a Employee's SSN 893-26-0837	b Employer identification n	umber (EIN) $42 - 163$	81761	OMB No. 1545-0008
C Employer's name, address, and ZIP code NATSOFT CORPORATION	1 Wgs, tips, other compn 168377.52	2 Fed inc tax withheld 20709.00	3 Social security wages 147000.00	Form W-2
27 WORLDS FAIR DRIVE	4 SS tax withheld 9114.00	5 Medicare wages & tips 168377.52	6 Medicare tax withheld 2441.47	Wage and Tax
SOMERSET NJ 08873	7 Social security tips	8 Allocated tips	9	Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	2022
e Employee's name, address, and ZIP code Suff.	13	14 Other	12b	
	Statutory employee .	NJ-SDI 212.66		
MOHAN KRISHNA CHADRAM		NJ-SUI 152.23	12c	Copy B To Be Filed with Employee's FEDERAL
1480 US HIGHWAY 46 APT 152B	Retirement plan	NJ-WFD 16.72		Tax Return
PARSIPPANY NJ 07054	Third-party sick pay	NJ-FLI 212.66	12d	This information is being furnished to the Internal Revenue Service.
15 State Employer's state ID number 16 State wages, tips, etc 1 NJ 421-631-761/000 174333.36 1	7 State income tax 9110.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name
			1	1

REV 12/09/22 QBDT

Department of the Treasury — IRS

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a Employee's SSN 893-26-0837	b Employer identification n	umber (EIN) $42 - 163$	31761	OMB No. 1545-0008
C Employer's name, address, and ZIP code NATSOFT CORPORATION	1 Wgs, tips, other compn 168377.52	2 Fed inc tax withheld 20709.00	3 Social security wages 147000.00	Form W-2
27 WORLDS FAIR DRIVE	4 SS tax withheld 9114.00	5 Medicare wages & tips 168377.52	6 Medicare tax withheld 2441.47	Wage and Tax
SOMERSET NJ 08873	7 Social security tips	8 Allocated tips	9	Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	2022
e Employee's name, address, and ZIP code Suff.	13	14 Other	12b	
	Statutory employee .	NJ-SDI 212.66		Copy 2 To Be
MOHAN KRISHNA CHADRAM 1480 US HIGHWAY 46 APT 152B		NJ-SUI 152.23	12c	Filed With Employee's State,
PARSIPPANY NJ 07054		NJ-WFD 16.72 NJ-FLI 212.66	12d	City, or Local Income Tax Return.
15 State Employer's state ID No. 16 State wages, tips, etc 1' NJ 421-631-761/000 174333.36 1 174333.36 1		18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/09/22 QBDT

C Employer's name, address, and ZIP code This information is being furnished to the IRS. If you are required to file a tax return, a negligen	
NATSOFT CORPORATION other sanction may be imposed on you if this income is taxable and you fail to report it.	nce penalty or
	Form W-2
27 WORLDS FATE DRIVE	Nage and
SOMERSET NJ 08873 7 Social security tips 8 Allocated tips 9	Tax
	Statement
10 Depdnt care benefits 11 Nonqualified plans 12a	2022
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	opy C For MPLOYEE'S
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	See Notice to mployee.)
15 State Employer's state ID No. 16 State wages, tips, etc 17 State income tax 18 Local wages, tips, etc 19 Local income tax 2 NJ 421-631-761/000 174333.36 9110.00 110 100	20 Locality name

REV 12/09/22 QBDT

Employee Ref	erence Copy
	Ind Tax COCO
W-2 Stateme	
Copy C for employee's records.	OMB No. 1545-0008
d Control number Dept. 101005 DALL/1LG 000004	Corp. Employer use only
	•
c Employer's name, address,	
XTGLOBAL INC	
PLANO TX 750	PARKWAY SUIT
PLANU IX 750	93
	Batch #03060
	Baton #00000
e/f Employee's name, address,	and ZIP code
YOUVA SREE BODD	DETI
1480 US HIGHWAY	
PARSIPPANY NJ 07	
PARSIFFANT NJ UN	034
	- Employed - OOA much -
b Employer's FED ID number 56-2076959	a Employee's SSA number XXX-XX-6954
1 Wages, tips, other comp.	2 Federal income tax withheld
10912.00	440.68
3 Social security wages	4 Social security tax withheld
10912.00	676.54
5 Medicare wages and tips	6 Medicare tax withheld
10912.00	158.22
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
5	To Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
• •	
14 Other	
14 Other	12b
14 Other	12c
14 Other	
	12c I 12d I 13 Stat emp Ret. plan 3rd party sick p
15 State Employer's state ID no	12c I 12d I 13 Stat emp Ret. plan 3rd party sick p
15 State Employer's state ID no	12c I 12d I 13 Stat emp Ret. plan 3rd party sick p 0. 16 State wages, tips, etc.
15 State Employer's state ID no	12c I 12d I 13 Stat emp Ret. plan 3rd party sick p
15 State Employer's state ID no	12c I 12d I 13 Stat emp Ret. plan 3rd party sick p 0. 16 State wages, tips, etc.

2022 W-2 and EARNINGS SUMMARY



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	Social Security	Medicare	TX. State Wages,
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	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

1 Wages, tips, other comp. 10912.00	2 Federal income tax withheld 440.68	1 Wages, tips, other comp. 10912.00	2 Federal income tax withheld 440.68	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	3 Social security wages 10912.00	4 Social security tax withheld 676.54	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	5 Medicare wages and tips 10912.00	6 Medicare tax withheld 158.22	5 Medicare wages and tips 10912.00	6 Medicare tax withheld 158.22
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
101005 DALL/1LG 000004	Т	101005 DALL/1LG 000004	Т	101005 DALL/1LG 000004	Т
c Employer's name, address,	and ZIP code	c Employer's name, address, a	and ZIP code	c Employer's name, address,	and ZIP code
XTGLOBAL INC 2701 DALLAS PLANO TX 750	PARKWAY SUIT	XTGLOBAL INC 2701 DALLAS PLANO TX 750	PARKWAY SUIT	XTGLOBAL IN 2701 DALLAS PLANO TX 750	PARKWAY SUIT
b Employer's FED ID number 56-2076959	a Employee's SSA number XXX-XX-6954	b Employer's FED ID number 56-2076959	a Employee's SSA number XXX-XX-6954	b Employer's FED ID number 56-2076959	a Employee's SSA number XXX-XX-6954
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a	11 Nonqualified plans	12a
14 Other	12b	14 Other	12b	14 Other	12b
	12c		12c		12c
	12d		12d		12d
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick part
e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	and ZIP code	e/f Employee's name, address	and ZIP code
YOUVA SREE BODD	ETI	YOUVA SREE BODD	ETI	YOUVA SREE BODI	DETI
1480 US HIGHWAY		1480 US HIGHWAY		1480 US HIGHWAY	
PARSIPPANY NJ 07		PARSIPPANY NJ 070		PARSIPPANY NJ 07	
15 State Employer's state ID no TX	0. 16 State wages, tips, etc.	15 State Employer's state ID no	b. 16 State wages, tips, etc.	15 State Employer's state ID n	o. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fi	ling Copy	TX.State Re	eference Copy	TX.State Fi	ling Copy
W-2 Copy B to be filed with employee's F		W-2 Wage a Statemen Copy 2 to be filed with employee's Stat		W-2 Wage a Statem	

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, and you are or will be age 62 by the end of the calendar year, and you are or will be 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.

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

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.

 $\label{eq:L-Substantiated employee business expense reimbursements (nontaxable)$

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.

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

 $\begin{array}{l} \textbf{P-} \text{Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) \\ \textbf{Q-} \text{Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.} \end{array}$

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 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, 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**, 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):



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. 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.*

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.

								Federal Box	< 1	Soc. Sec. Box 3 &	7 Medicare Box 5	
To the right is an explanation of your W-2 wages. Please note that the Gross amount may include adjustments.						Gross Wage Txbl Benefi		5952	20.00	59520.	59520.00	
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.						Group Term Adoption		(170)				
Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS					Deferred Co Section 125 Other Preta		(1728	5.00)				
						W-2 Wages		5779	92.00	59520.	59520.00	
D. CONTROL NUMBER 000209886201			2022	OMB NO. 1545	-0008	1. WAGES, T	IPS, OTHER COMPEN	ISATION 92.00	2.1	FEDERAL INCOME TA	X WITHHELD 8658.32	
B. EMPLOYER IDENTIFICA	MPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER					3. SOCIAL SECURITY WAGES 4			4.	4. SOCIAL SECURITY TAX WITHHELD		
13-3789932		774-42-6954				59520.00 3690.24			3690.24			
C. EMPLOYER'S NAME, A	DDRESS, AND ZIP C	ODE				5. MEDICARE WAGES AND TIPS 6. MEDICARE TAX WITHHELD			HHELD			
Motion Recruitment F	artners LLC					59520.00 863.04			863.04			
501 Boylston St Ste 3103 Boston MA 02116						7. SOCIAL SEC	CURITY TIPS		8.7	ALLOCATED TIPS		
003001104 02110						9.			10.	DEPENDENT CARE E	ENEFITS	
E. EMPLOYEE'S FIRST NAI Youva Sree	ME AND INITIAL	LAST NA Boddet			SUFF.	11. NONQUAL	IFIED PLANS		12.8	a-d See instructions fo D	r box 12 1728.00	
1480 US Highway 46 Apt #152B						14. OTHER NJ NJ	DI FLI	83.3 83.3				
Parisippany NJ 07054 USA F. EMPLOYEE'S ADDRESS AND ZIP CODE					L N	UI WF SW	169.1	13.	STATUTORY RETIF	EMENT X THIRD-PARTY SICK PAY		
	S STATE ID NUMBER	16. STATE WAG	ES, TIPS, E 57792		ICOME 1	AX 2715.56	18. LOCAL WAGES,	, TIPS, ETC.	19. LOC	CAL INCOME TAX	20. LOCALITY NAME	

D. CONTROL NU 00020988620			2022	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER CO	MPENSATION 57792.00	2. FEDERAL INCOME TA	AX WITHHELD 8658.32
	DENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S		JRITY NUMBER	3. SOCIAL SE	CURITY WAGE		4. SOCIAL SECURITY TAX WITHHELD	
13-3789932		774-42-6954					59520.00		3690.24
C. EMPLOYER'S	NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND	TIPS	6. MEDICARE TAX WIT	THHELD
Motion Recrui	itment Partners LLC						59520.00		863.04
501 Boylston St Ste 3103					7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS	
Boston MA 02	2110				9.			10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE'S	FIRST NAME AND INITIAL	LAST NA	ME	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d	
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Parisippany NJ 07054 USA E. EMPLOVEF'S ADDRESS AND ZIP CODE				נא	UI WF SW	169.14	13. STATUTORY RETI		
	MPLOYER'S STATE ID NUMBER	16. STATE WAG	ES, TIPS, ET	C. 17. STATE INCOME 1	AX	18. LOCAL W	AGES, TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME
NJ 1	33-789-932/000		57792.	00	2715.56				
Conv 2-To Be	ony 2-To Be Filed With Employee's State. City or Local Income Tay Return 2002 Department of the Treasury - Internal Revenue Service								

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 000209886		2	2022 OMB	NO. 1545-0008	1. WAGES, T	PS, OTHER COM	1PENSATION 57792.00	2. FEDERAL INCOME T	AX WITHHELD 8658.32
B. EMPLOYER	RIDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOC	CIAL SECURITY N	IUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
13-3789932	2	774-42-6954				ţ.	59520.00		3690.24
C. EMPLOYER	R'S NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND T	IPS	6. MEDICARE TAX WI	THHELD
Motion Recr	ruitment Partners LLC					5	59520.00		863.04
501 Boylsto Ste 3103 Boston MA					7. SOCIAL SEC	URITY TIPS		8. ALLOCATED TIPS	
DUSTON MA	02110				9.			10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE	'S FIRST NAME AND INITIAL	LAST NAME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d	
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Apt #152B					L IN	FLI	83.33	3	
Parisippany USA F. EMPLOYEE	V NJ 07054				L I I I I I I I I I I I I I I I I I I I	UI WF SW	169.14	13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY
15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES,	TIPS, ETC.	17. STATE INCOME T	AX	18. LOCAL WA	GES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME
NJ	133-789-932/000		57792.00		2715.56				
Copy 2-To B	ony 2-To Be Filed With Employee's State City or Local Income Tax Return 2002 Department of the Treasury - Internal Revenue Service								

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

000209886	5201	2022	OND NO. 1343-0000		577	92.00		8658.32
B. EMPLOYER	R IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL SEC	URITY NUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
13-378993	2	774-42-6954			595	520.00		3690.24
C. EMPLOYER	R'S NAME, ADDRESS, AND ZIP C	DDE		5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	HHELD
Motion Rec	ruitment Partners LLC				595	520.00		863.04
501 Boylsto Ste 3103				7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS	
Boston MA	02116			9.			10. DEPENDENT CARE	BENEFITS
E. EMPLOYER	E'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d See instructions fo	r box 12
Youva Sree	2	Boddeti					D	1728.00
1480 US H	lighway 46			14. OTHER NJ	DI	83.33		
Apt #152B				L NJ	FLI	83.33		
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15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS, E	TC. 17. STATE INCOME T	AX	18. LOCAL WAGES	, TIPS, ETC. 1	9. LOCAL INCOME TAX	20. LOCALITY NAME
NJ	133-789-932/000	57792	.00	2715.56				
Сору В-То В	opy B-To Be Filed With Employee's FEDERAL Tax Return 2022 Department of the Treasury - Internal Revenue Service							

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

	-										
	erence Copy										
W-2 Wage a											
Stateme											
Copy C for employee's records.	OMB No. 1545-0008										
d Control number Dept.	Corp. Employer use only										
190878 CHIC/B6S 002000	A 229										
c Employer's name, address, and ZIP code											
AMDOCS INC 625 MARYVILLE CENTRE DR											
ST LOUIS MO	63141										
	Batab #02226										
	Batch #03326										
e/f Employee's name, address, a	and ZIP code										
YOUVA SREE BODD	ETI										
1480 US HIGHWAY											
APT 152B	10										
	E 4										
PARSIPPANY,NJ 070											
b Employer's FED ID number 43-1339487	a Employee's SSA number XXX-XX-6954										
1 Wages, tips, other comp.	2 Federal income tax withheld										
19905.77	1597.13										
3 Social security wages	4 Social security tax withheld										
19905.77	1234.16										
5 Medicare wages and tips	6 Medicare tax withheld										
19905.77	288.63										
7 Social security tips	8 Allocated tips										
9	10 Dependent care benefits										
9	To Dependent care benefits										
11 Nongualified plans	12a See instructions for box 12										
· ·	<u>C</u> 17.20										
14 Other	12b DD 4506.00										
87.53 UI/WF/SWF	12d										
28.83 NJ DI 28.83 FLI	13 Stat emp Ret. plan 3rd party sick page										
15 State Employer's state ID no	. 16 State wages, tips, etc.										
NJ 431339487/000	20611.77										
	18 Local wages, tips, etc.										
17 State income tax											
17 State income tax 571.98											

2022 W-2 and EARNINGS SUMMARY



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	Social Security	Medicare	NJ. State Wages,
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	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
Reported W-2 Wages	19,905.77	19,905.77	19,905.77	20,611.77

2. Employee Name and Address.

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

1 Wages, tips, other comp. 19905.77			1 Wages, tips, other comp. 19905.77	2 Federal	ncome tax withheld 1597.13	1 Wages, tips, othe 19	er comp. 2 9905.77	2 Federa	l income tax withheld 1597.13
3 Social security wages 19905.77	s 4 Social security tax withheld 5.77 1234.16		3 Social security wages 19905.77	4 Social s	ecurity tax withheld 1234.16	³ Social security w 19	/ages 9905.77	4 Social	security tax withheld 1234.16
5 Medicare wages and tips 19905.77			5 Medicare wages and tips 19905.77	6 Medicare	e tax withheld 288.63	5 Medicare wages	and tips 9905.77	6 Medica	re tax withheld 288.63
d Control number Dept.	Corp. Emplo	yer use only	d Control number Dept.	Corp.	Employer use only	d Control number	Dept.	Corp.	Employer use only
190878 CHIC/B6S 002000	A	229	190878 CHIC/B6S 002000		A 229	190878 CHIC/B6S	002000		A 229
c Employer's name, address, a	c Employer's name, address, and ZIP code			nd ZIP code		c Employer's name	e, address, and	d ZIP cod	e
AMDOCS INC 625 MARYVILLE CENTRE DR ST LOUIS MO 63141			AMDOCS INC 625 MARYVILLE CENTRE DR ST LOUIS MO 63141			AMDOCS INC 625 MARYVILLE CENTRE DR ST LOUIS MO 63141			
b Employer's FED ID number 43-1339487 7 Social security tips	a Employee's SS XXX-X 8 Allocated tips		b Employer's FED ID number 43-1339487 7 Social security tips		e's SSA number XX-XX-6954 d tips	b Employer's FED 43-1339 7 Social security ti	487		vee's SSA number (XX-XX-6954 ed tips
				/	-				
9 10 Dependent care benefits		9	10 Depende	ent care benefits	9	1	10 Dependent care benefits		
11 Nonqualified plans	12a See instruction	ns for box 12 17.20	11 Nonqualified plans	12a C	17.20	11 Nonqualified plan	ns 1	^{2a} C	17.20
14 Other	^{12b} DD	4506.00	14 Other	12b DD	4506.00	14 Other	1	2b DD	4506.00
	12c	4300.00		12c	4300.00		1	2c	4300.00
87.53 UI/WF/SWF 28.83 NJ DI	12d	87.53 UI/WF/SWF 28.83 NJ DI	12d		87.53 UI/WF/SWF 28.83 NJ DI	UI/WF/SWF	2d		
28.83 NJ DI 28.83 FLI			28.83 NJ DI 28.83 FLI			28.83			1 1
	13 Stat emp. Ret. plan	3rd party sick pay		13 Stat emp. F	Ret. plan 3rd party sick pay		1	3 Stat emp	o. Ret. plan 3rd party sick pa
e/f Employee's name, address a	nd ZIP code		e/f Employee's name, address a	nd ZIP code		e/f Employee's nam	e, address and	I ZIP code	9
YOUVA SREE BODD	FTI		YOUVA SREE BODD	FTI		YOUVA SREE		ті	
1480 US HIGHWAY			1480 US HIGHWAY 46						
APT 152B		APT 152B							
PARSIPPANY,NJ 07054		PARSIPPANY,NJ 070							
,		as oto	15 State Employer's state ID no		and time ato				agos tins ato
15 State Employer's state ID no. 16 State wages, tips, etc. NJ 431339487/000 20611.77		NJ 431339487/000	J. 10 State wa	20611.77	NJ 4313394		no. 16 State wages, tips, etc. 20611.77		
17 State income tax	18 Local wages, ti	ps, etc.	17 State income tax	18 Local wa	ages, tips, etc.	17 State income tax		8 Local v	wages, tips, etc.
571.98			571.98	00.1			571.98		
19 Local income tax 20 Locality name		19 Local income tax	20 Locality	ity name 19 Local income tax 20 Locality name		y name			
Federal Filing Copy		NJ.State Re	NJ.State Reference Copy		NJ.State Filing Copy				
W-2 Wage and Tax 2022 Statement OMB No. 1545-0008			Wage and Tax 20022 Statement Copy 2 to be filed with employee's State Income Tax Return.			W-2 Wage and Tax 2022 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, and you are or will be age 62 by the end of the calendar year, and you are or will be 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.

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

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.

 $\label{eq:L-Substantiated employee business expense reimbursements (nontaxable)$

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.

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

 $\begin{array}{l} \textbf{P-} \text{Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) \\ \textbf{Q-} \text{Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.} \end{array}$

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 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, 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**, 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):



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. 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.*

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. PAGE 1

Employee Refe	erence Copy
W-2 Wage a	
	OMB No. 1545-0008
Copy C for employee's records. d Control number Dept.	Corp. Employer use only
293330 LOS2/XAW	A 3203
c Employer's name, address, a INFOSYS LIMIT	
2400 N GLENV	
RICHARDSON	
	Batch #02832
e/f Employee's name, address, a	and ZIP code
YOUVA SREE BODD	
1480 US HIGHWAY	
APT 152B	40
-	
PARSIPPANY NJ 070 b Employer's FED ID number	
b Employer's FED ID number 58-1760235	a Employee's SSA number 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 95953.50	6 Medicare tax withheld 1391.33
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nongualified plans	12a See instructions for box 12
11 Nonquaimed plans	C 20.24
14 Other	12b DD 2735.10
128.78 SUI	12c
80.50 DI 80.50 FLI	13 Stat emp Ret. plan 3rd party sick pay
15 State Employer's state ID no	16 State wages tips atc
	. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
4973.15	
19 Local income tax	20 Locality name

2022 W-2 and EARNINGS SUMMARY



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	Social Security	Medicare	GA. State Wages,
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	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
Reported W-2 Wages	95,953.50	95,953.50	95,953.50	39,035.37

2. Employee Name and Address.

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

1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53	1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53	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	3 Social security wages 95953.50	4 Social security tax withheld 5949.12	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	5 Medicare wages and tips 95953.50	6 Medicare tax withheld 1391.33	5 Medicare wages and tips 95953.50	6 Medicare tax withheld 1391.33	
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	
293330 LOS2/XAW	A 3203	293330 LOS2/XAW	A 3203	293330 LOS2/XAW	A 3203	
c Employer's name, address, a	and ZIP code	c Employer's name, address, and ZIP code		c Employer's name, address, and ZIP code		
INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082		INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082		INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082		
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954	b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954	b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954	
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	
9 10 Dependent care benefits		9 10 Dependent care benefits		9 10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C 20.24	11 Nonqualified plans	^{12a} C 8.28	11 Nonqualified plans	^{12a} C 8.28	
14 Other	^{12b} DD 2735.10	14 Other	12b	14 Other	12b	
128.78 SUI	12c		12c		12c	
80.50 DI	12d		12d		12d	
80.50 FLI	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick part	
e/f Employee's name, address ar	nd ZIP code	e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	and ZIP code	
YOUVA SREE BODD		YOUVA SREE BODDETI		YOUVA SREE BODDETI		
1480 US HIGHWAY	1	1480 US HIGHWAY 46		1480 US HIGHWAY 46		
	+0	APT 152B		APT 152B		
APT 152B		PARSIPPANY NJ 07054		PARSIPPANY NJ 07054		
PARSIPPANY NJ 070	154	PARSIPPANT NJ U/L	154	PARSIPPANT NJ U/U	J54	
15 State Employer's state ID no TOTAL STATE	. 16 State wages, tips, etc.	15 State Employer's state ID no GA 1945856-QS	39035.37	15 State Employer's state ID no GA 1945856-QS	39035.37	
17 State income tax 4973.15	18 Local wages, tips, etc.	17 State income tax 2076.81	18 Local wages, tips, etc.	17 State income tax 2076.81	18 Local wages, tips, etc.	
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	
Federal Filing Copy			eference Copy		ling Copy	
W-2 Wage and Statemer	nd Tax 2022 ent OMB No. 1545-0008 ederal Income Tax Return.	W-2 Wage and Statement Copy 2 to be filed with employee's State		W-2 Wage a Stateme Copy 2 to be filed with employee's State		

PAGE 2

NJ.State Re	eference Copy					
W-2 Wage a Statement						
Copy 2 to be filed with employee's Stat	OMB No. 1545-0008 e Income Tax_Return.					
d Control number Dept.	Corp. Employer use only					
293330 LOS2/XAW	A 3204					
c Employer's name, address, a						
INFOSYS LIMIT						
2400 N GLENV						
RICHARDSON	FX 75082					
	Batch #02832					
	Balcii #02032					
e/f Employee's name, address, a	and ZIP code					
YOUVA SREE BODD	FTI					
1480 US HIGHWAY						
APT 152B	+0					
PARSIPPANY NJ 070	754					
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 95953.50	6 Medicare tax withheld 1391.33					
7 Social security tips	8 Allocated tips					
7 Social security tips	o Allocated tips					
9 10 Dependent care benefits						
11 Nonqualified plans	12a See instructions for box 12 C 11.96					
14 Other	12b DD 2735.10					
128.78 UI/WF/SWF	12c					
80.50 NJ DI 80.50 FLI	12d 13 Stat emp. Ret. plan 3rd party sick pay					
80.50 FLI	13 Stat emplitiet, plan Stu party sick pay					
15 State Employer's state ID no. 16 State wages, tips, etc.						
NJ 581760235/000	57511.97					
17 State income tax	18 Local wages, tips, etc.					
2865.09 19 Local income tax	20 Locality name					

2022 W-2 and EARNINGS SUMMARY



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
Reported W-2 Wages	57,511.97	39,315.98

2. Employee Name and Address.

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

1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53	1 Wages, tips, other comp. 95953.50	2 Federal income tax withheld 15097.53	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	3 Social security wages 95953.50	4 Social security tax withheld 5949.12	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	5 Medicare wages and tips 95953.50	6 Medicare tax withheld 1391.33	5 Medicare wages and tips 95953.50	6 Medicare tax withheld 1391.33	
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	
293330 LOS2/XAW	A 3204	293330 LOS2/XAW	A 3204	293330 LOS2/XAW	A 3204	
c Employer's name, address, a	and ZIP code	c Employer's name, address, and ZIP code		c Employer's name, address, and ZIP code		
INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082		INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082		INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082		
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954	b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954	b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-6954	
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12 C 11.96	11 Nonqualified plans	^{12a} C 8.28	11 Nonqualified plans	^{12a} C 8.28	
14 Other	^{12b} DD 2735.10	14 Other	12b	14 Other	12b	
128.78 UI/WF/SWF	12c		12c		12c	
80.50 NJ DI	12d		12d		12d	
80.50 FLI	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pa	
e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	and ZIP code	e/f Employee's name, address a	Ind ZIP code	
YOUVA SREE BODD	FTI	YOUVA SREE BODDETI		YOUVA SREE BODDETI		
1480 US HIGHWAY		1480 US HIGHWAY 46		1480 US HIGHWAY 46		
APT 152B		APT 152B		APT 152B		
PARSIPPANY NJ 07054		PARSIPPANY NJ 07054		PARSIPPANY NJ 07054		
15 State Employer's state ID no. 16 State wages, tips, etc. NJ 581760235/000 57511.97		15 State Employer's state ID no NJ 581760235/000	b. 16 State wages, tips, etc. 39315.98	15 State Employer's state ID no. 16 State wages, tips, etc. NJ 581760235/000 39315.98		
17 State income tax 2865.09	18 Local wages, tips, etc.	17 State income tax 31.25	18 Local wages, tips, etc.	17 State income tax 31.25	18 Local wages, tips, etc.	
19 Local income tax 20 Locality name				20 Locality name		
NJ.State Filing Copy		NJ.State Re	eference Copy	NJ.State Fil	ing Copy	
W-2 Wage a Stateme Copy 2 to be filed with employee's Stat	nd Tax 2022 ent OMB No. 1545-0008 Return.	W-2 Wage a Statement Copy 2 to be filed with employee's Stat		W-2 Copy 2 to be filed with employee's State Income Tax Return. 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, and you are or will be age 62 by the end of the calendar year, and you are or will be 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.

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

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.

 $\label{eq:L-Substantiated employee business expense reimbursements (nontaxable)$

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.

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

 $\begin{array}{l} \textbf{P-} \text{Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) \\ \textbf{Q-} \text{Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.} \end{array}$

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 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, 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**, 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):



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. 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.*

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.