



Employee Reference Copy
W-2 Wage and Tax Statement **2023**
 Copy C for employee's records. OMB No. 1545-0008

d Control number 300584 LOS2/XAW	Dept.	Corp.	Employer use only T
c Employer's name, address, and ZIP code INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082 Batch #01751			
e/f Employee's name, address, and ZIP code GANGIREDDY RAMIREDDY 8401 MEMORIAL LN APT 9303 PLANO TX 75024-2286			
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-1669		
1 Wages, tips, other comp. 17820.18	2 Federal income tax withheld 2132.94		
3 Social security wages 17820.18	4 Social security tax withheld 1104.85		
5 Medicare wages and tips 17820.18	6 Medicare tax withheld 258.39		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C 5.80		
14 Other	12b DD 1193.54		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
15 State TX	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	TX. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	18,380.10	18,380.10	18,380.10	
Plus GTL (C-Box 12)	5.80	5.80	5.80	
Less Other Cafe 125	565.72	565.72	565.72	
Reported W-2 Wages	17,820.18	17,820.18	17,820.18	

2. Employee Name and Address.

GANGIREDDY RAMIREDDY
8401 MEMORIAL LN APT 9303
PLANO TX 75024-2286

© 2023 ADP, Inc.

1 Wages, tips, other comp. 17820.18	2 Federal income tax withheld 2132.94
3 Social security wages 17820.18	4 Social security tax withheld 1104.85
5 Medicare wages and tips 17820.18	6 Medicare tax withheld 258.39
d Control number 300584 LOS2/XAW	Dept. Corp. Employer use only T
c Employer's name, address, and ZIP code INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082	
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-1669
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 5.80
14 Other	12b DD 1193.54
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State TX	Employer's state ID no. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

Federal Filing Copy
W-2 Wage and Tax Statement **2023**
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

1 Wages, tips, other comp. 17820.18	2 Federal income tax withheld 2132.94
3 Social security wages 17820.18	4 Social security tax withheld 1104.85
5 Medicare wages and tips 17820.18	6 Medicare tax withheld 258.39
d Control number 300584 LOS2/XAW	Dept. Corp. Employer use only T
c Employer's name, address, and ZIP code INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082	
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-1669
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 5.80
14 Other	12b DD 1193.54
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State TX	Employer's state ID no. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

TX.State Reference Copy
W-2 Wage and Tax Statement **2023**
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

1 Wages, tips, other comp. 17820.18	2 Federal income tax withheld 2132.94
3 Social security wages 17820.18	4 Social security tax withheld 1104.85
5 Medicare wages and tips 17820.18	6 Medicare tax withheld 258.39
d Control number 300584 LOS2/XAW	Dept. Corp. Employer use only T
c Employer's name, address, and ZIP code INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082	
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-1669
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 5.80
14 Other	12b DD 1193.54
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State TX	Employer's state ID no. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

TX.State Filing Copy
W-2 Wage and Tax Statement **2023**
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008