | 0 | 330.00 | 330.00 | |
| | es to arrive at your W- | | Group Term Life | | 54.0 | 0 | 54.00 | 54.00 | | |
| | | se forms, including an explan | Adoption Deferred Comp | | (5391.75 | 5) | | | | |
| | e letter codes used in i rate document. | box 12, are available on a | Section 125 | | (1710.51 | | [1710.51] | (1710.51) | | |
| | | | Other Pretax/Wag | ge Limit | | | | | | |
| | | | | W-2 Wages | | 88599.0 | 3 | 93990.78 | 93990.78 | |
| o Empleyo | ee's social security number | b Employer identification number (EIN | I) | d Control number | | | | | | |
| | 77-6181 | 72-0542904 | , | 007426760301 | | | | | OMB | No. 1545-0008 |
| c Employe | r's name, address, and ZIP co | de | | | 1 Wages, tips, oth | er compen: | sation | 2 Federal incon | | |
| Accer | nture LLP | | | | 2 2 3001 131 | | 88599.03 | | | 12554.98 |
| 500 V 20th | W. Madison Street Floor | | | 3 Social security | | 93990.78 | 4 Social securit | y tax withheld | 5827.43 | |
| | go IL 60661 | | | | 5 Medicare wages | | | 6 Medicare tax | withheld | 0027.10 |
| o Employo | e's first name and initial | Last name | Sut | FF | | | 93990.78 | | | 1362.87 |
| 55 50 | ateswar l u | Chintala | | 7 Social security | ips | | 8 Allocated tips | • | | |
| | ATESWARLU CHINTALA SILAS DEANE HWY APT | | | 9 | | | 10 Dependent care benefits | | | |
| | CYHILL CT 06067 | | | | | | | | | |
| | | | | | 11 Nonqualified p | lans | | | ctions for box 12 | 54.00 |
| | e's address and ZIP code | T | | | Statutory | Retirement | Third-party | Code C | | 54.00 |
| 15 State CT | Employer's state ID Number 5801576-000 | 16 State wages, tips, etc. 88599.03 | 17 State in | ncome tax 4781.16 | 13 employee | plan | sick Pay | Code D | | 5391.75 |
| | | | | | | X | | 12c Code DD | Ŧ | 8629.02 |
| 18 Local w | vages, tips, etc. | 19 Local income tax | 20 Localit | y name | 14 Other CTPL | | 469.96 | 12d | | 0023.02 |
| | | | <u> </u> | | CIPL | | 469.96 | Code | | |
| orm W-2 | Wage and Tax Statemen | <u> </u> | | | | | Depa | artment of the T | reasury-Internal | Revenue Servi |
| Сору С—Го | or EMPLOYEE'S RECORDS | | | 2023 | This neglige | nformation is nce penalty or | being furnished to | the Internal Revenue | Service. If you are require if this income is taxable | ed to file a tax return |
| | ee's social security number | b Employer identification number (EIN | ١) | d Control number | | | | | | - |
| | 77-6181 | 72-0542904 | | 007426760301 | 1 Wages, tips, oth | | | 2 Federal incon | | No. 1545-0008 |
| | r's name, address, and ZIP co | de | | | i wages, ups, ou | | 88599.03 | 2 redetal illicon | ne tax withheld | 12554.98 |
| 500 V | nture LLP W. Madison Street | | | | 3 Social security | - | | 4 Social securit | y tax withheld | |
| 20th Chica | Floor igo IL 60661 | | | | 2001 0 | 10.000 | 93990.78 | 200 100 10 | 2020 2020 | 5827.43 |
| | | | | | 5 Medicare wages | | 93990.78 | 6 Medicare tax | withheld | 1362.87 |
| | e's first name and initial | Last name | Sur | ff. | 7 Social security | | - | 8 Allocated tips | i | 2002.07 |
| VENK | ateswar l u KATESWARLU CHINTALA | | | | | | | | | |
| | SILAS DEANE HWY APT (YHILL CT 06067 | Γ#436S | | | 9 | | | 10 Dependent of | are benefits | |
| USA | | | | | 11 Nonqualified p | lans | | 12a See instru | ctions for box 12 | |
| f Employe | e's address and ZIP code | | | | | | | Code C | 1 | 54.00 |
| 15 State | Employer's state ID Number | | 17 State i | | | | | | | |
| CT | 5801576-000 | | I'' Otate II | ncome tax | 13 Statutory I employee | | Third-party sick Pay | 12b Code D | 1 | 5391.75 |
| 18 Local w | - | 88599.03 | , otate ii | ncome tax 4781.16 | | | | Code D 12c | 1 | 5391.75 |
| | | 88599.03 | 20 Localit | 4781.16 | | plan | | Code D 12c Code DD | I L | 5391.75 8629.02 |
| | vages, tips, etc. | | | 4781.16 | employee | plan | | Code D 12c | | |
| | /ages, tips, etc. | 19 Local income tax | | 4781.16 | 14 Other | plan | 469.96 | Code D 12c Code DD 12d Code | | 8629.02 |
| | | 19 Local income tax | | 4781.16 | 14 Other | plan | 469.96 | Code D 12c Code DD 12d Code | l Ireasury - Internal | 8629.02 |
| | ages, tips, etc. | 19 Local income tax It DERAL Tax Return. | 20 Localit | 4781.16 y name | 14 Other | plan | 469.96 | Code D 12c Code DD 12d Code | l I Treasury - Internal | 8629.02 |
| a Employe | ages, tips, etc. Wage and Tax Statemen Be Filed With Employee's FE | 19 Local income tax It DERAL Tax Return. b Employer identification number (EIN | 20 Localit | 4781.16 y name 2023 | 14 Other | plan | 469.96 | Code D 12c Code DD 12d Code | | 8629.02 Revenue Servi |
| a Employe | ages, tips, etc. Wage and Tax Statemen Be Filed With Employee's FE | 19 Local income tax It DERAL Tax Return. b Employer Identification number (EIN 72-0542904 | 20 Localit | 4781.16 y name 2023 | 14 Other CTPL | X | 469.96 | Code D 12c Code DD 12d Code Code artment of the T | OMB | 8629.02 |
| a Employe 879-7 c Employe | Wage and Tax Statemen Be Filed With Employee's FE ae's social security number 77-6181 r's name, address, and ZIP co | 19 Local income tax It DERAL Tax Return. b Employer Identification number (EIN 72-0542904 | 20 Localit | 4781.16 y name 2023 | 14 Other | plan X | 469.96 | Code D 12c Code DD 12d Code | OMB | 8629.02 Revenue Servi |
| a Employe 879-7 c Employe Accer | Wage and Tax Statemen Be Filed With Employee's FE ee's social security number 77-6181 r's name, address, and ZIP co | 19 Local income tax It DERAL Tax Return. b Employer Identification number (EIN 72-0542904 | 20 Localit | 4781.16 y name 2023 | 14 Other CTPL | plan X | 469.96 Dep | Code D 12c Code DD 12d Code Code artment of the T | OMB ne tax withheld | 8629.02 Revenue Servi No. 1545-0008 12554.98 |
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| a Employe 879-7 c Employe Accer 500 v 20th Chica | Wage and Tax Statemen Be Filed With Employee's FE se's social security number 77-6181 r's name, address, and ZIP conture LLP W. Madison Street Filoor rigo IL 60661 | tended to the second of the se | 20 Localit | 4781.16 y name 2023 d Control number 007426760301 | 14 Other CTPL 1 Wages, tips, oth | ix X | 469.96 Dep | Code D 12c Code DD 12d Code 12d Code artment of the T 2 Federal incon | OMB ne tax withheld ty tax withheld withheld | 8629.02 Revenue Servi No. 1545-0008 12554.98 |
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| a Employe 879-7 c Employe Accer 500 V 20th Chica Venka VENK 1800 ROCk | Wage and Tax Statemen Be Filed With Employee's FE Be's social security number Reference of the secu | 19 Local income tax It DERAL Tax Return. b Employer identification number (EIN 72-0542904 de Last name Chintala | 20 Localit | 4781.16 y name 2023 d Control number 007426760301 | 14 Other CTPL. 1 Wages, tips, oth 3 Social security to 5 Medicare wages | ix X | 469.96 Dep sation 88599.03 | Code D 12c Code DD 12d Code 12d Code artment of the T 2 Federal incon 4 Social securit 6 Medicare tax | OMB ne tax withheld ty tax withheld withheld | 8629.02 Revenue Servi No. 1545-0008 12554.98 5827.43 |
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