

a Employee's SSN 079-31-8692		b Employer identification number (EIN) 99-0374574			OMB No. 1545-0008	
c Employer's name, address, and ZIP code OPULENTSOFT LLC 3525 QUAKERBRIDGE ROAD SUITE:3600 HAMILTON NJ 08619		1 Wgs, tips, other compn 49348.00	2 Fed inc tax withheld 7035.00	3 Social security wages 49348.00		
		4 SS tax withheld 3059.58	5 Medicare wages & tips 49348.00	6 Medicare tax withheld 715.55		
		7 Social security tips	8 Allocated tips	9		
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a		
e Employee's name, address, and ZIP code Roopali Gupta 22633 N HANCE BLVD PHOENIX AZ 85027		13 Statutory employee <input type="checkbox"/>		14 Other		12b
		Retirement plan <input type="checkbox"/>				12c
		Third-party sick pay <input type="checkbox"/>				12d
15 State AZ	Employer's state ID number 990374574	16 State wages, tips, etc 49348.00	17 State income tax 1233.70	18 Local wages, tips, etc	19 Local income tax	20 Locality name

Form **W-2**
Wage and Tax Statement
2023

Copy B To Be Filed with Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service.

REV 12/19/23 QBDT

Department of the Treasury — IRS

a Employee's SSN 079-31-8692		b Employer identification number (EIN) 99-0374574			OMB No. 1545-0008	
c Employer's name, address, and ZIP code OPULENTSOFT LLC 3525 QUAKERBRIDGE ROAD SUITE:3600 HAMILTON NJ 08619		1 Wgs, tips, other compn 49348.00	2 Fed inc tax withheld 7035.00	3 Social security wages 49348.00		
		4 SS tax withheld 3059.58	5 Medicare wages & tips 49348.00	6 Medicare tax withheld 715.55		
		7 Social security tips	8 Allocated tips	9		
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a		
e Employee's name, address, and ZIP code Roopali Gupta 22633 N HANCE BLVD PHOENIX AZ 85027		13 Statutory employee <input type="checkbox"/>		14 Other		12b
		Retirement plan <input type="checkbox"/>				12c
		Third-party sick pay <input type="checkbox"/>				12d
15 State AZ	Employer's state ID No. 990374574	16 State wages, tips, etc 49348.00	17 State income tax 1233.70	18 Local wages, tips, etc	19 Local income tax	20 Locality name

Form **W-2**
Wage and Tax Statement
2023

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

REV 12/19/23 QBDT

a Employee's SSN 079-31-8692		b Employer identification number (EIN) 99-0374574			OMB No. 1545-0008		
c Employer's name, address, and ZIP code OPULENTSOFT LLC 3525 QUAKERBRIDGE ROAD SUITE:3600 HAMILTON NJ 08619		<small>This information is being furnished to the IRS. 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.</small>					
		1 Wgs, tips, other compn 49348.00	2 Fed inc tax withheld 7035.00	3 Social security wages 49348.00			
		4 SS tax withheld 3059.58	5 Medicare wages & tips 49348.00	6 Medicare tax withheld 715.55			
d Control No.		7 Social security tips	8 Allocated tips	9			
e Employee's name, address, and ZIP code Roopali Gupta 22633 N HANCE BLVD PHOENIX AZ 85027		10 Depdnt care benefits		11 Nonqualified plans	12a		
		13 Statutory employee <input type="checkbox"/>		14 Other		12b	
		Retirement plan <input type="checkbox"/>				12c	
Third-party sick pay <input type="checkbox"/>		12d					
15 State AZ	Employer's state ID No. 990374574	16 State wages, tips, etc 49348.00	17 State income tax 1233.70	18 Local wages, tips, etc	19 Local income tax	20 Locality name	

Form **W-2**
Wage and Tax Statement
2023

Copy C For EMPLOYEE'S RECORDS.
(See Notice to Employee.)

REV 12/19/23 QBDT