## 2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement 0000101908 TWH UAN5 E S 12162 Employer's name, address, and ZIP code **NORTHEASTERN UNIVERSITY** 360 HUNTINGTON AVENUE 216-110 BOSTON, MA 02115

e/l Employee's name, address, and ZIP code VARDHAN SHAILESH MAHESHWARI 13 LAMBERT ST **ROXBURY, MA 02119-3506** 

9 Local income tax		20 Local	ity name		
200 500000	e income tax 108.76	18 Local	wages, t	ips, etc.	
MA	WTH-10702102-006		16 State wages, tips, etc. 2175.02		
10				3rd party sick pa	
		12d			
00	-	12c			
14 Oth	er	12b			
11 No	equalified plans	12a See in	struction	s for box 12	
9		10 Depe	ndent car	e benefits	
7 Social security tips		8 Alloca	8 Allocated tips		
5 Med	icare wages and tips	6 Medica	are tax wi	thheld	
3 Soc	al security wages	4 Social	4 Social security tax withheld		
	2175.02			222.54	
1 Wag	es, tips, other comp.	2 Federa		tax withheld	
	04-1679980	1	a Employee's SSA number XXX-XX-4940		

d Control number Dept. Corp. Employer use only

os, other como

3 Social security wages

5 Medicare wages and tips

2175.02

The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement, plus any additional compensation or adjustments received after the payroll close.

Your gross pay may not match your box 1 totals due to adjustments made for GTL, 401(k), cafeteria plans, etc...

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

Social Security Number: XXX-XX-4940

2 Federal income tax withheld

4 Social security tax withheld

222.54

VARDHAN SHAILESH MAHESHWARI 13 LAMBERT ST **ROXBURY, MA 02119-3506** 

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222.54

6 Medicare tax withheld

PAGE 1 OF 1

NORTHEASTERN UI 360 HUNTINGTON A BOSTON, MA 02115	NIVERSIT VENUE 2	Y 16-110	
Employer's FED ID numb 04-1679980	er a Emple	oyee's SSA number XXX-XX-4940	
Social security tips	8 Allocated tips		
	10 Dep	endent care benefits	
11 Nonqualified plans	12a See instructions for box 1		
14 Other	12b	1	
	12¢	1	
	12d		
		mp Ret. plan 3rd party sick	
ef Employee's name, addr. VARDHAN SHAILES 13 LAMBERT ST ROXBURY, MA 021	3H MAH 19-3506	ESHWARI	
15 State Employer's state WTH-10702102-0	ID no. 16 St	ate wages, tips, etc.	
17 State income tax 108.76		2175.02 18 Local wages, tips, etc.	
	20 Locality name		

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

Wages, tips, other comp. 2175.02	2 Federal income tax withheld 222.54		
Social security wages	4 Social security tax withheld	3 Social security wages	
Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	
d Control number Dept.	Corp. Employer use only	d Control number De	
0000101908 TWH c Employer's name, address, a	UAN5   E S 12162	0000101908 TWH	
NORTHEASTERN UNI 360 HUNTINGTON AVI BOSTON, MA 02115	VERSITY	C Employer's name, address NORTHEASTERN 360 HUNTINGTON BOSTON, MA 021	
b Employer's FED ID number 04-1679980	XXX-XX-4940	b Employer's FED ID nu 04-1679980	
7 Social security tips	8 Allocated tips	7 Social security tips	
4	10 Dependent care benefits	4	
11 Nonqualified plans	12a	11 Nonqualified plans	
14 Other	12b	14 Other	
	12c	11	
	12d	11	
	13 Stat emp. Ret. plan 3rd party sick pa	y	
e/f Employee's name, address VARDHAN SHAILESH 13 LAMBERT ST ROXBURY, MA 02119	e/f Employee's name, ad VARDHAN SHAILE 13 LAMBERT ST ROXBURY, MA 02		
15 State Employer's state ID n WTH-10702102-006	o. 16 State wages, tips, etc. 2175.02	15 State Employer's state MA WTH-10702102-	
17 State Income tax 108.76	18 Local wages, tips, etc.	17 State Income tax 108.7	
19 Local income tax	20 Locality name	19 Local income tax	
W-2 Wage a	ind Tax 2023	W-2 Wag	

Copy 2 to be filed with employee's State Income Tax Return.

5 Medicare wages and tips		6 Medicare tax withheld			
Control number	Dept.	Corp.	Employer use only		
0000101908 TWH		UAN5	E S 12162		
C Employer's name, a NORTHEASTE 360 HUNTINGT BOSTON, MA	RN UN	IVERSITY	1		
b Employer's FED ID number 04-1679980 7 Social security tips		a Employee's SSA number XXX-XX-4940			
		8 Allocated tips			
9		10 Deper	ndent care benefits		
11 Nonqualified plans		12a			
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		12d			
		13 Statem	P. Ret. place 3rd party sick p		
e/f Employee's name VARDHAN SHA 13 LAMBERT S ROXBURY, MA	AILESH ST	MAHES			
15 State Employer's MA WTH-10702		o 16 State	wages, tips, etc. 2175.02		
	08.76		18 Local wages, tips, etc.		
19 Local income tax		20 Local	lity name		
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