2022 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's record Control number 365 CLI2/VEM

Employer's name, address, and ZIP code

HASBRO MANAGERIAL SERVIC **ES LLC** 1027 NEWPORT AVE C-923 **PAWTUCKET RI 02861**

Batch #02499

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

OMKAR C LIGADE 4 CENTRE STREET ROXBURY MA 02119

b	Emplo		ED ID r 38948		а	Emp		ee's SS. (XX-X)		
1	Wage	s, tips,	other c	omp.	2	Fede	ral	income	tax with	nheld
			2019	98.75					1611	1.81
3	Socia	l secur	ity wage	s	4	Soci	al s	security	tax with	held
5	Medic	are wa	iges and	tips	6	Med	ica	re tax wi	thheld	
7	Social	secur	ity tips		8	Allo	cate	ed tips		
9					10	Depe	nd	ent care	benefit	s
11	Nonqu	ualified	plans		12	Seei	nstr 	uctions fo	r box 12	
11	Other				12		Τ			
14	Other		222.19 SDI	120	3					
		222.19 SDI	וי [120	d					
					13	Stat e	mp	Ret. plan	3rd party	sick pay
			oyer's st 89480	ate ID no.	16	State	e w	ages, tip	s, etc. 2019	3.75
17 State income tax		18	Loca	ıl w	ages, tip	s, etc.				
			75	57.45						
19 Local income tax			20	20 Locality name						

20198.75 1611.81 Social security wages Social security tax withheld Medicare wages and tips 6 Medicare tax withheld d Control number Employer use only 014109 CLI2/VEM 365 Employer's name, address, and ZIP code

HASBRO MANAGERIAL SERVIC

ES LLC 1027 NEWPORT AVE C-923 PAWTUCKET RI 02861

b	Employer's FED ID number 05-0389480	a Employee's SSA number XXX-XX-2350				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a See	instruc	tio	ns for box 12	
14	Other	12b				
	222.19 SDI	12c				
		12d				
		13 Stat em	p. Ret. p	lan	3rd party sick pay	
e/i	e/f Employee's name, address and ZIP code					

OMKAR C LIGADE 4 CENTRE STREET ROXBURY MA 02119

15 State	Employer's state ID no. 05038948000	16 State wages, tips, etc. 20198.75			
17 State	income tax	18 Local wages, tips, etc.			
	757.45				
19 Local	income tax	20 Locality name			
	Federal Fili	ng Copy			

Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Retu This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	RI. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	20,198.75	20,198.75	20,198.75	20,198.75
Less Exempt Wages	N/A	20,198.75	20,198.75	N/A
Reported W-2 Wages	20,198.75	0.00	0.00	20,198.75

2. Employee Name and Address.

OMKAR C LIGADE 4 CENTRE STREET **ROXBURY MA 02119**

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1 Wages, tips, other comp. 20198.75	2 Federal income tax withheld 1611.81	1 Wages
3 Social security wages	4 Social security tax withheld	3 Social
5 Medicare wages and tips	6 Medicare tax withheld	5 Medica
d Control number Dept.	Corp. Employer use only	d Contro
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c Employer's name, address, a	and ZIP code	c Emplo
HASBRO MANA ES LLC 1027 NEWPOR' PAWTUCKET R		H E 1 P
b Employer's FED ID number 05-0389480	a Employee's SSA number	b Emplo
7 Social security tips	8 Allocated tips	7 Social
9	10 Dependent care benefits	9
11 Nonqualified plans	12a	11 Nonqu
14 Other 222.19 SDI	12b 12c	14 Other
	13 Stat emp. Ret. plan 3rd party sick pay	
e/f Employee's name, address a	and ZIP code	e/f Emplo
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ROXBURY MA 02119	,	ROXBU
15 State Employer's state ID no RI 05038948000	p. 16 State wages, tips, etc. 20198.75	15 State
17 State income tax	18 Local wages, tips, etc.	17 State i
757.45 19 Local income tax	20 Locality name	19 Local
RI.State Ref	ference Copy	
	and Tax	10/
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Statement

Copy 2 to be filed with employee's State Income Tax Retu

20198.75				1611.81				
3	Social security wag	4 Social security tax withheld						
5	Medicare wages and tips			6 Medicare tax withheld				
d	Control number Dept.			Corp. Employer use only				
01	4109 CLI2/VEM				Т	365		
С	Employer's name, a	ddress, aı	nd ZIF	cod	е			
	1027 NEV PAWTUCK	KET RI	02	861				
b	Employer's FED ID 05-038948		a Er		/ee's SSA (XX-XX			
7	Social security tips		8 Allocated tips					
9				10 Dependent care benefits				
11	Nonqualified plans			12a				

2 Federal income tax withheld

12c 222.19 SDI 12d 13 Stat emp. Ret. plan 3rd party sick pay e/f Employee's name, address and ZIP code

12b

OMKAR C LIGADE 4 CENTRE STREET **ROXBURY MA 02119**

Wages, tips, other comp.

15 State RI	Employer's state ID no. 05038948000	16 State wages, tips, etc. 20198.75
17 State	income tax	18 Local wages, tips, etc.
	757.45	
19 Local	income tax	20 Locality name
	RI.State Filin	д Сору

Wage and Tax

Statement Copy 2 to be filed with employee's State Income Tax