								Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5	
To the right is an e	explanation of a	nur W-2 wans	**			Gross Wage	s	124999.9	2 124999.9	92 124999.92	
Please note that the Gross amount may include adjustments.						Txbl Benefit	ts				
This information is being furnished to the Internal Revenue Service. If you are						Group Term	Life	69.0	4 69.0	04 69.04	
required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fall to report it.						Adoption					
						Deferred Co Section 125		(8341.95		5) (8341.95)	
Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS							x/Wage Limit	(0341.93	0341.9	3) (8341.93)	
						W-2 Wages		100685.2			
D. CONTROL NUMBER 000453491801			2022	омв	NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSA 100685.		2. FEDERAL INCOME TA	х WITHHELD 14949.60	
B. EMPLOYER IDENTIFICATION NUMBER (BN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER 20-3469219 XXX-XX-6699							CURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD 7237 07		
C. EMPLOYER'S NAME, ADDRESS, AND 2IP CODE							WAGES AND TIPS	.01	6. MEDICARE TAX WITHHELD		
INFOR (US), LLC 13560 Morris Road							116727	.01	1692.54 8. ALLOCATED TIPS		
Suite 4100							CURITY TIPS		6. ALLOCATED TIPS		
Alpharetta GA 30004							9.			10. DEPENDENT CARE BENEFITS	
							IFIED PLANS		12.a-d See instructions fo	rbox 12 69.04	
Sandeep 13085 Morris Rd		Citigor	1			14. OTHER			D	16041.74	
Unit 12206						14.0111211			W DD	7109.15 14586.26	
Alpharetta GA 30004 USA								i	13. STATUTORY RETIR	FMFNT THROPARTY	
F. EMPLOYEE'S ADDRESS A 15. STATE EMPLOYER'S	STATE ID NUMBER	16. STATE WAGE	ES, TIPS, ET	c.	17. STATE INCOME	AX	18.LOCAL WAGES, TI		EMPLOYEE PLAN LOCAL INCOME TAX	20. LOCALITY NAME	
GA 3073982-0	OP		100685.	27		5302.35					
D. CONTROL NUMBER					NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSA	TION	2. FEDERAL INCOME TA	X WITHHELD	
000453491801			2022				100685	.27		14949.60	
B. EMPLOYER IDENTIFICATION NUMBER (BN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER 20-3469219 XXX-XX-6699					3. SOCIAL SECURITY WAGES 116727.01			4. SOCIAL SECURITY TAX WITHHELD 7237.07			
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE						5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD		
INFOR (US), LLC 13560 Morris Road						7. SOCIAL SECURITY TIPS		1692.54 8 ALLOCATED TIPS			
Suite 4100						7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS			
Alpharetta GA 30004						9. 10. DEPENDENT CARE BENEFITS					
						11. NONQUAL	IFIED PLANS		12.a-d	69.04	
Sandeep Citigori						14. OTHER			D	16041.74	
13085 Morris Rd Unit 12206									W	7109.15 14586.26	
Alpharetta GA 30004 USA F. EMPLOYEE'S ADDRESS AND 2IP CODE								i	13, STATUTORY RETIR	THIRD-PARTY SICK PAY	
15. STATE EMPLOYERS	STATE ID NUMBER	16. STATE WAGE			17. STATE INCOME 1		18. LOCAL WAGES, TI			20. LOCALITY NAME	
GA 3073982-0			100685.			5302.35			_		
Copy 2-To Be Filed Wit FORM W-2 Wage			Local Inco	me T	ax Return	2022	Departi	nent of th	e Treasury - Inter	nal Revenue Service	
D. CONTROL NUMBER						1, WAGES, T	IPS, OTHER COMPENSA	TION I	2. FEDERAL INCOME TA	X WITHHELD	
000453491801					NO. 1545-0008		100685			14949.60	
B. EMPLOYER IDENTIFICATI 20-3469219	ION NUMBER (DN)	A. EMPLOYEE'S XXX-XX-6699	SOCIAL SECI	JRITY N	UMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY TA		
C. EMPLOYER'S NAME, AD	DRESS, AND ZIP C					5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	7237.07 HHELD	
INFOR (US), LLC							116727	.01		1692.54	
13560 Morris Road Suite 4100						7. SOCIAL SEC	JURITY TIPS		8. ALLOCATED TIPS		
Alpharetta GA 30004						9.			10. DEPENDENT CARE E	IENEFITS	
E. EMPLOYEE'S FIRST NAME	E AND INITIAL	LAST NA			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d		
Sandeep		Citigor	1			14, OTHER			C D	69.04 16041.74	
13085 Morris Rd Unit 12206						14. OTHER			w	7109.15	
Alpharetta GA 30004								}	DD 13. STATUTORY RETIR	14586.26 IEMENT THIRD-PARTY	
F. EMPLOYEE'S ADDRESS A	ND ZIP CODE STATE ID NUMBER	16 STATE WHICH	ES TIBS FT	,	17. STATE INCOME	AV	18.LOCAL WAGES, TI		EMPLOYEE PLAN LOCAL INCOME TAX	20, LOCALITY NAME	
GA 3073982-0	OP	AN JUNE WHO	100685.	27	AT STATE INCOME	5302.35					
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 000453491801			2022	OMB	NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSA: 100685.		2. FEDERAL INCOME TA	X WITHHELD 14949 60	
B. EMPLOYER IDENTIFICATI	ION NUMBER (FIN)	A. EMPLOYEE'S				3, SOCIAL SE		41	4. SOCIAL SECURITY TA		
20-3469219		XXX-XX-6699					116727	.01		7237.07	
C. EMPLOYER'S NAME, ADI INFOR (US), LLC	DRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS 116727	01	6. MEDICARE TAX WIT	HHELD 1692.54	
13560 Morris Road						7. SOCIAL SEC			8. ALLOCATED TIPS	1692.54	
Suite 4100 Alpharetta GA 30004						_					

10. DEPENDENT CARE BENEFITS