| | | | | | | | | | Federal B | ox 1 | Soc. Sec. Box 3 8 | 7 | Medicare Box 5 |
|---|--|--|------------------------------|---------------------|----------|---|--|---|------------------------|---------------------------------|--|-----------|----------------------|
| | | planation of your \end{array} | | stments. | | | Gross Wage | | 29 | 384.6 | 1 29384 | 1.61 | 29384.61 |
| file a ta: | x return, a ne | egligence penalty | or other sanction | | | you are required to d on you if this | Group Term Life 23 Adoption | | 23.2 | 8 23 | 3.28 | 23.28 | |
| income is taxable and you fail to report it. | | | | | | | Deferred Comp (113.) Section 125 (528.) | | | | | 10) | (500.10) |
| Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS | | | | | | Other Pretax | /Wage Limit | (; | 528. IU | 0) (528 | .10) | (528.10) | |
| | | | | | | | W-2 Wages | | 28 | 3766.7 | 1 28879 | 9.79 | 28879.79 |
| D. CONTRO 000097155 | | | | 2022 | ОМЕ | 8 NO. 1545-0008 | 1. WAGES, T | IPS, OTHER COI | MPENSATION 28766.71 | | 2. FEDERAL INCOME T | | HELD 4376.47 |
| B. EMPLOYE 94-3326476 | | TION NUMBER (EIN) | A. EMPLOYEE'S 649-27-4817 | SOCIAL SE | CURITY N | IUMBER | 3. SOCIAL SE | CURITY WAGE | s 28879.79 | | 4. SOCIAL SECURITY T | | HHELD 1790.55 |
| | | DDRESS, AND ZIP C | CODE | | | | 5. MEDICARE WAGES AND TIPS | | | | 6. MEDICARE TAX WITHHELD 418.76 | | |
| Exlservice.0 10 Exchang Ste 2200 Jersey City | je Place | | | | | | | 7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS | | | | | |
| | | | | | | | 9. | | | | 10. DEPENDENT CARE | BENEFITS | S |
| E. EMPLOYE SAGAR | EE'S FIRST NAI | ME AND INITIAL | LAST NA ADIMU | | | SUFF. | 11. NONQUA | LIFIED PLANS | | | 12.a-d See instructions f | or box 12 | 23.28 |
| EXL SERVION Hartford CT USA | | h Street ,16th Floor | · | | | | 14. OTHER NJ DI 41.14 NJ FLI 41.14 NJUI WF SW 124.88 | | | .14 | D DD | | 113.08 3165.01 |
| | | AND ZIP CODE | I | | | T | | T | | | EMPLOYEE - PLA | _ | SICK PAY |
| 15. STATE CT | 38245551- | S STATE ID NUMBER 000 | 16. STATE WAG | 2199 | | 17. STATE INCOME T | 496.20 | 18. LOCAL W | AGES, TIPS, ETC. | 19.1 | OCAL INCOME TAX | 20. LO | CALITY NAME |
| D. CONTRO 000097155 | | | | 2022 | OME | NO. 1545-0008 | 1. WAGES, T | IPS, OTHER COI | MPENSATION 28766.71 | | 2. FEDERAL INCOME T | | HELD 4376.47 |
| B. EMPLOYE 94-3326476 | | TION NUMBER (EIN) | A. EMPLOYEE'S 649-27-4817 | SOCIAL SE | CURITY N | IUMBER | 3. SOCIAL SECURITY WAGES 28879.79 | | | | 4. SOCIAL SECURITY TAX WITHHELD 1790.55 | | |
| C. EMPLOYE | ER'S NAME, A | DDRESS, AND ZIP C | CODE | | | | 5. MEDICARE | WAGES AND | | 6. MEDICARE TAX WITHHELD 418.76 | | | |
| Exlservice.0 10 Exchang Ste 2200 | | | | | | | 7. SOCIAL SECURITY TIPS | | | | 8. ALLOCATED TIPS | | |
| Jersey City | NJ 07302 | | | | | | 9. | | | | 10. DEPENDENT CARE | BENEFIT: | S |
| E EMBLOY | TE'S FIRST NAM | ME AND INITIAL | LAST N | ANAF | | SUFF. | 11. NONQUA | IEIED DI ANG | | | 12.a-d | | |
| SAGAR | | | ADIMU | | | 3011. | | | | | C D | | 23.28 113.08 |
| EXL SERVIO Hartford C ⁻ USA | | h Street ,16th Flooi: | • | | | | | J DI J FLI JUI WF SW | | .14 .14 .88 | DD 13. STATUTORY RET | IREMENT [| 3165.01 |
| F. EMPLOYE 15. STATE CT | EE'S ADDRESS EMPLOYER' 38245551- | AND ZIP CODE S STATE ID NUMBER 000 | 16. STATE WAG | ES, TIPS, E 2199 | | 17. STATE INCOME T | TAX 496.20 | 18. LOCAL W | AGES, TIPS, ETC. | | EMPLOYEE PLA | N L | SICK PAY CALITY NAME |
| | | ith Employee's | | Local Inc | come T | ax Return | 2022 | | Department of | of th | e Treasury - Inte | rnal Re | evenue Service |
| D. CONTRO | | e allu lax 3 | tatement | | | | 1 WAGES T | IPS, OTHER COI | MPENSATION | | 2. FEDERAL INCOME T | AX WITH | HELD |
| 000097155 | 701 | | | 2022 | | NO. 1545-0008 | | | 28766.71 | | | | 4376.47 |
| 94-3326476 | | TION NUMBER (EIN) | A. EMPLOYEE'S 649-27-4817 | SOCIAL SE | CURITY | IOMBER | | CURITY WAGE | 28879.79 | | 4. SOCIAL SECURITY 1 | | 1790.55 |
| C. EMPLOYE Exlservice.0 | | DDRESS, AND ZIP C | ODE | | | | 5. MEDICARE | WAGES AND | TIPS 28879.79 | | 6. MEDICARE TAX WI | THHELD | 418.76 |
| 10 Exchang Ste 2200 | | | | | | | 7. SOCIAL SE | CURITY TIPS | | | 8. ALLOCATED TIPS | | |
| Jersey City | NJ 07302 | | | | | | 9. | | | | 10. DEPENDENT CARE | BENEFITS | S |
| | EE'S FIRST NAM | ME AND INITIAL | LAST N | | | SUFF. | 11. NONQUA | LIFIED PLANS | | : | 12.a-d C | | 23.28 |
| SAGAR ADIMULAM EXL SERVICES,20 Church Street ,16th Floor Hartford CT 06103 USA | | | | | | 14. OTHER N | J DI | 41 | .14 | D . | | | |
| | | | | | | NJ FLI 41.14 NJUI WF SW 124.88 | | | . 88 L | | | 3165.01 | |
| 15. STATE | EMPLOYER' | AND ZIP CODE S STATE ID NUMBER | 16. STATE WAG | ES, TIPS, E 2199 | | 17. STATE INCOME T | FAX 496.20 | 18. LOCAL W | AGES, TIPS, ETC. | 19. l | OCAL INCOME TAX | | CALITY NAME |
| . , | | ith Employee's | , | | | ax Return | 2022 | | Department | of t | he Treasury - Int | ernal F | Revenue Service |
| FORM W | -2 Wag | e and Tax S | tatement | | | | | | | | | | |
| D. CONTRO 000097155 | | | | 2022 | ОМЕ | NO. 1545-0008 | 1. WAGES, T | IPS, OTHER COI | MPENSATION 28766.71 | | 2. FEDERAL INCOME T | | HELD 4376.47 |
| | ER IDENTIFICA | TION NUMBER (EIN) | A. EMPLOYEE'S 649-27-4817 | SOCIAL SE | CURITY N | IUMBER | 3. SOCIAL SE | CURITY WAGE | S | | 4. SOCIAL SECURITY T | TAX WITH | HHELD |
| C. EMPLOYE | ER'S NAME, A | DDRESS, AND ZIP C | | | | | 5. MEDICARE | WAGES AND | | | 6. MEDICARE TAX WI | | 1790.55 |
| Exlservice.0 10 Exchang | | | | | | | 7. SOCIAL SE | CLIRITY TIPS | 28879.79 | | 8. ALLOCATED TIPS | | 418.76 |

| D. CONTROL 0000971557 | | | | 2022 | OMB N | O. 15 | 545-0008 | 1. WAGES, TI | PS, OTHER COMPENS 287 | 66.71 | 2. FEDERAL INCOME T | AX WITHHELD 4376.47 | | |
|--------------------------|--|----------------------|------------------|-----------------------|-------|-----------------------------------|-------------------------|----------------------------|--------------------------|-------------------|---------------------------|---------------------------------|--|--|
| | B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER | | | | | | | 3. SOCIAL SECURITY WAGES | | | 4. SOCIAL SECURITY | 4. SOCIAL SECURITY TAX WITHHELD | | |
| 94-3326476 | i | | 649-27-4817 | | | | | | 288 | 79.79 | | 1790.55 | | |
| C. EMPLOYE | C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE | | | | | | | 5. MEDICARE WAGES AND TIPS | | | 6. MEDICARE TAX W | 6. MEDICARE TAX WITHHELD | | |
| Exlservice.C | | | | | | | | 28879.79 | | | | 418.76 | | |
| Ste 2200 | 10 Exchange Place Ste 2200 Jersey City NJ 07302 | | | | | | 7. SOCIAL SECURITY TIPS | | | 8. ALLOCATED TIPS | 8. ALLOCATED TIPS | | | |
| Corocy Only | 110 07002 | | | | | | | 9. | | | 10. DEPENDENT CARE | BENEFITS | | |
| E. EMPLOYER SAGAR | E'S FIRST NAM | IE AND INITIAL | LAST NA ADIMU | | | | SUFF. | 11. NONQUAL | IFIED PLANS | | 12.a-d See instructions f | or box 12 23.28 | | |
| 51/1 OFB) // O | 2500001 1 | 0 46.1 51 | | | | | | 14. OTHER NJ | DI | 41.1 | D D | 113.08 | | |
| Hartford CT | | n Street ,16th Floor | | | | | | | | | טט ן | 3165.01 | | |
| USA | | | | | | NJ FLI 41.14 NJUI WF SW 124.88 | | | 88 | | | | | |
| F. EMPLOYER | F. EMPLOYEE'S ADDRESS AND ZIP CODE | | | | | | | | | 13. STATUTORY RET | N THIRD-PARTY SICK PAY | | | |
| 15. STATE CT | EMPLOYER'S 38245551-0 | STATE ID NUMBER | 16. STATE WAGI | ES, TIPS, ET 21997 | | 7. STAT | E INCOME T | AX 496.20 | 18. LOCAL WAGES, | TIPS, ETC. | 19. LOCAL INCOME TAX | 20. LOCALITY NAME | | |

| | | | | | | | _ | | | | | | |
|---|--|--|------------------------------|---------------------|----------|--------------------|---|-------------------------|---------------|-----------------------------|---|--|--|
| | | | | | | | | | Federal Box 1 | Soc. Sec. Box 3 8 | 7 Medicare Box 5 | | |
| | | planation of your \ Gross amount ma | | stments. | | | Gross Wage | | | | | | |
| This information is being furnished to the Internal Revenue Service. If you are required to | | | | | | | Txb) Benefits Group Term Life | | | | | | |
| 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. | | | | | | | | Adoption Deferred Comp | | | | | |
| | | I Tax Statement 20 YEE'S RECORDS | 022 | | | | Deferred Comp Section 125 | | | | | | |
| Сору С | TOT LIVIT LO | TEL 3 RECORDS | | | | | Other Pretax W-2 Wages | :/Wage Limit | | | | | |
| D. CONTROI 000097155 | | | | 2022 | ОМЕ | NO. 1545-0008 | 1. WAGES, T | IPS, OTHER COMPENSA | TION | 2. FEDERAL INCOME T | AX WITHHELD | | |
| B. EMPLOYE | R IDENTIFICA | TION NUMBER (EIN) | A. EMPLOYEE'S 649-27-4817 | | | | 3. SOCIAL SE | ECURITY WAGES | | 4. SOCIAL SECURITY T | 'AX WITHHELD | | |
| | R'S NAME, A | DDRESS, AND ZIP C | | | | | 5. MEDICARI | WAGES AND TIPS | | 6. MEDICARE TAX WI | THHELD | | |
| Exlservice.0 10 Exchang Ste 2200 | | | | | | | 7. SOCIAL SE | CURITY TIPS | | 8. ALLOCATED TIPS | | | |
| Jersey City | NJ 07302 | | | | | | 9. | | | 10. DEPENDENT CARE | BENEFITS | | |
| | E'S FIRST NAM | ME AND INITIAL | LAST N | | | SUFF. | 11. NONQUALIFIED PLANS 12.a-d See instructions for box 12 | | | | | | |
| SAGAR EXL SERVIO | CES,20 Churc | h Street ,16th Floor | ADIMU | JLAM | | | 14. OTHER | | | | | | |
| Hartford CT USA | 06103 | | | | | | | | | 42 | | | |
| F. EMPLOYE | | AND ZIP CODE S STATE ID NUMBER | 16 STATE WAG | ES TIPS E | TC | 17. STATE INCOME 1 | TAX | 18. LOCAL WAGES, T | IPS FTC 19 | 13. STATUTORY RETI | THIRD-PARTY N SICK PAY 20. LOCALITY NAME | | |
| NJ | 943-326-47 | | 101011112 11110 | 2929 | | THOME MOOME | 1424.42 | 20120012 1111020, 1 | | TEGORE WOOME TW | 201200121111112 | | |
| D. CONTROL | | | | 2022 | ОМЕ | NO. 1545-0008 | 1. WAGES, T | TIPS, OTHER COMPENSA | TION | 2. FEDERAL INCOME T | AX WITHHELD | | |
| | R IDENTIFICA | TION NUMBER (EIN) | A. EMPLOYEE'S 649-27-4817 | | CURITY N | IUMBER | 3. SOCIAL SE | ECURITY WAGES | | 4. SOCIAL SECURITY T | 'AX WITHHELD | | |
| C. EMPLOYE | R'S NAME, A | DDRESS, AND ZIP C | | | | | 5. MEDICARI | WAGES AND TIPS | | 6. MEDICARE TAX WITHHELD | | | |
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| Hartford CT USA | 06103 | | | | | | | | | 13, STATUTORY RET | IREMENT THIRD-PARTY | | |
| F. EMPLOYE | | AND ZIP CODE S STATE ID NUMBER | 16. STATE WAG | iES, TIPS, E | TC. | 17. STATE INCOME 1 | TAX | 18. LOCAL WAGES, T | IPS. ETC. 19 | EMPLOYEE PLAI | | | |
| NJ | 943-326-47 | | | 2929 | 4.81 | av Poturn | 1424.42 | | | he Treasury - Inter | rnal Revenue Service | | |
| | | e and Tax S | | Local IIIC | Joine 1 | ax Netuiii | 2022 | Берагс | ment or t | ne rreasury - miter | nai nevenue service | | |
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| Hartford CT USA | 06103 | | | | | | | | | 13. STATUTORY RET | IREMENT X THIRD-PARTY | | |
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| NJ Copy 2-To | 943-326-47 | 76/000 Tith Employee's | State City or | 2929 | | av Return | 1424.42 | Depai | tment of | the Treasury - Inte | ernal Revenue Servio | | |
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| D. CONTROL | | | | | ONAE | NO. 1545-0008 | 1. WAGES, T | TPS, OTHER COMPENSA | TION | 2. FEDERAL INCOME T | AX WITHHELD | | |
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| Ste 2200 Jersey City | NJ 07302 | | | | | | 7. SOCIAL SECURITY TIPS | | | 10. DEPENDENT CARE BENEFITS | | | |
| E EMBLOYE | F'S FIRST NIAM | ME AND INITIAL | LAST N | ΔΜΕ | | SUFF. | | | | | | | |
| SAGAR | | | ADIMU | | | ourf. | 14. OTHER | LITTLE FEMINS | | 12.a-u See Instructions to | N DVN 12 | | |
| | EXL SERVICES,20 Church Street ,16th Floor Hartford CT 06103 | | | | | | | | | | | | |
| F. EMPLOYE | | AND ZIP CODE | | | | | | | | EMPLOYEE PLA | | | |
| 15. STATE NJ | 943-326-47 | S STATE ID NUMBER 76/000 | 16. STATE WAG | ES, TIPS, E 2929 | | 17. STATE INCOME | TAX 1424.42 | 18. LOCAL WAGES, T | IPS, ETC. 19 | LOCAL INCOME TAX | 20. LOCALITY NAME | | |

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