2023 W-2 and EARNINGS SUMMARY

W-2 Wage a State	nent ZUZU
d Control number Dept.	Corp. Employer use only
0000001456 TQJ c Employer's name, address,	RWO7 C S 148
XCENDA LLC 1 WEST FIRST AVENI CONSHOHOCKEN, PA	
e/f Employee's name, address. RAGHAVA DANWAD 10424 SPADE DRIVE LOMA LINDA, CA 9235	A
b Employer's FED ID number 04-3697141	a Employee's SSA number XXX-XX-1641
1 Wages, tips, other comp.	2 Federal income tax withheld
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans 14 Other	12a See instructions for box 12 DD 2599.20
5.1101	12c 12d
15 State Employer's state ID no	13 Stat emp. Ret, plan 3rd party sick pay
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name
1 Wages, tips, other comp.	2 Federal income tax withheld
3 Social security wages	4 Social security tax withheld
Medicare wages and tips	6 Medicare tax withheld
	Corp. Employer use only
Control number Dept.	RW07 C S 148
d Control number Dept.	RWO7 C S 148 and ZIP code
Control number 0000001456 TQJ Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141	RWO7 C S 148 Ind ZIP code JE A 19428 a Employee's SSA number XXX-XX-1641
Control number 0000001456 TQJ Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141 Social security tips	RWO7 C S 148 Ind ZIP code JE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips
Control number 0000001456 TQJ Employer's name, address, a XCENDA LLC WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141	RWO7 C S 148 Ind ZIP code JE A 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits
a Control number Oppt. O000001456 TQJ Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141 Social security tips	RWO7 C S 148 Ind ZIP code JE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 DD 2599.20
a Control number Oppt. O000001456 TQJ Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141 Social security tips	RWO7 C S 148 Ind ZIP code JE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12
a Control number Oppt. O000001456 TQJ Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141 Social security tips	RWO7 C S 148 Ind ZIP code JE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 DD 2599.20 12b 12c 12d
Control number 0000001456 TQJ Employer's name, address, a XCENDA LLC WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141 Social security tips Nonqualified plans	RWO7 CS 148 Ind ZIP code JE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 DD 2599.20 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code
Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Demployer's FED ID number 04-3697141 Social security tips 1 Nonqualified plans 4 Other Temployee's name, address a RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 9235	RWO7 CS 148 Ind ZIP code JE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 DD 2599.20 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code
a Control number 0000001456 TQJ Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141 Social security tips Nonqualified plans Other Temployee's name, address and the security tips RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 9235.	RWO7 CS 148 Ind ZIP code JE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 DD 2599.20 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code
d Control number 0000001456 TQJ Employer's name, address, a XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA Employer's FED ID number 04-3697141 Social security tips Nonqualified plans Other Temployee's name, address RAGHAVA DANWADA 10424 SPADE DRIVE	RWO7 C S 148 Ind ZIP code IE 19428 a Employee's SSA number XXX-XX-1641 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 DD 2599.20 12b 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay and ZIP code A 16 State wages, tips, etc.

ADDITIONAL W-2 FOR BOX 12 OR 14 OVERFLOW

RAGHAVA DANW 10424 SPADE DRIV LOMA LINDA, CA 9	E	Social Sec	curity Number: XXX-XX-1641
© 2023 ADP, Inc.	etach Here ¬ PAGE 2 OF	2	
1 Wages, tips, other comp.	2 Federal income tax withheld	1 Wages, tips, other comp	o. 2 Federal income tax withheld
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tip	s 6 Medicare tax withheld
d Control number Dept.	Corp. Employer use only	d Control number	Dept. Corp. Employer use only
0000001456 TQJ c Employer's name, address, a	RW07 C S 148	0000001456 TQJ	RW07 C S 148
XCENDA LLC 1 WEST FIRST AVENU CONSHOHOCKEN, PA	A 19428	XCENDA LLC 1 WEST FIRST AV CONSHOHOCKE	N, PA 19428
b Employer's FED ID number 04-3697141	a Employee's SSA number XXX-XX-1641	b Employer's FED ID nu 04-3697141	imber a Employee's SSA number XXX-XX-1641
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
4	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	DD 2599.20	11 Nonqualified plans	DD 2599,20
14 Other	12b	14 Other	12b
	12c		12c
	12d		12d
	13 Stat emp. Ret. plan 3rd party sick pay	,	13 Stat emp. Ret. plan 3rd party sick pay
e/f Employee's name, address RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 9235	A	e/f Employee's name, add RAGHAVA DANV 10424 SPADE DRIV LOMA LINDA, CA	VADA /E
15 State Employer's state ID no.	16 State wages, tips, etc. 18 Local wages, tips, etc. 20 Locality name	15 State Employer's state	ID no. 16 State 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
. State Filing (Wage an Statem Copy 2 to be filed with employee's	d Tax 2023	W-2 Wag	cal Filing Copy e and Tax atement 2023

2023 W-2 and EARNINGS SUMMARY

Wage and Tax Statement C for employee's records Control number Corp. Employer use only 0000001456 TQJ **RW07** CS 147 c Employer's name, address, and ZIP code

Employee Reference Copy

XCENDA LLC 1 WEST FIRST AVENUE **CONSHOHOCKEN, PA 19428**

e/f Employee's name, address, and ZIP code RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 92354

a Employee's SSA number
XXX-XX-1641
2 Federal income tax withheld b Employer's FED ID number 04-3697141 Wages, tips, other comp. 16317.31 94094.07 3 Social security wages 4 Social security tax withheld 97470.34 6043.16 6 Medicare tax withheld Medicare wages and tips 97470.34 1413.32 8 Allocated tips Social security tips 10 Dependent care benefits 12a See instructions for box 12 C | 61.04 12b D | 3376.27 12c W | 953.90 Nonqualified plans 14 Other 865.28 CA SDI 12c W 12d AA | 1807.45 13 Stat emp. | Ret. plan | 3rd party sick pa 15 State Employer's state ID no. 16 State wages, tips, etc. 269-2577 94094.07 CA 17 State income tax 18 Local wages, tips, etc. 7252.33 19 Local income tax 20 Locality name

The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement, plus any additional compensation or adjustments received after the payroll close.

Your gross pay may not match your box 1 totals due to adjustments made for GTL, 401(k), cafeteria plans, etc...

> To change your employee W-4 profile information file a new W-4 with your payroll department.

> > Social Security Number: XXX-XX-1641

RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 92354

94094.07

97470.34

97470.34 Control number Dept.



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1 Wages, tips, other comp.

5 Medicare wages and tips

3 Social security wages

PAGE 1 OF 2

16317.31

6043.16

1413.32

Employer use only

2 Federal income tax withheld

4 Social security tax withheld

6 Medicare tax withheld

Corp.

1 Wages, tips, other comp. 94094.07		2 Federa	I income tax withheld 16317.31
3 Social security wage 97470		4 Social	security tax withheld 6043.16
5 Medicare wages and tips 97470.34		6 Medica	re tax withheld 1413.32
d Control number	Dept.	Corp.	Employer use only
0000001456 TQJ		RW07	C S 147
c Employer's name, a	ddress, a	and ZIP co	ode

XCENDA LLC

1 WEST FIRST AVENUE CONSHOHOCKEN, PA 19428

b Employer's FED ID number 04-3697141	a Emplo	yee's SSA number XXX-XX-1641
7 Social security tips	8 Alloca	ted tips
4	10 Depe	ndent care benefits
11 Nonqualified plans		nstructions for box 12
	C	61.04
14 Other 865.28 CA SDI	^{12b} D	3376.27
303.25 CA 3D1	12cW	953.90
	12d AA	1807.45
	13 Stat em	p. Ret. plan 3rd party sick pay
e/f Employee's name, address	and ZIP	code

RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 92354

15 State	Employer's state ID no.	16	State wages, tips, etc.	
CA	269-2577 6	.*	94094.07	
17 State income tax 7252.33		18	Local wages, tips, etc.	
19 Local	income tax	20	Locality name	
ı		1		

Federal Filing Copy
Wage and Tax Statement

to be filed with employee's Federal Income Tax Return.

0000001456 TQJ	RWO7 C S 147				
c Employer's name, address, and ZIP code					
XCENDA LLC 1 WEST FIRST AVENUE CONSHOHOCKEN, PA 19428					
b Employer's FED ID numbe 04-3697141	r a Employee's SSA number XXX-XX-1641				
7 Social security tips	8 Allocated tips				
9	10 Dependent care benefits				
11 Nonqualified plans	12a C 61.04				

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12bD 14 Other 3376.27 865.28 CA SDI 12cW 953.90 12dAA 1807.45 13 Stat emp. Ret. plan 3rd party sick pay e/f Employee's name, address and ZIP code

RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 92354

15 State Employer's state ID no. 16 State wages, tips, etc. 269-2577 94094.07 CA 18 Local wages, tips, etc. 17 State income tax 7252.33 19 Local income tax 20 Locality name

CA. State Filing Copy

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.

1	1 Wages, tips, other comp. 94094.07		2 Federal income tax withhe 16317.31	
3	3 Social security wages 97470.34		4 Social security tax withheld 6043.16	
5	5 Medicare wages and tips 97470.34		6 Medica	re tax withheld 1413.32
d	Control number	Dept.	Corp.	Employer use only
	0000001456 TQJ		RW07	C S 147

c Employer's name, address, and ZIP code **XCENDA LLC** 1 WEST FIRST AVENUE **CONSHOHOCKEN, PA 19428**

a Emplo	yee's SS XXX-X	A number X-1641
8 Alloca	ted tips	
10 Depe	ndent car	e benefits
12a		
C		61.04
12b D		3376.27
12c W		953.90
12d AA		1807.45
13 Stat em	p. Ret. plan	3rd party sick pa
	8 Alloca 10 Depe 12a C 12b D 12c W 12d AA	C 12b D 12c W

e/f Employee's name, address and ZIP code

RAGHAVA DANWADA 10424 SPADE DRIVE LOMA LINDA, CA 92354

15 State	Employer's state ID no.	16	State wages, tips, etc.	
CA	269-2577 6		94094.07	
17 State	income tax 7252.33	18	Local wages, tips, etc.	
19 Local	income tax	20	Locality name	
	CA 17 State	17 State income tax	7252.33	17 State income tax 7252.33 18 Local wages, tips, etc.

City or Local Filing Cop Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return