

Void <input type="checkbox"/>		a Employee's social security number 060-49-2212		OMB No. 1545-0008	
b Employer identification number (EIN) 45-4881344			1 Wages, tips, other compensation 92496.00		2 Federal income tax withheld 15250.20
c Employer's name, address, and ZIP code DL CONSULTING PARTNERS LLC. 2600 K AVE STE 232 PLANO TX 75074			3 Social security wages 92496.00		4 Social security tax withheld 5734.75
			5 Medicare wages and tips 92496.00		6 Medicare tax withheld 1341.19
			7 Social security tips		8 Allocated tips
d Control number			9 Verification code		10 Dependent care benefits
e Employee's first name and initial Raghu		Last name Chukkala		Suff.	11 Nonqualified plans
1129 Meadow Creek Drive Apt 355 Irving TX 75038			13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12a See instructions for box 12
			14 Other		12b
					12c
f Employee's address and ZIP code					12d
15 State Employer's state ID number		16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
					20 Locality name

Form **W-2** Wage and Tax Statement  
Copy D — For Employer

2017

Department of the Treasury—Internal Revenue Service  
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