

<b>a</b> Employee's SSN 893-26-0837		<b>b</b> Employer identification number (EIN) 42-1631761			OMB No. 1545-0008	
<b>c</b> Employer's name, address, and ZIP code NATSOFT CORPORATION  27 WORLDS FAIR DRIVE  SOMERSET NJ 08873		<b>1</b> Wgs, tips, other compn 168377.52	<b>2</b> Fed inc tax withheld 20709.00	<b>3</b> Social security wages 147000.00	Form <b>W-2</b> <b>Wage and Tax Statement</b> <b>2022</b>  Copy B To Be Filed with Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service.	
		<b>4</b> SS tax withheld 9114.00	<b>5</b> Medicare wages & tips 168377.52	<b>6</b> Medicare tax withheld 2441.47		
		<b>7</b> Social security tips	<b>8</b> Allocated tips	<b>9</b>		
<b>d</b> Control number		<b>10</b> Depdnt care benefits	<b>11</b> Nonqualified plans	<b>12a</b>		
<b>e</b> Employee's name, address, and ZIP code MOHAN KRISHNA CHADRAM 1480 US HIGHWAY 46 APT 152B PARSIPPANY NJ 07054		<b>13</b> Statutory employee <input type="checkbox"/>		<b>14</b> Other NJ-SDI 212.66	<b>12b</b>	
		Retirement plan <input type="checkbox"/>		NJ-SUI 152.23	<b>12c</b>	
		Third-party sick pay <input type="checkbox"/>		NJ-WFD 16.72	<b>12d</b>	
<b>15</b> State NJ	Employer's state ID number 421-631-761/000	<b>16</b> State wages, tips, etc 174333.36	<b>17</b> State income tax 9110.00	<b>18</b> Local wages, tips, etc	<b>19</b> Local income tax	<b>20</b> Locality name

REV 12/09/22 QBDT

Department of the Treasury — IRS

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<b>c</b> Employer's name, address, and ZIP code NATSOFT CORPORATION  27 WORLDS FAIR DRIVE  SOMERSET NJ 08873		<b>1</b> Wgs, tips, other compn 168377.52	<b>2</b> Fed inc tax withheld 20709.00	<b>3</b> Social security wages 147000.00	Form <b>W-2</b> <b>Wage and Tax Statement</b> <b>2022</b>  Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.	
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<b>15</b> State NJ	Employer's state ID No. 421-631-761/000	<b>16</b> State wages, tips, etc 174333.36	<b>17</b> State income tax 9110.00	<b>18</b> Local wages, tips, etc	<b>19</b> Local income tax	<b>20</b> Locality name

REV 12/09/22 QBDT

<b>a</b> Employee's SSN 893-26-0837		<b>b</b> Employer identification number (EIN) 42-1631761			OMB No. 1545-0008	
<b>c</b> Employer's name, address, and ZIP code NATSOFT CORPORATION  27 WORLDS FAIR DRIVE  SOMERSET NJ 08873		This information is being furnished to the IRS. 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.				
		<b>1</b> Wgs, tips, other compn 168377.52	<b>2</b> Fed inc tax withheld 20709.00	<b>3</b> Social security wages 147000.00	Form <b>W-2</b> <b>Wage and Tax Statement</b> <b>2022</b>  Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee.)	
		<b>4</b> SS tax withheld 9114.00	<b>5</b> Medicare wages & tips 168377.52	<b>6</b> Medicare tax withheld 2441.47		
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REV 12/09/22 QBDT



Employee Reference Copy <b>W-2</b> Wage and Tax Statement Copy C for employee's records.		2022 OMB No. 1545-0008	
d Control number 101005	Dept. DALL/1LG	Corp. 000004	Employer use only T
c Employer's name, address, and ZIP code <b>XTGLOBAL INC 2701 DALLAS PARKWAY SUIT PLANO TX 75093</b>  <b>Batch #03060</b>			
e/f Employee's name, address, and ZIP code <b>YOUVA SREE BODDETI 1480 US HIGHWAY 46, APT #152B PARSIPPANY NJ 07054</b>			
b Employer's FED ID number 56-2076959	a Employee's SSA number XXX-XX-6954		
1 Wages, tips, other comp. 10912.00	2 Federal income tax withheld 440.68		
3 Social security wages 10912.00	4 Social security tax withheld 676.54		
5 Medicare wages and tips 10912.00	6 Medicare tax withheld 158.22		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other	12b		
	12c		
	12d		
	13 Stat emp	Ret. plan	3rd party sick pay
15 State TX	Employer's state ID no.	16 State wages, tips, etc.	
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	TX. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	10,912.00	10,912.00	10,912.00	
Reported W-2 Wages	10,912.00	10,912.00	10,912.00	

2. Employee Name and Address.

**YOUVA SREE BODDETI  
1480 US HIGHWAY 46, APT #152B  
PARSIPPANY NJ 07054**

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	12c		
	12d		
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e/f Employee's name, address and ZIP code <b>YOUVA SREE BODDETI 1480 US HIGHWAY 46, APT #152B PARSIPPANY NJ 07054</b>			
15 State TX	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		
Federal Filing Copy <b>W-2</b> Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.		TX.State Reference Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.	

1 Wages, tips, other comp. 10912.00	2 Federal income tax withheld 440.68		
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TX.State Filing Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.		TX.State Filing Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.	

## Instructions for Employee

**Box 1.** Enter this amount on the wages line of your tax return.

**Box 2.** Enter this amount on the federal income tax withheld line of your tax return.

**Box 5.** You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

**Box 6.** This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

**Box 8.** This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

**Box 10.** This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

**Box 11.** This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

**Box 12.** The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

**Note:** If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

**A**—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**B**—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**C**—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

**D**—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

**E**—Elective deferrals under a section 403(b) salary reduction agreement

**F**—Elective deferrals under a section 408(k)(6) salary reduction SEP

**G**—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

**H**—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

**J**—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

**K**—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

**L**—Substantiated employee business expense reimbursements (nontaxable)

**M**—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

**N**—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

**P**—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

**Q**—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

**R**—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

**S**—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

**T**—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

**V**—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

**W**—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

**Y**—Deferrals under a section 409A nonqualified deferred compensation plan

**Z**—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

**AA**—Designated Roth contributions under a section 401(k) plan

**BB**—Designated Roth contributions under a section 403(b) plan

**DD**—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**

**EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

**FF**—Permitted benefits under a qualified small employer health reimbursement arrangement

**GG**—Income from qualified equity grants under section 83(i)

**HH**—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

**Box 13.** If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

**Box 14.** Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

**Note:** Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

**NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.**

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.

### IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):

<b>TAX RETURN</b>	
THIS FORM W-2	OTHER W-2'S

## Notice to Employee

**Do you have to file?** Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

**Earned income credit (EIC).** You may be able to take the EIC for 2022 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2022 or if income is earned for services provided while you were an inmate at a penal institution. For 2022 income limits and more information, visit [www.irs.gov/EITC](http://www.irs.gov/EITC). See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

**Employee's social security number (SSN).** For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

**Clergy and religious workers.** If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

**Corrections.** If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at [www.SSA.gov](http://www.SSA.gov).

**Cost of employer-sponsored health coverage (if such cost is provided by the employer).** The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

**Credit for excess taxes.** If you had more than one employer in 2022 and more than \$9,114 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

To the right is an explanation of your W-2 wages. Please note that the Gross amount may include adjustments.				Federal Box 1		Soc. Sec. Box 3 & 7		Medicare Box 5				
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.				Gross Wages		59520.00		59520.00		59520.00		
Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS				Txbl Benefits								
				Group Term Life								
				Adoption								
				Deferred Comp		(1728.00)						
				Section 125								
				Other Pretax/Wage Limit								
				W-2 Wages		57792.00		59520.00		59520.00		
D. CONTROL NUMBER 000209886201		2022		OMB NO. 1545-0008		1. WAGES, TIPS, OTHER COMPENSATION 57792.00		2. FEDERAL INCOME TAX WITHHELD 8658.32				
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 13-3789932		A. EMPLOYEE'S SOCIAL SECURITY NUMBER 774-42-6954				3. SOCIAL SECURITY WAGES 59520.00		4. SOCIAL SECURITY TAX WITHHELD 3690.24				
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Motion Recruitment Partners LLC 501 Boylston St Ste 3103 Boston MA 02116						5. MEDICARE WAGES AND TIPS 59520.00		6. MEDICARE TAX WITHHELD 863.04				
						7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS				
						9.		10. DEPENDENT CARE BENEFITS				
E. EMPLOYEE'S FIRST NAME AND INITIAL Youva Sree			LAST NAME Boddeti			SUFF.			11. NONQUALIFIED PLANS		12.a-d See instructions for box 12 D 1728.00	
1480 US Highway 46 Apt #152B Parisippany NJ 07054 USA						14. OTHER NJ DI 83.33 NJ FLI 83.33 NJUI WF SW 169.14						
F. EMPLOYEE'S ADDRESS AND ZIP CODE						13. STATUTORY <input type="checkbox"/> RETIREMENT <input checked="" type="checkbox"/> THIRDPARTY <input type="checkbox"/> EMPLOYEE PLAN SICK PAY						
15. STATE NJ		EMPLOYER'S STATE ID NUMBER 133-789-932/000		16. STATE WAGES, TIPS, ETC. 57792.00		17. STATE INCOME TAX 2715.56		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX		20. LOCALITY NAME

D. CONTROL NUMBER 000209886201		2022		OMB NO. 1545-0008		1. WAGES, TIPS, OTHER COMPENSATION 57792.00		2. FEDERAL INCOME TAX WITHHELD 8658.32				
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F. EMPLOYEE'S ADDRESS AND ZIP CODE						13. STATUTORY <input type="checkbox"/> RETIREMENT <input checked="" type="checkbox"/> THIRDPARTY <input type="checkbox"/> EMPLOYEE PLAN SICK PAY						
15. STATE NJ		EMPLOYER'S STATE ID NUMBER 133-789-932/000		16. STATE WAGES, TIPS, ETC. 57792.00		17. STATE INCOME TAX 2715.56		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX		20. LOCALITY NAME

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return 2022 Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 000209886201		2022		OMB NO. 1545-0008		1. WAGES, TIPS, OTHER COMPENSATION 57792.00		2. FEDERAL INCOME TAX WITHHELD 8658.32				
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						7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS				
						9.		10. DEPENDENT CARE BENEFITS				
E. EMPLOYEE'S FIRST NAME AND INITIAL Youva Sree			LAST NAME Boddeti			SUFF.			11. NONQUALIFIED PLANS		12.a-d D 1728.00	
1480 US Highway 46 Apt #152B Parisippany NJ 07054 USA						14. OTHER NJ DI 83.33 NJ FLI 83.33 NJUI WF SW 169.14						
F. EMPLOYEE'S ADDRESS AND ZIP CODE						13. STATUTORY <input type="checkbox"/> RETIREMENT <input checked="" type="checkbox"/> THIRDPARTY <input type="checkbox"/> EMPLOYEE PLAN SICK PAY						
15. STATE NJ		EMPLOYER'S STATE ID NUMBER 133-789-932/000		16. STATE WAGES, TIPS, ETC. 57792.00		17. STATE INCOME TAX 2715.56		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX		20. LOCALITY NAME

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return 2022 Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER		2022		OMB NO. 1545-0008		1. WAGES, TIPS, OTHER COMPENSATION		2. FEDERAL INCOME TAX WITHHELD			
-------------------	--	------	--	-------------------	--	------------------------------------	--	--------------------------------	--	--	--

000209886201		2022		57792.00		8658.32	
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 13-3789932		A. EMPLOYEE'S SOCIAL SECURITY NUMBER 774-42-6954		3. SOCIAL SECURITY WAGES 59520.00		4. SOCIAL SECURITY TAX WITHHELD 3690.24	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Motion Recruitment Partners LLC 501 Boylston St Ste 3103 Boston MA 02116				5. MEDICARE WAGES AND TIPS 59520.00		6. MEDICARE TAX WITHHELD 863.04	
				7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS	
				9.		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL Youva Sree		LAST NAME Boddeti		SUFF.		11. NONQUALIFIED PLANS	
						12.a-d See instructions for box 12 D 1728.00	
						14. OTHER NJ DI 83.33 NJ FLI 83.33 NJUI WF SW 169.14	
F. EMPLOYEE'S ADDRESS AND ZIP CODE 1480 US Highway 46 Apt #152B Parisippany NJ 07054 USA				13. STATUTORY EMPLOYEE <input type="checkbox"/> RETIREMENT PLAN <input checked="" type="checkbox"/> THIRD-PARTY SICK PAY <input type="checkbox"/>			
15. STATE NJ	EMPLOYER'S STATE ID NUMBER 133-789-932/000	16. STATE WAGES, TIPS, ETC. 57792.00	17. STATE INCOME TAX 2715.56	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

Copy B-To Be Filed With Employee's FEDERAL Tax Return  
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



Employee Reference Copy <b>W-2</b> Wage and Tax Statement Copy C for employee's records.		2022 OMB No. 1545-0008	
d Control number 190878	Dept. CHIC/B6S	Corp. 002000	Employer use only A 229
c Employer's name, address, and ZIP code <b>AMDOCS INC 625 MARYVILLE CENTRE DR ST LOUIS MO 63141</b>			
Batch #03326			
e/f Employee's name, address, and ZIP code <b>YOUVA SREE BODDETI 1480 US HIGHWAY 46 APT 152B PARSIPPANY, NJ 07054</b>			
b Employer's FED ID number 43-1339487	a Employee's SSA number XXX-XX-6954		
1 Wages, tips, other comp. 19905.77	2 Federal income tax withheld 1597.13		
3 Social security wages 19905.77	4 Social security tax withheld 1234.16		
5 Medicare wages and tips 19905.77	6 Medicare tax withheld 288.63		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C   17.20		
14 Other 87.53 UI/WF/SWF 28.83 NJ DI 28.83 FLI	12b DD   4506.00		
	12c		
	12d		
	13 Stat emp Ret. plan 3rd party sick pay		
15 State NJ	Employer's state ID no. 431339487/000	16 State wages, tips, etc. 20611.77	
17 State income tax 571.98		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	NJ. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	20,594.57	20,594.57	20,594.57	20,594.57
Plus GTL (C-Box 12)	17.20	17.20	17.20	17.20
Less Other Cafe 125	706.00	706.00	706.00	N/A
<b>Reported W-2 Wages</b>	<b>19,905.77</b>	<b>19,905.77</b>	<b>19,905.77</b>	<b>20,611.77</b>

2. Employee Name and Address.

**YOUVA SREE BODDETI  
1480 US HIGHWAY 46  
APT 152B  
PARSIPPANY, NJ 07054**

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1 Wages, tips, other comp. 19905.77	2 Federal income tax withheld 1597.13		
3 Social security wages 19905.77	4 Social security tax withheld 1234.16		
5 Medicare wages and tips 19905.77	6 Medicare tax withheld 288.63		
d Control number 190878	Dept. CHIC/B6S	Corp. 002000	Employer use only A 229
c Employer's name, address, and ZIP code <b>AMDOCS INC 625 MARYVILLE CENTRE DR ST LOUIS MO 63141</b>			
b Employer's FED ID number 43-1339487	a Employee's SSA number XXX-XX-6954		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C   17.20		
14 Other 87.53 UI/WF/SWF 28.83 NJ DI 28.83 FLI	12b DD   4506.00		
	12c		
	12d		
	13 Stat emp Ret. plan 3rd party sick pay		
15 State NJ	Employer's state ID no. 431339487/000	16 State wages, tips, etc. 20611.77	
17 State income tax 571.98		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
Federal Filing Copy <b>W-2</b> Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.			

1 Wages, tips, other comp. 19905.77	2 Federal income tax withheld 1597.13		
3 Social security wages 19905.77	4 Social security tax withheld 1234.16		
5 Medicare wages and tips 19905.77	6 Medicare tax withheld 288.63		
d Control number 190878	Dept. CHIC/B6S	Corp. 002000	Employer use only A 229
c Employer's name, address, and ZIP code <b>AMDOCS INC 625 MARYVILLE CENTRE DR ST LOUIS MO 63141</b>			
b Employer's FED ID number 43-1339487	a Employee's SSA number XXX-XX-6954		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C   17.20		
14 Other 87.53 UI/WF/SWF 28.83 NJ DI 28.83 FLI	12b DD   4506.00		
	12c		
	12d		
	13 Stat emp Ret. plan 3rd party sick pay		
15 State NJ	Employer's state ID no. 431339487/000	16 State wages, tips, etc. 20611.77	
17 State income tax 571.98		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ State Reference Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.			

1 Wages, tips, other comp. 19905.77	2 Federal income tax withheld 1597.13		
3 Social security wages 19905.77	4 Social security tax withheld 1234.16		
5 Medicare wages and tips 19905.77	6 Medicare tax withheld 288.63		
d Control number 190878	Dept. CHIC/B6S	Corp. 002000	Employer use only A 229
c Employer's name, address, and ZIP code <b>AMDOCS INC 625 MARYVILLE CENTRE DR ST LOUIS MO 63141</b>			
b Employer's FED ID number 43-1339487	a Employee's SSA number XXX-XX-6954		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C   17.20		
14 Other 87.53 UI/WF/SWF 28.83 NJ DI 28.83 FLI	12b DD   4506.00		
	12c		
	12d		
	13 Stat emp Ret. plan 3rd party sick pay		
15 State NJ	Employer's state ID no. 431339487/000	16 State wages, tips, etc. 20611.77	
17 State income tax 571.98		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ State Filing Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.			

## Instructions for Employee

**Box 1.** Enter this amount on the wages line of your tax return.

**Box 2.** Enter this amount on the federal income tax withheld line of your tax return.

**Box 5.** You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

**Box 6.** This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

**Box 8.** This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

**Box 10.** This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

**Box 11.** This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

**Box 12.** The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

**Note:** If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

**A**—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**B**—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**C**—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

**D**—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

**E**—Elective deferrals under a section 403(b) salary reduction agreement

**F**—Elective deferrals under a section 408(k)(6) salary reduction SEP

**G**—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

**H**—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

**J**—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

**K**—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

**L**—Substantiated employee business expense reimbursements (nontaxable)

**M**—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

**N**—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

**P**—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

**Q**—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

**R**—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

**S**—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

**T**—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

**V**—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

**W**—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

**Y**—Deferrals under a section 409A nonqualified deferred compensation plan

**Z**—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

**AA**—Designated Roth contributions under a section 401(k) plan

**BB**—Designated Roth contributions under a section 403(b) plan

**DD**—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**

**EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

**FF**—Permitted benefits under a qualified small employer health reimbursement arrangement

**GG**—Income from qualified equity grants under section 83(i)

**HH**—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

**Box 13.** If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

**Box 14.** Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

**Note:** Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

**NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.**

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.

### IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):

TAX RETURN	
THIS FORM W-2	OTHER W-2'S

## Notice to Employee

**Do you have to file?** Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

**Earned income credit (EIC).** You may be able to take the EIC for 2022 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2022 or if income is earned for services provided while you were an inmate at a penal institution. For 2022 income limits and more information, visit [www.irs.gov/EITC](http://www.irs.gov/EITC). See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

**Employee's social security number (SSN).** For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

**Clergy and religious workers.** If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

**Corrections.** If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at [www.SSA.gov](http://www.SSA.gov).

**Cost of employer-sponsored health coverage (if such cost is provided by the employer).** The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

**Credit for excess taxes.** If you had more than one employer in 2022 and more than \$9,114 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.



<b>W-2</b>		Employee Reference Copy	Wage and Tax Statement		<b>2022</b>
Copy C for employee's records. OMB No. 1545-0008					
d Control number	Dept.	Corp.	Employer use only		
293330 LOS2/XAW			A 3203		
c Employer's name, address, and ZIP code					
<b>INFOSYS LIMITED</b> 2400 N GLENVILLE DR C150 RICHARDSON TX 75082  Batch #02832					
e/f Employee's name, address, and ZIP code					
<b>YOUVA SREE BODDETI</b> 1480 US HIGHWAY 46 APT 152B PARSIPPANY NJ 07054					
b Employer's FED ID number	a Employee's SSA number				
58-1760235	XXX-XX-6954				
1 Wages, tips, other comp.	2 Federal income tax withheld				
95953.50	15097.53				
3 Social security wages	4 Social security tax withheld				
95953.50	5949.12				
5 Medicare wages and tips	6 Medicare tax withheld				
95953.50	1391.33				
7 Social security tips	8 Allocated tips				
	9				
11 Nonqualified plans	12a See instructions for box 12				
	C   20.24				
14 Other	12b DD   2735.10				
128.78 SUI	12c				
80.50 DI	12d				
80.50 FLI	13 Stat emp   Ret. plan   3rd party sick pay				
15 State	Employer's state ID no.	16 State wages, tips, etc.			
	TOTAL STATE				
17 State income tax	18 Local wages, tips, etc.				
4973.15					
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	GA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	96,807.71	96,807.71	96,807.71	39,307.70
Plus GTL (C-Box 12)	20.24	20.24	20.24	8.28
Less Other Cafe 125	874.45	874.45	874.45	280.61
<b>Reported W-2 Wages</b>	<b>95,953.50</b>	<b>95,953.50</b>	<b>95,953.50</b>	<b>39,035.37</b>

2. Employee Name and Address.

**YOUVA SREE BODDETI**  
 1480 US HIGHWAY 46  
 APT 152B  
 PARSIPPANY NJ 07054

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1 Wages, tips, other comp.	2 Federal income tax withheld				
95953.50	15097.53				
3 Social security wages	4 Social security tax withheld				
95953.50	5949.12				
5 Medicare wages and tips	6 Medicare tax withheld				
95953.50	1391.33				
d Control number	Dept.	Corp.	Employer use only		
293330 LOS2/XAW			A 3203		
c Employer's name, address, and ZIP code					
<b>INFOSYS LIMITED</b> 2400 N GLENVILLE DR C150 RICHARDSON TX 75082					
b Employer's FED ID number	a Employee's SSA number				
58-1760235	XXX-XX-6954				
7 Social security tips	8 Allocated tips				
	9				
11 Nonqualified plans	12a See instructions for box 12				
	C   20.24				
14 Other	12b DD   2735.10				
128.78 SUI	12c				
80.50 DI	12d				
80.50 FLI	13 Stat emp   Ret. plan   3rd party sick pay				
e/f Employee's name, address and ZIP code					
<b>YOUVA SREE BODDETI</b> 1480 US HIGHWAY 46 APT 152B PARSIPPANY NJ 07054					
15 State	Employer's state ID no.	16 State wages, tips, etc.			
	TOTAL STATE				
17 State income tax	18 Local wages, tips, etc.				
4973.15					
19 Local income tax	20 Locality name				
Federal Filing Copy					
<b>W-2</b>	Wage and Tax Statement		<b>2022</b>		
Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008					

1 Wages, tips, other comp.	2 Federal income tax withheld				
95953.50	15097.53				
3 Social security wages	4 Social security tax withheld				
95953.50	5949.12				
5 Medicare wages and tips	6 Medicare tax withheld				
95953.50	1391.33				
d Control number	Dept.	Corp.	Employer use only		
293330 LOS2/XAW			A 3203		
c Employer's name, address, and ZIP code					
<b>INFOSYS LIMITED</b> 2400 N GLENVILLE DR C150 RICHARDSON TX 75082					
b Employer's FED ID number	a Employee's SSA number				
58-1760235	XXX-XX-6954				
7 Social security tips	8 Allocated tips				
	9				
11 Nonqualified plans	12a See instructions for box 12				
	C   8.28				
14 Other	12b				
	12c				
	12d				
	13 Stat emp   Ret. plan   3rd party sick pay				
e/f Employee's name, address and ZIP code					
<b>YOUVA SREE BODDETI</b> 1480 US HIGHWAY 46 APT 152B PARSIPPANY NJ 07054					
15 State	Employer's state ID no.	16 State wages, tips, etc.			
GA	1945856-QS	39035.37			
17 State income tax	18 Local wages, tips, etc.				
2076.81					
19 Local income tax	20 Locality name				
GA.State Reference Copy					
<b>W-2</b>	Wage and Tax Statement		<b>2022</b>		
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008					

1 Wages, tips, other comp.	2 Federal income tax withheld				
95953.50	15097.53				
3 Social security wages	4 Social security tax withheld				
95953.50	5949.12				
5 Medicare wages and tips	6 Medicare tax withheld				
95953.50	1391.33				
d Control number	Dept.	Corp.	Employer use only		
293330 LOS2/XAW			A 3203		
c Employer's name, address, and ZIP code					
<b>INFOSYS LIMITED</b> 2400 N GLENVILLE DR C150 RICHARDSON TX 75082					
b Employer's FED ID number	a Employee's SSA number				
58-1760235	XXX-XX-6954				
7 Social security tips	8 Allocated tips				
	9				
11 Nonqualified plans	12a See instructions for box 12				
	C   8.28				
14 Other	12b				
	12c				
	12d				
	13 Stat emp   Ret. plan   3rd party sick pay				
e/f Employee's name, address and ZIP code					
<b>YOUVA SREE BODDETI</b> 1480 US HIGHWAY 46 APT 152B PARSIPPANY NJ 07054					
15 State	Employer's state ID no.	16 State wages, tips, etc.			
GA	1945856-QS	39035.37			
17 State income tax	18 Local wages, tips, etc.				
2076.81					
19 Local income tax	20 Locality name				
GA.State Filing Copy					
<b>W-2</b>	Wage and Tax Statement		<b>2022</b>		
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008					





NJ.State Reference Copy Wage and Tax <b>W-2</b> Statement 2022		Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008	
d Control number 293330	Dept. LOS2/XAW	Corp. A	Employer use only 3204
c Employer's name, address, and ZIP code <b>INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082</b>			
Batch #02832			
e/f Employee's name, address, and ZIP code <b>YOUVA SREE BODDETI 1480 US HIGHWAY 46 APT 152B PARSIPPANY NJ 07054</b>			
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954		
1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53		
3 Social security wages 95953.50	4 Social security tax withheld 5949.12		
5 Medicare wages and tips 95953.50	6 Medicare tax withheld 1391.33		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C   11.96		
14 Other 128.78 UI/WF/SWF 80.50 NJ DI 80.50 FLI	12b DD   2735.10		
	12c		
	12d		
	13 Stat emp   Ret. plan   3rd party sick pay		
15 State NJ	Employer's state ID no. 581760235/000	16 State wages, tips, etc. 57511.97	
17 State income tax 2865.09		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.

	NJ. State Wages, Tips, Etc. Box 16 of W-2	NJ. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	57,500.01	39,307.70
Plus GTL (C-Box 12)	11.96	8.28
Less Other Cafe 125	N/A	N/A
<b>Reported W-2 Wages</b>	<b>57,511.97</b>	<b>39,315.98</b>

2. Employee Name and Address.

**YOUVA SREE BODDETI  
1480 US HIGHWAY 46  
APT 152B  
PARSIPPANY NJ 07054**

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1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53		
3 Social security wages 95953.50	4 Social security tax withheld 5949.12		
5 Medicare wages and tips 95953.50	6 Medicare tax withheld 1391.33		
d Control number 293330	Dept. LOS2/XAW	Corp. A	Employer use only 3204
c Employer's name, address, and ZIP code <b>INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082</b>			
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C   11.96		
14 Other 128.78 UI/WF/SWF 80.50 NJ DI 80.50 FLI	12b DD   2735.10		
	12c		
	12d		
	13 Stat emp   Ret. plan   3rd party sick pay		
15 State NJ	Employer's state ID no. 581760235/000	16 State wages, tips, etc. 57511.97	
17 State income tax 2865.09		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ.State Filing Copy Wage and Tax <b>W-2</b> Statement 2022			
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53		
3 Social security wages 95953.50	4 Social security tax withheld 5949.12		
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11 Nonqualified plans	12a C   8.28		
14 Other	12b		
	12c		
	12d		
	13 Stat emp   Ret. plan   3rd party sick pay		
15 State NJ	Employer's state ID no. 581760235/000	16 State wages, tips, etc. 39315.98	
17 State income tax 31.25		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ.State Reference Copy Wage and Tax <b>W-2</b> Statement 2022			
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53		
3 Social security wages 95953.50	4 Social security tax withheld 5949.12		
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19 Local income tax		20 Locality name	
NJ.State Filing Copy Wage and Tax <b>W-2</b> Statement 2022			
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

## Instructions for Employee

**Box 1.** Enter this amount on the wages line of your tax return.

**Box 2.** Enter this amount on the federal income tax withheld line of your tax return.

**Box 5.** You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

**Box 6.** This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

**Box 8.** This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

**Box 10.** This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

**Box 11.** This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

**Box 12.** The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

**Note:** If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

**A**—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**B**—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**C**—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

**D**—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

**E**—Elective deferrals under a section 403(b) salary reduction agreement

**F**—Elective deferrals under a section 408(k)(6) salary reduction SEP

**G**—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

**H**—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

**J**—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

**K**—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

**L**—Substantiated employee business expense reimbursements (nontaxable)

**M**—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

**N**—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

**P**—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

**Q**—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

**R**—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

**S**—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

**T**—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

**V**—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

**W**—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

**Y**—Deferrals under a section 409A nonqualified deferred compensation plan

**Z**—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

**AA**—Designated Roth contributions under a section 401(k) plan

**BB**—Designated Roth contributions under a section 403(b) plan

**DD**—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**

**EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

**FF**—Permitted benefits under a qualified small employer health reimbursement arrangement

**GG**—Income from qualified equity grants under section 83(i)

**HH**—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

**Box 13.** If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

**Box 14.** Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

**Note:** Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

**NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.**

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.

### IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):

TAX RETURN	
THIS FORM W-2	OTHER W-2'S

## Notice to Employee

**Do you have to file?** Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

**Earned income credit (EIC).** You may be able to take the EIC for 2022 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2022 or if income is earned for services provided while you were an inmate at a penal institution. For 2022 income limits and more information, visit [www.irs.gov/EITC](http://www.irs.gov/EITC). See also Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

**Employee's social security number (SSN).** For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

**Clergy and religious workers.** If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

**Corrections.** If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at [www.SSA.gov](http://www.SSA.gov).

**Cost of employer-sponsored health coverage (if such cost is provided by the employer).** The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

**Credit for excess taxes.** If you had more than one employer in 2022 and more than \$9,114 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.