b Employer identification number (EIN) c Employer's name, address, and ZIP code		12a See DD	instructions for Box 12 201.45	1 Wages, tips, other compensation 39820.63	2 Federal income tax withheld 4510.74
ROBERT HALF INTERNATIONAL INC A ROBERT HALF INTERNATIONAL COMPANY 2613 CAMINO RAMON SAN RAMON, CA 94583		12b		3 Social security wages	4 Social security tax withheld
		12c		5 Medicare wages and tips	6 Medicare tax withheld
		12d		7 Social security tips	8 Allocated tips
		12e		9	10 Dependent care benefits
ent Employee's name, address, and ZIP code		furnishe	ormation is being d to the Internal e Service	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
SHRUTIKA RUDRAWAR APT D10H 3333 BROADWAY NEW YORK, NY 10031-8709			y B—To Be Filed th Employee's	14 Other NY SDI	19.20
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Form W-2 Wage and Tax Statement 2022 Department of the Tre	easury-Internal Revenue Service	OMR#	1545-0008	Copy B — To Be Filed	l With Employee's FEDERAL Tax Return
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SAN RAMON, CA 94583		12d		7 Social security tips	8 Allocated tips
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