

| | | | |
|--|--------------------------|---------------------------------|-----|
| 1 Wages, tips, other compensation | | 2 Federal Income tax withheld | |
| 78124.97 | | 9693.34 | |
| 3 Social security wages | | 4 Social security tax withheld | |
| 78124.97 | | 4843.75 | |
| 5 Medicare wages and tips | | 6 Medicare tax withheld | |
| 78124.97 | | 1132.81 | |
| a Employee's SSA number | | Employer use only | |
| 747-80-5530 | | | |
| b Employer's FED ID number | | d Control number | |
| 06-1454513 | | 00437795 | |
| c Employer's name, address, and ZIP code | | | |
| Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| | | | |
| 9 Verification code | | 10 Dependent care benefits | |
| | | | |
| 11 Nonqualified plans | | 12a See instructions for box 12 | |
| | | DD 17583.17 | |
| 13 Statutory Employee | Retirement plan | Third-Party Sick pay | 12b |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14 Other CA SDI Tax | | 12c | |
| 585.74 | | | |
| | | 12d | |
| | | | |
| e Employee's first name and initial | | Last name Suff. | |
| Ishaan Motwani | | | |
| 2000 Winward way | | | |
| San Mateo CA 94404 | | | |
| f Employee's address and ZIP code | | | |
| 15 State | Employer's state ID | 18 Local wages, tips, etc | |
| CA | 438-5954-5 | | |
| 16 State wages, tips, etc. | | 19 Local income tax | |
| 62208.49 | | | |
| 17 State income tax | | 20 Locality name | |
| 2976.13 | | | |
| Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2018 Copy C for Employee's records | | | |

| | | | |
|---|--------------------------|---------------------------------|-----|
| 1 Wages, tips, other compensation | | 2 Federal Income tax withheld | |
| 78124.97 | | 9693.34 | |
| 3 Social security wages | | 4 Social security tax withheld | |
| 78124.97 | | 4843.75 | |
| 5 Medicare wages and tips | | 6 Medicare tax withheld | |
| 78124.97 | | 1132.81 | |
| a Employee's SSA number | | Employer use only | |
| 747-80-5530 | | | |
| b Employer's FED ID number | | d Control number | |
| 06-1454513 | | 00437795 | |
| c Employer's name, address, and ZIP code | | | |
| Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| | | | |
| 9 Verification code | | 10 Dependent care benefits | |
| | | | |
| 11 Nonqualified plans | | 12a See instructions for box 12 | |
| | | DD 17583.17 | |
| 13 Statutory Employee | Retirement plan | Third-Party Sick pay | 12b |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14 Other CA SDI Tax | | 12c | |
| 585.74 | | | |
| | | 12d | |
| | | | |
| e Employee's first name and initial | | Last name Suff. | |
| Ishaan Motwani | | | |
| 2000 Winward way | | | |
| San Mateo CA 94404 | | | |
| f Employee's address and ZIP code | | | |
| 15 State | Employer's state ID | 18 Local wages, tips, etc | |
| CA | 438-5954-5 | | |
| 16 State wages, tips, etc. | | 19 Local income tax | |
| 62208.49 | | | |
| 17 State income tax | | 20 Locality name | |
| 2976.13 | | | |
| Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2018 Copy 2 To Be Filed With Employee's STATE Income Tax Return | | | |

| | | | |
|--|--------------------------|---------------------------------|-----|
| 1 Wages, tips, other compensation | | 2 Federal Income tax withheld | |
| 78124.97 | | 9693.34 | |
| 3 Social security wages | | 4 Social security tax withheld | |
| 78124.97 | | 4843.75 | |
| 5 Medicare wages and tips | | 6 Medicare tax withheld | |
| 78124.97 | | 1132.81 | |
| a Employee's SSA number | | Employer use only | |
| 747-80-5530 | | | |
| b Employer's FED ID number | | d Control number | |
| 06-1454513 | | 00437795 | |
| c Employer's name, address, and ZIP code | | | |
| Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| | | | |
| 9 Verification code | | 10 Dependent care benefits | |
| | | | |
| 11 Nonqualified plans | | 12a See instructions for box 12 | |
| | | DD 17583.17 | |
| 13 Statutory Employee | Retirement plan | Third-Party Sick pay | 12b |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14 Other CA SDI Tax | | 12c | |
| 585.74 | | | |
| | | 12d | |
| | | | |
| e Employee's first name and initial | | Last name Suff. | |
| Ishaan Motwani | | | |
| 2000 Winward way | | | |
| San Mateo CA 94404 | | | |
| f Employee's address and ZIP code | | | |
| 15 State | Employer's state ID | 18 Local wages, tips, etc | |
| CA | 438-5954-5 | | |
| 16 State wages, tips, etc. | | 19 Local income tax | |
| 62208.49 | | | |
| 17 State income tax | | 20 Locality name | |
| 2976.13 | | | |
| Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2018 Copy B To Be Filed With Employee's FEDERAL Tax Return | | | |

| | | | |
|---|--------------------------|---------------------------------|-----|
| 1 Wages, tips, other compensation | | 2 Federal Income tax withheld | |
| 78124.97 | | 9693.34 | |
| 3 Social security wages | | 4 Social security tax withheld | |
| 78124.97 | | 4843.75 | |
| 5 Medicare wages and tips | | 6 Medicare tax withheld | |
| 78124.97 | | 1132.81 | |
| a Employee's SSA number | | Employer use only | |
| 747-80-5530 | | | |
| b Employer's FED ID number | | d Control number | |
| 06-1454513 | | 00437795 | |
| c Employer's name, address, and ZIP code | | | |
| Deloitte Consulting LLP 4022 Sells Drive Hermitage TN 37076-2903 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| | | | |
| 9 Verification code | | 10 Dependent care benefits | |
| | | | |
| 11 Nonqualified plans | | 12a See instructions for box 12 | |
| | | DD 17583.17 | |
| 13 Statutory Employee | Retirement plan | Third-Party Sick pay | 12b |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14 Other CA SDI Tax | | 12c | |
| 585.74 | | | |
| | | 12d | |
| | | | |
| e Employee's first name and initial | | Last name Suff. | |
| Ishaan Motwani | | | |
| 2000 Winward way | | | |
| San Mateo CA 94404 | | | |
| f Employee's address and ZIP code | | | |
| 15 State | Employer's state ID | 18 Local wages, tips, etc | |
| CA | 438-5954-5 | | |
| 16 State wages, tips, etc. | | 19 Local income tax | |
| 62208.49 | | | |
| 17 State income tax | | 20 Locality name | |
| 2976.13 | | | |
| Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2018 Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return | | | |