| Outsourcing for HPL Benefits and Payroll | | Year To | Year To Date Earnings | | | | Year To Date Deductions | | |
|--|--|----------------------------|---|--|--|---|--|--|--|
| | | Group Engage | Group Term Life > \$50,000 Engagement Performance Bonus | | | 73.37 Dental Pre-Tax 106.50 5312.91 Group Term Life > \$50.000 73.37 8885.00 Medical Pre-Tax 3443.26 Vision Pre-Tax 224.60 | | | |
| 011-001996-W2-W2-08854-HCL | | | | | | Vision Pre-Tax Voluntary Life Insurance 41.42 | | | |
| Social Security No.: XXX-XX-3657 | | | | | | | | | |
| a Employee's social security number d Control number XXX - XX - 3657 063585 WY/0T3 | | | 7 Social security tips | | 1 Wages, tips, other compensation 120496.92 | | on 2 Federal income tax withheld 8733.70 | | |
| c Employer's name, address, and ZIP code HCL AMERICA INC. 2600 Great America Way, suite 401 | | | 8 Allocated tips | | 3 Social security wages 120496.92 | | 4 Social security tax withheld 7470.81 | | |
| | | | 9 | | 5 Medicare wages and tips | | 6 Medicare tax withheld | | |
| Santa Clara, CA 95054 | | 10 Dependent care benefits | | 120496.92 6 12a See instructions for box 12 | | 1747.21 C 12b D D 17120.52 | | | |
| b Employer identification number (EIN) 77-0205035 e Employee's first name and initial Last name | | Suff. | 11 Nonqualif | | © 12c | 73.37 | © 12d | 1/120.52 | |
| RANJITH KUMAR BHEEMARAPU 271 A PLEASANTVIEW DR | | | 13 Statutory Retirement Third-party | | 14 Other | | d • | | |
| PISCATAWAY, NJ 08854 f Employee's address and ZIP co | | employee plan sick pay | | NJ-FLI NJ-UHW | 74.52 174.69 | | | | |
| 15 State Employer's State ID No NJ 770-205-035/000 | The Control of the Co | 17 State incom | ne tax 486.73 | 18 Local wages, to | ips, etc. 19 l | ocal income tax | 20 Loca | ality name | |
| 2023 OMB No. 1545-0008 Form W | -2 Wage and Tax State | ement | State Filing Co | | | Employee's State, C y-Internal Revenue Si | | ncome Tax Return. | |
| a Employee's social security number XXX - XX - 3657 d Control number 063585 WY/0T3 | | | 7 Social security tips | | 1 Wages, tips, other compensation 120496.92 | | 2 Federal income tax withheld 8733.70 | | |
| c Employer's name, address, and ZIP code HCL AMERICA INC. 2600 Great America Way, suite 401 Santa Clara, CA 95054 b Employer identification number (EIN) 77-0205035 | | | 8 Allocated t | ips | 3 Social security wages 120496.92 | | 4 Social security tax withheld 7470.81 | | |
| | | | 9 | | 5 Medicare wages and tips 120496.92 | | 6 Medicare tax withheld 1747.21 | | |
| | | | 10 Depender | nt care benefits | C 12a See inst | ructions for box 12 73.37 | © 12b | 17120.52 | |
| e Employee's first name and initial Last name Suff. | | | 11 Nonqualif | ied plans | C 12c | | C 12d | | |
| RANJITH KUMAR BHEEMARAPU 271 A PLEASANTVIEW DR PISCATAWAY, NJ 08854 f Employee's address and ZIP code | | | 13 Statutory Retirement Third-party employee plan sick pay NJ-FL NJ-UH | | | 74.52 174.69 | | | |
| 15 State Employer's State ID No NJ 770-205-035/000 | | 17 State incom | e tax | 18 Local wages, t | ips, etc. 19 i | ocal income tax | 20 Loca | ality name | |
| 2023 OMB No. 1545-0008 Form W-2 Wage and Tax Statement a Employee's social security number d Control number 063585 WY/0T3 c Employer's name, address, and ZIP code HCL AMERICA INC. 2600 Great America Way, suite 401 Santa Clara, CA 95054 | | | | | De Filed With Employee's FEDERA of the Treasury-Internal Revenue Se 1 Wages, tips, other compensation 120496.92 3 Social security wages 120496.92 5 Medicare wages and tips | | 2 Federal income tax withheld 8733.70 4 Social security tax withheld 7470.81 6 Medicare tax withheld | | |
| | | | 10 Dependent care benefits | | 120496.92 C12a See instructions for box 12 | | \$ 12b | 1747.21 | |
| b Employer identification number (EIN) 77-0205035 e Employee's first name and initial Last name Suff. | | | 11 Nonqualified plans | | C 12c | 73.37 | © 12d | 17120.52 | |
| RANJITH KUMAR BHEEMARAPU 271 A PLEASANTVIEW DR PISCATAWAY, NJ 08854 f Employee's address and ZIP code | | | 13 Statutory Retirement Third-party employee plan sick pay 14 Other NJ-FI | | | | | | |
| | 6 State wages, tips, etc. | 17 State income | | | OF PERSONAL PROPERTY AND RESERVED. | THE RESERVE TWO DESIGNATIONS AND ADDRESS OF THE PARTY OF | | THE RESERVE OF THE PARTY OF THE | |

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