Mage a	eference Copy and Tax 2022
State	ment OMB No. 1545-0008
Copy C for employee's records. I Control number Dept. DOO 197 RG/H9 I	Corp. Employer use only
Employer's name, address, NEW ENGLAND ASSOCIATES IN 15 NEW ENGLA BURLINGTON, M	IT NC AND EXECUTIVE PARK IA 01803
	Batch #99768
708 N HILLCREST DEFORT COLLINS, CO	80521
27-1953716 Wages, tips, other comp. 45240.66	2 Federal income tax withheld 5781 . 47
Social security wages	4 Social security tax withheld
Medicare wages and tips	6 Medicare tax withheld
Social security tips	8 Allocated tips
	10 Dependent care benefits
	12a See instructions for box 12
1 Nonqualified plans	
1 Nonqualified plans 4 Other	12a See instructions for Box 12 12b 1 12c 1 12d 1 13 Statemp Ret. plan 3rd party sick pa

18 Local wages, tips, etc.

17 State income tax

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 CO. State Wages, Tips, Etc. Box 16 of W-2 **Gross Pay** 47,714.11 47,714.11 47,714.11 47,714.11 Less Other Cafe 125 2,473.45 2,473.45 N/A N/A Reported W-2 Wages 0.00 45,240.66 0.00 45,240.66

2. Employee Name and Address.

ROHIT GORLE 708 N HILLCREST DR FORT COLLINS, CO 80521

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1 Wages, tips, other co 4524	omp. 0.66	2 Federal income tax withheld 5781 .47				
3 Social security wage	Social security wages		4 Social security tax withheld			
5 Medicare wages and	Medicare wages and tips		6 Medicare tax withheld			
d Control number 000197 RG/H91	Dept	Corp.	Employer use only	1		
o Employer's name, a NEW ENGI ASSOCIAT 15 NEW E BURLINGT(LAND ES IN	IT IC AND EXI	ECUTIVE PARK			
b Employer's FED ID n 27-195371		Mary Town	yee's SSA number XXX-XX-6472	1		
7 Social security tips		8 Allocat	ted tips	╢		
9		10 Depend	dent care benefits	Ш		
11 Nonqualified plans		12a See in	structions for box 12	11		
14 Other	100	12b		111		
		12c][[
hi -		12d		411		
		13 Stat emp.	Ret plan 3rd party sick pay			
e/I Employee's name, at ROHIT GORLE 708 N HILLCRE FORT COLLINS	ST C	R		OLD AND DETACH HERE		
15 State Employer's st CO 27550185	ate ID no	16 State w	vages, tips, etc. 45240.66	DETAC		
	2.31	18 Local	wages, tips, etc.	LD AND		
19 Local income tax		20 Localit	y name	5		
W-2 W	age a	iling Co and Tax ment ederal Income	2022			

1 Wages, tips, other comp.	2 Federal income tax withheld	1 Wages, tips, other comp.	. 2 Federal Income tax withheld
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3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept. 000197 RG/H91	Corp. Employer use only	d Control number De 000197 RG/H91	pt. Corp. Employer use only 10
c Employer's name, address, a NEW ENGLAND ASSOCIATES IN 15 NEW ENGLA BURLINGTON, M	IT C ND EXECUTIVE PARK	c Employer's name, address NEW ENGLAN ASSOCIATES 15 NEW ENGL BURLINGTON,	D IT INC AND EXECUTIVE PARK
b Employer's FED ID number 27-1953716	a Employee's SSA number XXX - XX - 6472	b Employer's FED ID number 27-1953716	a Employee's SSA number XXX-XX-6472
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
g	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a	11 Nonqualified plans	12a
14 Other	12b	14 Other	12b
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	12d 13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay
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e/I Employee's name, address a ROHIT GORLE 708 N HILLCREST D FORT COLLINS, CO	PR .	e/I Employee's name, address ROHIT GORLE 708 N HILLCREST FORT COLLINS, CO	DR
15 State Employer's state ID no	16 State wages, tips, etc. 45240.66	15 State Employer's state ID CO 27550185	no. 16 State wages, tips, etc. 45240 . 66
17 State income tax	18 Local wages, tips, etc.	17 State Income tax	18 Local wages, tips, etc.
1952.31 19 Local income tax	20 Locality name	1952.31 19 Local Income tax	20 Locality name
W-2 Wage a Statem Copy 2 to be filed with employee's Stat	- LULL	W-2 Wage	Filing Copy and Tax 2022 ement OMB No. 1545-0008 State Income Tax Return.

	OPY 2 - To Be Filed With 18752.		.00		45.36	
Employe	s's State, City, or Local ax Return	3 Social secu		4 Social security tax withhold		
CONTRACTOR OF THE PARTY OF THE	Employee's social security number 5 Medicare with 091-73-6472		ages and tips 6 Medi		icare tax withheld	
NETLO 44320	oname, address and ZIP code OGIC SOLUTION PREMIER PLZ S	SINC				
d Control Nur	HBURN VA 20147 Tol Number Department		Corporation		Employer Use Only	
ROHIT	GORLE					
316 158	GORLE BTH PL SE /UE WA 98008	9		12a		
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COPY 2 - To Be Filed W	COPY 2 - To Be Filed With 18752.0		Other compensation	2 Federal 2445	income tax withheld		
Employee's State, City, or I Income Tax Return	Local	3 Social securit	y wages	4 Social s	ecurity tax withheld		
a Employee's social security number 5 Medicard		5 Medicare was	icare wages and tips		6 Medicare tax withheld		
e Employer's name, address and NETLOGIC SOLU 44320 PREMIER F	TION:	SINC					
ASHBURN VA 20147 Control Number Department		nent	Corporation		Employer Use Only		
e Employee's name	Editoria.		Garage Barantas		A CONTRACTOR OF		
ROHIT GORLE 316 158TH PL SE BELLEVUE WA 98	8008	9		12a			
316 158TH PL SE BELLEVUE WA 98 If Employee's address and ZIP Coc	de			12a 8			
316 158TH PL SE	de	9 10 Dependent of	care benefits	C	\$ \$		
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316 158TH PL SE BELLEVUE WA 98 I Employee's address and ZIP Coc b Employer Identification number (80-0702078 7 Social security tips	de			12b	 \$		
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316 158TH PL SE BELLEVUE WA 98 I Employee's address and ZIP Coo b Employer Identification number (80-0702078 7 Social security tips 8 Allocated tips 13 Statutory Paper Body employee Cooper Body Employee Cooper Body	(EIN)	11 Nonqualified 14 Other		12b 02 12c 02 12c 02 12d 02 12a	\$ \$ \$		
316 158TH PL SE BELLEVUE WA 98 # Employee's address and ZIP Coc b Employer identification number (80-0702078 7 Social security tips ## Allocated tips ## Allocated tips ## Allocated tips ## Employee's state ## Employer's state ## Em	(EIN)	11 Nonqualified 14 Other	i plans	12c 12d 22 12e 12e 12e 15ps, etc.	\$ \$ \$		
316 158TH PL SE BELLEVUE WA 98 f Employee's address and ZIP Cod b Employer identification number (80-0702078 7 Social security the 8 Allocated tips 13 Statutory Patrimeter Patrimetric Patrimetri	(EIN)	11 Nonqualified 14 Other	plans 16 State wages,	12c 12d 22 12e 12e 12e 15ps, etc.	\$ \$ \$ 17 State income tax		

1 Wages, tips, other compe 2 Federal income tax withheld COPY B - To Be Filed With Employers FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service 18752.00 2445.36 3 Social security wages 4 Social security tax withheld 091-73-6472 c Employer's name, address and ZIP code NETLOGIC SOLUTIONS INC 44320 PREMIER PLZ STE 210 ASHBURN VA 20147 Employer Use Only d Control Number Corporation Department e Employee's name ROHIT GORLE 316 158TH PL SE BELLEVUE WA 98008 ,\$ f Employee's address and ZIP Code b Employer identification number (EIN) 10 Dependent care benefits ,\$ 80-0702078 7 Social security tips 11 Nonqualified plans 12c Allocated tips 14 Other ,\$ 12e ñ ,\$ 16 State wages, tips, etc. 17 State income tax 19 Local income tax 20 Locality name

Fam.W-2 Wage and Tax Statement 2022 Department of the Treasury - Internal Revenue Service

COPY C - For EMPLOYEE'S	A Company of the Control of the Cont	1 Wages, tips, other compensation 18752.00 3 Social security wages		2 Federal income tax withheld 2445.36		
RECORDS (See Notice to Employee Below)				4 Social security tax withheld		
a Employee's social security number 091-73-6472	5 Medicare wages and tips		6 Medicare tax withheld			
c Employer's name, address and ZIP of NETLOGIC SOLUTION 44320 PREMIER PLZ ASHBURN VA 20147	NS INC					
	artment	Corporation	And Discouling the	Employer Use Only		
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316 158TH PL SE BELLEVUE WA 9800			12a 000 00	,\$		
316 158TH PL SE BELLEVUE WA 9800 f Employee's address and ZIP Code		nt care benefits	12a 02 12b 02	\$ \$		
316 158TH PL SE BELLEVUE WA 9800 f Employee's address and ZIP Code b Employer identification number (EIN						
316 158TH PL SE BELLEVUE WA 980(f Employee's address and ZIP Code b Employer Identification number (EIN 80-0702078	9 10 Depende		12b	,\$		
316 158TH PL SE BELLEVUE WA 9800 1 Employee's address and ZIP Code b Employer identification number (EIN 80-0702078 7 Social security tips 8 Allocated tips	9 10 Depende 11 Nonqualif		12b 00 12c 00 00	\$ \$		
316 158TH PL SE BELLEVUE WA 9800 f Employer's address and ZIP Code b Employer Identification number (EIP 80-0702078 7 Social security tips B Alocated tips 13 Statuty Petroment station pain station	9 10 Depende 11 Nonqualit 14 Other		12c 02 12c 02 12d	\$ \$		

Form W-2 Wage and Tax Statement 2022 Department of the Treasury - Internal Revenue Service

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.

2022 W-2 and EARNINGS SUMMARY

Employee Reference Copy

2 Wage and Tax
20 Statement Copy C for employee's records.

Dept. Employer use only 5107 039033 L0S2/JTU 739100 Employer's name, address, and ZIP code 602-619-95

AMAZON WEB SERVICES INC PO BOX 80726 SEATTLE WA 98108

Batch #02721

e/i Employee's name, address, and ZIP code ROHIT GORLE 316 158TH PL SE BELLEVUE WA 98008

b Employer's FED ID number nployee's SSA number XXX-XX-6472 20-4938068 Wages, tips, other comp. 59762.77 11910.14 59762.77 3705.29 59762.77 866.56 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 37.41 2052.57 12b DD

12d | 13 Stat emp | Ret. plan 3rd party sick po 15 State Employer's state ID no. 16 State wages, tips, etc. WA 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

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	59,799.36	59,799.36	59,799.36
Plus GTL (C-Box 12)	37.41	37.41	37.41
Less Other Cafe 125	74.00	74.00	74.00
Reported W-2 Wages	59,762.77	59,762.77	59,762.77

Note - Fringe benefits include: Other \$7,000.00

2. Employee Name and Address.

ROHIT GORLE 316 158TH PL SE BELLEVUE WA 98008

O 2022 ADP, Inc.

Wages, tips, other comp. 59762.77		2 Federal income tax withheld 11910.14			
Social security wages 59762.77	4 Social	4 Social security tax withheld 3705.29			
Medicare wages and tips 59762.77		6 Medicare tax withheld 866.56			
Control number Dept. 039033 LOS2/JTU 73910	Fig. 50 long at 1 and	Employer use only A 5107			
Employer's name, address, AMAZON WEB PO BOX 80720 SEATTLE WA	8 SERVI 6 98108	CES INC			
b Employer's FED ID number 20-4938068		yee's SSA number XXX-XX-6472			
7 Social security tips	8 Alloca	ted tips			
9	10 Depend	dent care benefits			
11 Nonqualified plans	12a See ir C	nstructions for box 12 37.41			
14 Other	12b DD	2052.57			
	12c				
	12d				
	13 Stat emp	Ret. plan 3rd party sick pay			
e/I Employee's name, address ROHIT GORLE 316 158TH PL SE BELLEVUE WA 980		•			
15 State Employer's state ID n	o. 16 State v	wages, tips, etc.			
17 State Income tax	18 Local	wages, tips, etc.			
19 Local income tax	20 Localit	ly name			
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3 Social security wages 59762.77	4 Social security tax withheld 3705.29			
5 Medicare wages and tips 59762.77	6 Medicare tax withheld 866.56			
d Control number Dept. 039033 LOS2/JTU 739100	Corp. Employer use only A 5107			
AMAZON WEB PO BOX 80726 SEATTLE WA 9				
b Employer's FED ID number 20-4938068	a Employee's SSA number XXX-XX-6472			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a C 37.41			
14 Other	^{12b} DD 2052.57			
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	13 Stat emp. Ret. plan 3rd party sick pa			
e/I Employee's name, address a ROHIT GORLE 316 158TH PL SE BELLEVUE WA 9800	8			
15 State Employer's state ID no	Page 1 Control of the			
17 State income tax	18 Local wages, tips, etc.			
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3 Social security wages 59762.7						
5 Medicare wages and tips 59762.7		edicare	tax with	held 866.56		
d Control number D 039033 L0S2/JTU 739	A COLUMN TO SERVICE AND ADDRESS OF THE PARTY	orp.		er use on) 5107		
c Employer's name, addres AMAZON WE PO BOX 807 SEATTLE WA	B SER	VICE				
b Employer's FED ID numb 20-4938068		XXX	s SSA n K-XX-			
7 Social security tips	8 Alle	ocated t	ipa	to-A reson		
)	10 Dep	10 Dependent care benefits				
11 Nonqualified plans	12a	12a Cı 37.41				
14 Other	12b D	Dı	20	52.57		
	12c					
	12d	2122				
	13 Stat	emp. Re	t. plan 3rd	party sick pa		
e/I Employee's name, eddres ROHIT GORLE 316 158TH PL SE BELLEVUE WA 98	008					
15 State Employer's state ID						
17 State income tax	18 Loc	18 Local wages, tips, etc.				
19 Local income tax	20 Loc	ality na	me			
	and T	ax	20	22 545-0008		