PAGE 1

Employee Refe	rence Copy		
W-2 Wage ar	nd Tax 2010		
VV-Z Stateme	nt ZUIS OMB No. 1545-0008		
Copy C for employee's records.			
d Control number Dept. 183329 CLI2/CTS SSH269	Corp. Employer use only		
c Employer's name, address, a			
COGNIZANT TE SOLUTIONS US			
211 QUALITY C			
COLLEGE STAT			
	Batch #02453		
e/f Employee's name, address, a	nd ZIP code		
KHADARVALLI SHAI	K		
2042 PEACH ORCHA	RD DR		
APT 115			
FALLS CHURCH VA	22043-2067		
b Employer's FED ID number	a Employee's SSA number		
<u>13-3924155</u>	2 Federal income tax withheld		
1 Wages, tips, other comp. 131031.39			
3 Social security wages	9620.55 4 Social security tax withheld		
127632.20	7913.20		
5 Medicare wages and tips	6 Medicare tax withheld		
127632.20	1850.67		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
AA Noo and Black along	12a See instructions for box 12		
11 Nonqualified plans	C 88.80		
14 Other	12b D 322.75		
756.78 TXREL	12c DD 14509.32		
	13 Stat emp Ret. plan 3rd party sick pay		
15 State Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.		
17 State income tax	18 Local wages, tips, etc.		
6600.34			
19 Local income tax	20 Locality name		

2019 W-2 and EARNINGS SUMMARY



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement and W-4 profile. 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	VA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	140,008.06	140,008.06	140,008.06	138,463.06
Plus GTL (C-Box 12)	88.80	88.80	88.80	88.80
Less Misc. Non Taxable Comp.	N/A	3,721.94	3,721.94	N/A
Less 401(k) (D-Box 12)	322.75	N/A	N/A	322.75
Less Medical FSA	499.92	499.92	499.92	499.92
Less Other Cafe 125	8,242.80	8,242.80	8,242.80	8,242.80
Reported W-2 Wages	131,031.39	127,632.20	127,632.20	129,486.39

2. Employee Current W-4 Profile. To make changes, file a new W-4 with your payroll department.

KHADARVALLI SHAIK 2042 PEACH ORCHARD DR APT 115 FALLS CHURCH VA 22043-2067

Social Security Number:**540-79-7498** Taxable Marital Status: **MARRIED**

Exemptions/Allowances:

FEDERAL: 9 STATE: 5

¤© 2019 ADP, LLC

-	_				
1 Wages, tips, other comp. 131031.39	2 Federal income tax withheld 9620.55	1 Wages, tips, other comp. 131031.39	2 Federal income tax withheld 9620.55	1 Wages, tips, other comp. 131031.39	2 Federal income tax withheld 9620.55
3 Social security wages 127632.20	4 Social security tax withheld 7913.20	3 Social security wages 127632.20	4 Social security tax withheld 7913.20	³ Social security wages 127632.20	4 Social security tax withheld 7913.20
5 Medicare wages and tips 127632.20	6 Medicare tax withheld 1850.67	5 Medicare wages and tips 127632.20	6 Medicare tax withheld 1850.67	5 Medicare wages and tips 127632.20	6 Medicare tax withheld 1850.67
d Control number Dept. 183329 CLI2/CTS SSH269	Corp. Employer use only	d Control number Dept. 183329 CLI2/CTS SSH269	Corp. Employer use only	d Control number Dept. 183329 CLI2/CTS SSH269	Corp. Employer use only
c Employer's name, address, a		c Employer's name, address, a		c Employer's name, address, a	
COGNIZANT TE SOLUTIONS US 211 QUALITY (COLLEGE STA	CHNOLOGY CORPORAT CIR STE 150	COGNIZANT TE SOLUTIONS US 211 QUALITY (COLLEGE STA	ECHNOLOGY S CORPORAT CIR STE 150	COGNIZANT TE SOLUTIONS US 211 QUALITY C COLLEGE STA	CHNOLOGY CORPORAT CIR STE 150
b Employer's FED ID number 13-3924155	a Employee's SSA number 540-79-7498	b Employer's FED ID number 13-3924155	a Employee's SSA number 540-79-7498	b Employer's FED ID number 13-3924155	a Employee's SSA number 540-79-7498
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 88.80	11 Nonqualified plans	^{12a} C 88.80	11 Nonqualified plans	^{12a} C 88.80
14 Other	^{12b} D 322.75	14 Other	^{12b} D 322.75	14 Other	^{12b} D 322.75
756.78 TXREL	^{12c} DD 14509.32	756.78 TXREL	12c	756.78 TXREL	12c
	12d		12d		12d
	13 Stat emp. Ret. plan 3rd party sick pa	У	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay
e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	and ZIP code	e/f Employee's name, address a	nd ZIP code
KHADARVALLI SHAI	κ	KHADARVALLI SHAI	κ	KHADARVALLI SHAI	κ
2042 PEACH ORCHA	ARD DR	2042 PEACH ORCH	ARD DR	2042 PEACH ORCHA	ARD DR
APT 115		APT 115		APT 115	
FALLS CHURCH VA	22043-2067	FALLS CHURCH VA	22043-2067	FALLS CHURCH VA	22043-2067
15 State Employer's state ID no TOTAL STATE	16 State wages, tips, etc.	15 State Employer's state ID no VA 30133924155F00	b. 16 State wages, tips, etc. 1 129486.39	15 State Employer's state ID no VA 30133924155F001	b. 16 State wages, tips, etc. 129486.39
17 State income tax 6600.34	18 Local wages, tips, etc.	17 State income tax 6498.37	18 Local wages, tips, etc.	17 State income tax 6498.37	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fi	ling Copy	VA.State R	eference Copy	VA.State Fil	ing Copy
Wage a Stateme Copy B to be filed with employee's F	nd Tax 2019	W-2 Wage a Statemen Copy 2 to be filed with employee's Stat		W-2 Wage a Stateme Copy 2 to be filed with employee's State	

PAGE 2

CA.State Re	eference Copy
W-2 Wage a Statement	
Statement	
Copy 2 to be filed with employee's State d Control number Dept.	e Income Tax Return.
183329 CLI2/CTS SSH269	
c Employer's name, address, a	
SOLUTIONS US	
211 QUALITY C	CIR STE 150
COLLEGE STAT	FION TX 77845
	Batch #02453
e/f Employee's name, address, a	
KHADARVALLI SHAI	
2042 PEACH ORCHA	ARD DR
APT 115	
FALLS CHURCH VA	
b Employer's FED ID number 13-3924155	a Employee's SSA number 540-79-7498
1 Wages, tips, other comp.	² Federal income tax withheld
131031.39	9620.55
3 Social security wages	4 Social security tax withheld
127632.20	7913.20
5 Medicare wages and tips 127632.20	6 Medicare tax withheld 1850.67
7 Social security tips	8 Allocated tips
	•
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
14 Other	12b 12c
.00 CA SDI	12d
	13 Stat emp Ret. plan 3rd party sick pay
15 State Employer's state ID no	
CA 433-6247 4	1545.00
17 State income tax 101.97	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

2019 W-2 and EARNINGS SUMMARY



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement and W-4 profile. The reverse side includes instructions and other general information.

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

Gross Pay **Reported W-2 Wages**

CA. State Wages, Tips, Etc. Box 16 of W-2 1,545.00

1,545.00

2. Employee Current W-4 Profile. To make changes, file a new W-4 with your payroll department.

KHADARVALLI SHAIK 2042 PEACH ORCHARD DR APT 115 FALLS CHURCH VA 22043-2067

Social Security Number:540-79-7498 Taxable Marital Status: MARRIED Exemptions/Allowances:

FEDERAL: 9 STATE: 10

¤© 2019 ADP, LLC

INTENTIONALLY LEFT BLANK

1 Wages, tips, other comp. 131031.39	2 Federal income tax withheld 9620.55			
3 Social security wages 127632.20	4 Social security tax withheld 7913.20			
5 Medicare wages and tips 127632.20	6 Medicare tax withheld 1850.67			
d Control number Dept.	Corp. Employer use only			
183329 CLI2/CTS SSH269	A			
c Employer's name, address, a	nd ZIP code			
COGNIZANT TE SOLUTIONS US 211 QUALITY C COLLEGE STAT	CORPORAT SIR STE 150			
b Employer's FED ID number 13-3924155	a Employee's SSA number 540-79-7498			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a See instructions for box 12			
14 Other	12b			
.00 CA SDI	12c			
	12d			
	13 Stat emp. Ret. plan 3rd party sick part			
e/f Employee's name, address ar	nd ZIP code			
KHADARVALLI SHAII 2042 PEACH ORCHA APT 115 FALLS CHURCH VA	RD DR			
15 State Employer's state ID no. CA 433-6247 4	.16 State wages, tips, etc. 1545.00			
17 State income tax 101.97	18 Local wages, tips, etc.			
19 Local income tax	20 Locality name			
CA.State Fil	ing Copy			

W-2	Wage	and	Тах	20'	10
	State	ment			1545,0008
Conv 2 to be filed with	employee's	State Inco	meTay	Return	1040-0008

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you ac opy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,000 (\$13,000 if you only have SIMPLE plans; \$22,000

for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2019, your employer may have allowed an additional deferral of up to \$6,000 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A-Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

 ${\rm B-Uncollected}$ Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C-Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E-Elective deferrals under a section 403(b) salary reduction agreement F-Elective deferrals under a section 408(k)(6) salary reduction SEP

G-Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan H-Elective deferrals to a section 501(c)(18)(D) tax-exempt

organization plan. See the Form 1040 instructions for how to deduct. J-Nontaxable sick pay (information only, not included in box 1, 3, or 5) \underline{K} -20% excise tax on excess golden parachute payments. See the

Form 1040 instructions.

 $\ensuremath{\text{L-Substantiated}}$ employee business expense reimbursements (nontaxable)

M-Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

 P-Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)
Q-Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R-Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts. S-Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T – Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.
V – Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.
W – Employer contributions (including amounts the employee elected to contribute using a section 125 (cafetria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).
Y – Deferrals under a section 409A nonqualified deferred compensation plan tar fails to satisfy section 409A. This amount also is included in box.

An only a non-parameter of the section of the section

DD-Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE-Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i) **HH**—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, is in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):

TAX	RETURN
This Form W-2	OTHER W-2'S

Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2019 or if income is earned for services provided while you were an inmate at a penal institution. For 2019 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA)

to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You also may visit the SSA website at *www.SSA.gov.*

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2019 and more than \$8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 instructions and Pub. 505, Tax Withholding and Estimated Tax.