

To the right is an explanation of your W-2 wages. Please note that the Gross amount may include adjustments. 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 Copy C—For EMPLOYEE'S RECORDS				Federal Box 1 Soc. Sec. Box 3 & 7 Medicare Box 5			
				Gross Wages	152398.28	152398.28	152398.28
				Txbl Benefits			
				Group Term Life	94.68	94.68	94.68
				Adoption			
				Deferred Comp	(4571.98)		
				Section 125	(2100.96)	(2100.96)	(2100.96)
				Other Pretax/Wage Limit		(150392.00)	(150392.00)
				W-2 Wages	145820.02		
D. CONTROL NUMBER		2022	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION	2. FEDERAL INCOME TAX WITHHELD		
000096979501				145820.02	24891.37		
B. EMPLOYER IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL SECURITY NUMBER			3. SOCIAL SECURITY WAGES	4. SOCIAL SECURITY TAX WITHHELD		
94-3326476	690-97-5268						
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE				5. MEDICARE WAGES AND TIPS	6. MEDICARE TAX WITHHELD		
Exlservice.Com, LLC 10 Exchange Place Ste 2200 Jersey City NJ 07302				7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS		
				9.	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL				11. NONQUALIFIED PLANS		12.a-d See instructions for box 12	
Abhiteja		LAST NAME		Achanta		C 94.68	
3213 Vine St				14. OTHER		D 4571.98	
Apt 3						DD 7284.48	
Cincinnati OH 45220							
USA							
F. EMPLOYEE'S ADDRESS AND ZIP CODE						13. STATUTORY <input type="checkbox"/> EMPLOYEE RETIREMENT <input checked="" type="checkbox"/> PLAN THIRD-PARTY <input type="checkbox"/> SICK PAY	
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	
OH	52-723951 1	145820.02	4872.72	150392.00	2707.04	NRes - CincCityW/H	

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