

Employer-Provided Health Insurance Offer and Coverage

Do not attach to your tax return. Keep for your records.

Go to www.irs.gov/Form1095C for instructions and the latest information.

VOID
 CORRECTED

2022

Part I Employee

Applicable Large Employer Member (Employer)

1 Name of employee (first name, middle initial, last name) SOWJANYA DUDIPALLA		2 Social security number (SSN) XXX-XX-5981	7 Name of employer ABERCROMBIE & FITCH MANAGEMENT CO.		8 Employer identification number (EIN) 31-1228829
3 Street address (including apartment no.) 501 RITTENHOUSE SQ			9 Street address (including room or suite no.) 6301 FITCH PATH		10 Contact telephone number 8553144222
4 City or town MECHANICSBURG	5 State or province PA	6 Country and ZIP or foreign postal code US 17050	11 City or town NEW ALBANY	12 State or province OH	13 Country and ZIP or foreign postal code US 43054

Part II Employee Offer of Coverage

Employee's Age on January 1:

Plan Start Month (enter 2-digit number): 01

	All 12 Months	Employee's Age on January 1:												
		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	
14 Offer of Coverage (enter required code)		1H	1H	1E	1E	1E	1E	1E	1E	1E	1E	1E	1E	1E
15 Employee Required Contribution (see instructions)	\$	\$	\$	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13	\$ 103.13
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)		2D	2D	2C	2C	2C	2C	2C	2C	2C	2C	2C	2C	2C
17 ZIP Code														

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 60705M

Form 1095-C (2022)

Part III Covered Individuals

If Employer provided self-insured coverage, check the box and enter the information for each individual enrolled in coverage, including the employee.

	(a) Name of covered individual(s) First name, middle initial, last name	(b) SSN or other TIN	(c) DOB (if SSN or other TIN is not available)	(d) Covered all 12 months	(e) Months of coverage												
					Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	
18	SOWJANYA DUDIPALLA	XXX-XX-5981				X	X	X	X	X	X	X	X	X	X	X	X
19	YESHWIKA CHINTHANIPPU		02-25-2022			X	X	X	X	X	X	X	X	X	X	X	X
20	RAJESH CHINTHANIPPU	XXX-XX-1283				X	X	X	X	X	X	X	X	X	X	X	X
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