#### Form 1095-A

### Health Insurance Marketplace Statement

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1	M	0	IL
1	V	v	IL

OMB No. 1545-2232

6 Recipient's date of birth

Department of the Treasury Internal Revenue Service

4 Recipient's name

Do not attach to your tax return. Keep for your records. ► Go to www.irs.gov/Form1095A for instructions and the latest information. CORRECTED

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Part I Recipient Information		orio 1 Jaio I mod G. Madan and mary I	
1 Marketplace identifier TX	2 Marketplace-assigned policy number 109921445	3 Policy issuer's name Bright HealthCare	

Srujan Kalam Reddy xxx-xx-3800 7 Recipient's spouse's name 9 Recipient's spouse's date of birth 8 Recipient's spouse's SSN

5 Recipient's SSN

10 Policy start date 12 Street address (including apartment no.) 11 Policy termination date 01/01/2022 1514 Frost creek LN 12/31/2022

13 City or town 15 Country and ZIP or foreign postal code 14 State or province US 77546 Friendswood TX

#### **Covered Individuals**

A. Covered individual name	B. Covered individual SSN	C. Covered individual date of birth	D. Coverage start date	E. Coverage termination da
16 Srujan Kalam Reddy	xxx-xx-3800	and marketing and gently	01/01/2022	12/31/2022
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#### Coverage Information

A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance paymer premium tax credit
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Scanned with CamScanner

### Form W-2 Wage and Tax Statement 2022

#### Copy C, for employee's records

d Control number 0940-P4088952 0000015854 - 000USA  b Employer identification number (EIN) a Employee's social security number 22-3524303 XXX-XX-3800  13 Statutory employee Retirement plan Third-party sick pay  12 See instructions for box 12  C 50.65	LARSEN & TOUBRO INFOTECH LIMIT FORMERLY LARSEN & TOUBRO INFOT 2035 LINCOLN HWY STE 3000 EDISON NJ 08817  e Employee's name, address, and ZIP code  SRUJAN K REDDY 1514 FROST CREEK LN FRIENDSWOOD TX TX 77546	3 Social security wages 3 Social security wages 38050.65 5 Medicare wages and tips	2 Federal income tax withheld 6285.44 4 Social security tax withheld 2359.14 6 Medicare tax withheld 551.73 8 Allocated Tips 11 Nonqualified plans
15 State Employer's state ID number 16 State wages, tips	s, etc.  17 State income tax  18 Local wages,  18 Local wages,  19 Income tax		20 Locality name

# Form W-2 Wage and Tax Statement 2022

### Copy B, to be filed with employee's FEDERAL tax return

Vold c Employer's name, address, and ZIP code	Department of the Treasury - Inte OMB No. 1545-0008	
LARSEN & TOUBRO INFOTECH LIMIT FORMERLY LARSEN & TOUBRO INFOT	1 Wages, tips, other compensation 38050.65	2 Federal income tax withheld 6285.44
2035 LINCOLN HWY STE 3000 EDISON NJ 08817	3 Social security wages 38050.65	4 Social security tax withheld 2359.14
	5 Medicare wages and ups	6 Medicare tax withheld 551.73
	7 Social Security Tips	8 Allocated Tips
1514 FROST CREEK LN FRIENDSWOOD TX TX 77546	10 Dependent care benefits	11 Nonqualified plans
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artay	LARSEN & TOUBRO INFOTECH LIMIT FORMERLY LARSEN & TOUBRO INFOT 2035 LINCOLN HWY STE 3000 EDISON NJ 08817  e Employee's name, address, and ZIP code  SRUJAN K REDDY 1514 FROST CREEK LN FRIENDSWOOD TX TX 77546	LARSEN & TOUBRO INFOTECH LIMIT FORMERLY LARSEN & TOUBRO INFOT 2035 LINCOLN HWY STE 3000 EDISON NJ 08817  e Employee's name, address, and ZIP code  SRUJAN K REDDY 1514 FROST CREEK LN FRIENDSWOOD TX TX 77546  OMB No. 1545-0008  1 Wages, tips, other compensation 38050.65  3 Social security wages 5 Medicare wages and tips 10 Dependent care benefits

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.

## Form W-2 Wage and Tax Statement 2022

Control number	Void X	Employer's name, address, and ZIP code		Department of the Treasury - OMB No. 1545-0008	Internal Revenue Service
Employer identification number (EIN) a Employee's social security nu	umber			1 Wages, tips, other compensation	2 Federal income tax withheld
13 Statutory Retirement Third- sick	-party pay		Security Park - In the	3 Social security wages	4 Social security tax withheld
employée		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
12 See instructions for box 12	established.			7 Social Security Tips	8 Allocated Tips
				10 Dependent care benefits	11 Nonqualified plans
State Employer's state ID number	State wages, tips,	etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
	er Carried and	file a tax return, a negligence penalty or other sanction ma			

# Form W-2 Wage and Tax Statement 2022

Control number	Void X	c Employer's name, address, and ZIP code		rtment of the Treasury - I No. 1545-0008	nternal Revenue Service
Employer identification number (EIN) a Employee's social security number			1 Wag	es, tips, other compensation	2 Federal income tax withheld
Statutory Retirement Third-party sick pay			3 Soc	al security wages	4 Social security tax withheld
employee		e Employee's name, address, and ZIP code	5 Med	dicare wages and tips	6 Medicare tax withheld
See instructions for box 12 14 Other			7 So	cial Security Tips	8 Allocated Tips
			10 De	pendent care benefits	11 Nonqualified plans
State Fmnlover's state ID number 16 State w		s etc. 17 State income tax 18 Lo	al wages, tips, etc.	19 Local income tax	20 Locality name

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

OMB No. 1545-0008			d Control Number	1 Wages, tips, other compensation 2 F	
Control Number 1 V	Wages, tips, other compensation 2 Feder 17707.63	ral income tax withheld 2841.23		17707.63	2841.23 Social security tax withheld
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52-2010575 Employee's social security number 5 M	working maybe and she	are tax withhold 256.76	a Employee's social security number 610-13-3800	5 Medicare wages and tips 17707.63	Medicare tax withheld 256.76
Employer's name, address and ZIP code TEKSYSTEMS, INC. 7437 RACE ROAD HANOVER MD 21076	17707.63	230.70	TERSYSTEMS, INC. 7437 RACE ROAD HANOVER MD 21076		
Social security tips 8 A	Accasted tips 9		7 Social security tips	8 Allocated tips 9	
	Nonqualified plans 12a	See instructions for box 12	10 Dependent care benefits	11 Nonqualified plans	a See instructions for box 1
12c	12d		12b	12c 12	2d
Statutory employee Plan Third-party sick pay	Other		13 Statutory employee Retirement plan Third-party sick pary	y 14 Other	
nployee's name, address and ZIP code RUJAN KALAM REDDY 514 FROST CREEK RIENDSWOOD TX 77546			e Employee's name, address and ZIP of SRUJAN KALAM REDDY 1514 FROST CREEK FRIENDSWOOD TX 77		16 State wages, tips, etc.
2022 15 State Employer's sta	ate I.D. no. 16 Sta	ate wages, tips, etc.	2022	loyer's state 1.0, 110.	
W-2			₩-2	17 State income tax 18	Local wages, tips, etc.
C - For EMPLOYEE'S	ite income tax 18 Local wa	ges, tips, etc.	Wage and Tax Statement Copy B - To Be Filed With		
ORDS (See Notice to loyee on back of Copy B.)			Employee's FEDERAL Tax Return.	19 Local income tax 20	Locality name
tax return, a negligence penalty or	cal income tax 20 Locality n	name	This information is being furnished to the Internal Revenue Service.		
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### 2022 W-2 and EARNINGS SUMMARY

Reference Copy Employee Wage and Tax Statement Copy C for employee's records. Employer use only Corp. d Control number Dept. 000392 RR/MJL Employer's name, address, and ZIP code RAMY INFOTECH INC GREAT AMERICA PKW SUITE 320 SANTA CLARA, CA 95054 Batch #91470 e/f Employee's name, address, and ZIP code SRUJAN K REDDY 1514 FROST CREEK FRIENDSWOODS, TX 77546 Employer's FED ID number a Employee's SSA number 27-3289460 XXX-XX-3800 Wages, tips, other comp. 2 Federal income tax withheld 875.74 6720.00 Social security wages Social security tax withheld 6720.00 416.64 5 Medicare wages and tips 6 Medicare tax withheld 6720.00 97.44 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other

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

Gross Pay Reported W-2 Wages 6,720.00 6,720.00

Federal income tax withheld

875.74

6,720.00 6,720.00

6,720.00 6,720.00

Wages, tips, other comp.

6720.00

2. Employee Name and Address.

#### SRUJAN K REDDY 1514 FROST CREEK LN FRIENDSWOODS, TX 77546

O 2022 ADP, Inc.

Wages, tips, other comp.

6720.00

Wages, tips, other co	omp. 20.00	2 Federa	I income ta	x withheld 875.74
Social security wage 672	4 Social security tax withheld 416.64			
Medicare wages and 672	6 Medicare tax withheld 97.44		97.44	
Control number 00392 RR/MJL	Dept.	Corp.	Employer	use only
RAMY INFO	OTECH		e PKW	

12c

12d

15 State Employer's state ID no. 16 State wages, tips, etc.

17 State income tax

19 Local income tax

13 Stat emp Ret. plan 3rd party sick pay

18 Local wages, tips, etc.

20 Locality name

SUITE 320 SANTA CLARA, CA 95054

Employer's FED ID number 27-3289460	a Employee's SSA number XXX-XX-3800
Social security tips	8 Allocated tips
	10 Dependent care benefits
Nonqualified plans	12a See instructions for box 12
Other	12b
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
Employee's name, address a	nd ZIP code

4 FROST CREEK LN IENDSWOODS, TX 77546

State	Employer's state ID no.	16 State wages, tips, etc.
State	income tax	18 Local wages, tips, etc.
ocal	income tax	20 Locality name

Federal Filing Copy Wage and Tax 2022 Statement B to be filed with employee's Federal Income Tax Return.

3 Social security wages 6720.00	4 Social security tax withheld 416.64	
5 Medicare wages and tips 6720.00	6 Medicare tax withheld 97.44	
d Control number Dept. 000392 RR/MJL	Corp. Employer use only	
RAMY INFOTECT 5201 GREAT A SUITE 320 SANTA CLARA,	H INC MERICA PKW	
Employer's FED ID number 27-3289460	a Employee's SSA number XXX-XX-3800	
7 Social security tips	8 Allocated tips	
g	10 Dependent care benefits	
11 Nonqualified plans	12a	
14 Other	12b	
	12c	
	12d	
	13 Stat emp. Ret. plan 3rd party sick pa	
SRUJAN K REDDY 1514 FROST CREEK FRIENDSWOODS, TX	LN	
5 State Employer's state ID no	o. 16 State wages, tips, etc.	
7 State income tax	18 Local wages, tips, etc.	
9 Local income tax	20 Locality name	
State Ref Wage a Statement	ont OMB No. 1545-0008	

4 Social security tax withheld 416.64	
6 Medicare tax withheld 97.44	
. Employer use only	
ode	
PKW 95054	
ployee's SSA number XXX-XX-3800	
8 Allocated tips	
pendent care benefits	
at emp. Ret. plan 3rd party sle	
code	

TX 77546

18 Local wages, tips, etc.

20 Locality name

or Local Reference Copy

Wage and Tax

Statement

Copy 2 to be filed with employee's City or Local Income Tax Return.

15 State Employer's state ID no. 16 State wages, tips, etc.

2 Federal income tax withheld

875.74

FRIENDSWOODS,

17 State Income tax

19 Local income tax