

b Employer identification number (EIN) 94-1648752
c Employer's name, address, and ZIP code
 ROBERT HALF INC.
 A ROBERT HALF COMPANY
 2613 CAMINO RAMON
 SAN RAMON, CA 94583

ef Employee's name, address, and ZIP code
 RITU BARNA
 APT 1109
 100 WELLS ST
 HARTFORD, CT 06103-2925

REISSUED STATEMENT Import Code: V7U97AA9

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax
CT	6646988000	11647.24	465.16

Form **W-2 Wage and Tax Statement 2023** Department of the Treasury-Internal Revenue Service OMB # 1545-0008

12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
	11647.24	
12b	3 Social security wages	4 Social security tax withheld
	11647.24	722.13
12c	5 Medicare wages and tips	6 Medicare tax withheld
	11647.24	168.88
12d	7 Social security tips	8 Allocated tips
12e	9	10 Dependent care benefits
This information is being furnished to the Internal Revenue Service	11 Nonqualified plans	13 Statutory employee Retirement plan Third-party sick pay
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Copy B—To Be Filed With Employee's FEDERAL Tax Return	14 Other	
	CTPL	58.24
a Employee's social security number		
***-**-7119		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

b Employer identification number (EIN) 94-1648752
c Employer's name, address, and ZIP code
 ROBERT HALF INC.
 A ROBERT HALF COMPANY
 2613 CAMINO RAMON
 SAN RAMON, CA 94583

ef Employee's name, address, and ZIP code
 RITU BARNA
 APT 1109
 100 WELLS ST
 HARTFORD, CT 06103-2925

REISSUED STATEMENT Import Code: V7U97AA9

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax
CT	6646988000	11647.24	465.16

Form **W-2 Wage and Tax Statement 2023** Department of the Treasury-Internal Revenue Service OMB # 1545-0008

12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
	11647.24	
12b	3 Social security wages	4 Social security tax withheld
	11647.24	722.13
12c	5 Medicare wages and tips	6 Medicare tax withheld
	11647.24	168.88
12d	7 Social security tips	8 Allocated tips
12e	9	10 Dependent care benefits
This information is being furnished to the Internal Revenue Service	11 Nonqualified plans	13 Statutory employee Retirement plan Third-party sick pay
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return	14 Other	
	CTPL	58.24
a Employee's social security number		
***-**-7119		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

b Employer identification number (EIN) 94-1648752
c Employer's name, address, and ZIP code
 ROBERT HALF INC.
 A ROBERT HALF COMPANY
 2613 CAMINO RAMON
 SAN RAMON, CA 94583

ef Employee's name, address, and ZIP code
 RITU BARNA
 APT 1109
 100 WELLS ST
 HARTFORD, CT 06103-2925

REISSUED STATEMENT Import Code: V7U97AA9

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax
CT	6646988000	11647.24	465.16

Form **W-2 Wage and Tax Statement 2023** Department of the Treasury-Internal Revenue Service OMB # 1545-0008

12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
	11647.24	
12b	3 Social security wages	4 Social security tax withheld
	11647.24	722.13
12c	5 Medicare wages and tips	6 Medicare tax withheld
	11647.24	168.88
12d	7 Social security tips	8 Allocated tips
12e	9	10 Dependent care benefits
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.	11 Nonqualified plans	13 Statutory employee Retirement plan Third-party sick pay
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return	14 Other	
	CTPL	58.24
a Employee's social security number		
***-**-7119		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

b Employer identification number (EIN) 94-1648752
c Employer's name, address, and ZIP code
 ROBERT HALF INC.
 A ROBERT HALF COMPANY
 2613 CAMINO RAMON
 SAN RAMON, CA 94583

ef Employee's name, address, and ZIP code
 RITU BARNA
 APT 1109
 100 WELLS ST
 HARTFORD, CT 06103-2925

REISSUED STATEMENT Import Code: V7U97AA9

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax
CT	6646988000	11647.24	465.16

Form **W-2 Wage and Tax Statement 2023** Department of the Treasury-Internal Revenue Service OMB # 1545-0008

12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
	11647.24	
12b	3 Social security wages	4 Social security tax withheld
	11647.24	722.13
12c	5 Medicare wages and tips	6 Medicare tax withheld
	11647.24	168.88
12d	7 Social security tips	8 Allocated tips
12e	9	10 Dependent care benefits
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.	11 Nonqualified plans	13 Statutory employee Retirement plan Third-party sick pay
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Copy C—For EMPLOYEE'S RECORDS (see Notice to Employee on back)	14 Other	
	CTPL	58.24
a Employee's social security number		
***-**-7119		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name