44444	For Official Use Only OMB No. 1545-0008	>	Safe, accurate, FAST! Use	Visit the IRS website at www.irs.gov.		
a Employer's name, address, and ZIP code		de	c Tax year/Form corrected	d Employee's correct SSN		
Consultadd Inc			2022 / W-2	876-14-2894		
5215 N O'Connor Blvd, Floor 12, Suite			e Corrected SSN and/or name (Check this box and complete boxes f and/or g if incorrect on form previously filed.)			
Irving		TX 75039	Complete boxes f and/or g only if incorrect on form previously filed			
			f Employee's previously reported SSN			
b Employer's Fe	deral EIN		g Employee's previously reported name			
27-45654	:33		L. Condensed first and addition	1		
			h Employee's first name and initial Sajud H	Last name Suff. Elinjulliparamb		
Note. Only com	nolete money fields the	at are being corrected (exception: for	41 Van Reypen St			
corrections invo	olving MQGE, see the	General Instructions for Forms W-2 for Form W-2c, boxes 5 and 6).	JETPSVEVS address and ZIP code	NJ 07306		
Previou	sly reported	Correct information	Previously reported	Correct information		
1 Wages, tips, of	ther compensation	1 Wages, tips, other compensation	2 Federal income tax withheld	2 Federal income tax withheld		
150357.4	10	183539.08	31033.63	37666.39		
3 Social securit	ty wages	3 Social security wages	4 Social security tax withheld	4 Social security tax withheld		
5 Medicare wag	ges and tips	5 Medicare wages and tips	6 Medicare tax withheld	6 Medicare tax withheld		
7 Social securit	ty tips	7 Social security tips	8 Allocated tips	8 Allocated tips		
9		9	10 Dependent care benefits	10 Dependent care benefits		
11 Nonqualified	plans	11 Nonqualified plans	12a See instructions for box 12	12a See instructions for box 12		
49 Statuton, Pot	irement Third-party	13 Statutory Retirement Third-party	åDD 2.60	DD 180.92		
employée plar	n sick pay	employee plan sick pay	12b	12b		
14 Other (see ins NJ FLI: 210.	,	14 Other (see instructions) NJ FLI: 212.65	12c C	12c c c		
NJ SDI: 210.	49	NJ SDI: 212.65	12d	្ត 12d		
			C o d e	C o d d e		
		State Correction				
15 State	sly reported	Correct information 15 State	Previously reported 15 State	Correct information 15 State		
NJ		NJ	13 State	19 State		
	ate ID number	Employer's state ID number	Employer's state ID number	Employer's state ID number		
274-565-		274-565-433/000	Employer distance is manifer	Employer o diate is number		
16 State wages,		16 State wages, tips, etc.	16 State wages, tips, etc.	16 State wages, tips, etc.		
150360.0		183720.00				
17 State income		17 State income tax	17 State income tax	17 State income tax		
8591.90		10540.45				
Locality Correction Information						
Previou	sly reported	Correct information	Previously reported	Correct information		
18 Local wages,	tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc.		
19 Local income tax 19		19 Local income tax	19 Local income tax	19 Local income tax		
20 Locality name	3	20 Locality name	20 Locality name	20 Locality name		

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a Employer's name, address, and ZIP code			c Tax year/Form corrected		d Employee's correct SSN		
Consultadd Inc			2022 _{/ W-2}		876-14-2894		
5215 N O'Connor Blvd, Floor 12, Suite			e Corrected SSN and/or name (Check this box and complete boxes f and/or g if incorrect on form previously filed.)				
Irving		TX 75039	Complete boxes f and/or g only if incorrect on form previously filed ► f Employee's previously reported SSN				
			1 Employee's previously re	eported SSN			
b Employer's Fe 27 – 45654		g Employee's previously reported name					
			h Employee's first name ar Sa jud	nd initial H	Last name Elin	e Suff. julliparamb	
•	nplete money fields the olving MQGE, see the	41 Van Reypen St Jersey City NJ 07306					
•	•	for Form W-2c, boxes 5 and 6).	Jersey City i Employee's address and		NJ		
	sly reported	Correct information	Previously repo			rrect information	
150357.4		1 Wages, tips, other compensation 183539.08	2 Federal income tax with 31033.63		2 Federal income tax withheld 37666.39		
3 Social securi	ty wages	3 Social security wages	4 Social security tax with	held	4 Socia	I security tax withheld	
5 Medicare wa	ges and tips	5 Medicare wages and tips	6 Medicare tax withheld		6 Medicare tax withheld		
7 Social securi	ty tips	7 Social security tips	8 Allocated tips		8 Allocated tips		
9		9	10 Dependent care benefit	:s	10 Depe	ndent care benefits	
11 Nonqualified	plans	11 Nonqualified plans	12a See instructions for box	x 12	12a See i	nstructions for box 12	
13 Statutory employee pla	tirement Third-party n sick pay	13 Statutory employee Plan Third-party sick pay	12b		12b		
14 Other (see ins	structions) . 49	14 Other (see instructions) NJ FLI: 212.65	12c		12c	1	
NJ SDI: 210	. 49	NJ SDI: 212.65	12d		12d		
			C o d e		C o d e	1	
		State Correction	l Information				
Previou	sly reported	Correct information	Previously reported Correct information				
15 State	, ,	15 State	15 State		15 State		
NJ		NJ					
Employer's st 274-565-	ate ID number -433/000	Employer's state ID number 274-565-433/000	Employer's state ID number		Employer's state ID number		
16 State wages, 150360.0		16 State wages, tips, etc. 183720.00	16 State wages, tips, etc.		16 State wages, tips, etc.		
17 State income 8591.90	tax	17 State income tax 10540.45	17 State income tax		17 State income tax		
Locality Correction Information							
	Previously reported Correct information		Previously reported		Correct information		
18 Local wages,	tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc. 18 Local wages, tips, etc.				
19 Local income	tax	19 Local income tax	19 Local income tax		19 Local income tax		
20 Locality name	9	20 Locality name	20 Locality name		20 Locality name		

Notice to Employee

This is a corrected Form W-2, Wage and Tax Statement, (or Form W-2AS, W-2CM, W-2GU, W-2VI or W-2c) for the tax year shown in box c. If you have filed an income tax return for the year shown, you may have to file an amended return. Compare amounts on this form with those reported on your income tax return. If the corrected amounts change your U.S. income tax, file Form 1040X, Amended U.S. Individual Income Tax Return, with Copy B of this Form W-2c to amend the return you already filed.

If there is a correction in box 5, Medicare wages and tips, use the corrected amount to determine if you need to file or amend Form 8959, Additional Medicare Tax. If you need to file Form 8959 or an amended Form 8959, attach it to Form 1040 or Form 1040X, as applicable.

If you have not filed your return for the year shown in box c, attach Copy B of the original Form W-2 you received from your employer and Copy B of this Form W-2c to your return when you file it.

For more information, contact your nearest Internal Revenue Service office. Employees in American Samoa, Commonwealth of the Northern Mariana Islands, Guam, or the U.S. Virgin Islands should contact their local taxing authority for more information.

44444	For Official Use Only OMB No. 1545-0008	>				
a Employer's na	me, address, and ZIP cod	de	c Tax year/Form corrected	d Employee's correct SSN		
Consultadd Inc			2022 / w-2	876-14-2894		
5215 N O'Connor Blvd, Floor 12, Suite			e Corrected SSN and/or name (Check this box and complete boxes f and/or g if incorrect on form previously filed.)			
Irving		TX 75039	Complete boxes f and/or g only if incorrect on form previously filed			
3			f Employee's previously reported SSN			
b Employer's Fe	deral EIN		g Employee's previously reported name			
27-45654	:33					
			h Employee's first name and initial Sajud H	Last name		
Note. Only complete money fields that are being corrected (exception: for corrections involving MQGE, see the General Instructions for W-2 and W-3,			41 Van Reypen St			
<u> </u>	Instructions for Form \	W-2c, boxes 5 and 6).	Jersey City Temployee's address and ZIP code	NJ 07306		
	sly reported	Correct information	Previously reported	Correct information		
•	ther compensation	1 Wages, tips, other compensation 183539.08	2 Federal income tax withheld	2 Federal income tax withheld		
150357.4			31033.63	37666.39		
3 Social securi		3 Social security wages	Social security tax withheld	4 Social security tax withheld		
5 Medicare wa	ges and tips	5 Medicare wages and tips	6 Medicare tax withheld	6 Medicare tax withheld		
7 Social securi	ty tips	7 Social security tips	8 Allocated tips	8 Allocated tips		
9		9	10 Dependent care benefits	10 Dependent care benefits		
11 Nonqualified	plans	11 Nonqualified plans	12a See instructions for box 12	12a See instructions for box 12 DD 180.92		
13 Statutory employee plan	rirement Third-party n sick pay	13 Statutory employee Plan Third-party sick pay	12b	12b		
14 Other (see ins	*	14 Other (see instructions) NJ FLI: 212.65	12c	12c		
NJ SDI: 210	. 49	NJ SDI: 212.65	12d	12d		
			d e	C O d e		
		State Correctio	l Information			
Previou	sly reported	Correct information	Previously reported	Correct information		
15 State	., .,	15 State	15 State	15 State		
NJ		NJ				
Employer's st 274-565-	ate ID number -433/000	Employer's state ID number $274-565-433/000$	Employer's state ID number	Employer's state ID number		
16 State wages,		16 State wages, tips, etc.	16 State wages, tips, etc.	16 State wages, tips, etc.		
150360.0	00	183720.00		O , payer		
17 State income	tax	17 State income tax	17 State income tax	17 State income tax		
8591.90		10540.45				
Locality Correction Information						
	isly reported	Correct information	Previously reported	Correct information		
18 Local wages,		18 Local wages, tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc.		
19 Local income	tax	19 Local income tax	19 Local income tax	19 Local income tax		
20 Locality name)	20 Locality name	20 Locality name	20 Locality name		