



# Your 2024 forms W-2 are enclosed

Happy new year! Gusto's here to make sure you have what you need for the upcoming tax season. Attached are your 2024 W-2 forms.

## What you should do with Forms W-2

This package includes three copies of the W-2. Here's how to use each of them:

- Copy B:** File this copy with your federal tax return by April 15th, 2025.
- Copy 2:** File this copy with your state tax return by April 15th, 2025.
- Copy C:** Keep this copy safe for your personal records.

## How to read Form W-2

The W-2 can be a bit confusing. Here's some information to help clarify:

- Box a:** Please ensure that your employee's SSN is accurate.
- Box 1:** Shows total wages that are subject to federal income tax. This amount does not include contributions to Medical, Dental, and Vision insurance under Section 125 plans, or contributions to retirement plans such as 401(k).
- Box 3:** Shows total wages subject to Social Security. It has a maximum of \$168,600 in 2024. This amount does not include contributions to Medical, Dental, and Vision insurance under Section 125 plans.
- Box 5:** Shows total wages subject to Medicare. This amount does not include contributions to Medical, Dental, and Vision insurance under Section 125 plans.

We hope this helps make tax season easier. If you have any questions about your W-2, please reach out to your employer.

a Employee's social security number  
766-72-8304

OMB No. 1545-0008

Safe, accurate,  
FAST! Use



Visit the IRS website at  
[www.irs.gov/efile](http://www.irs.gov/efile).

b Employer identification number (EIN) 88-1122629	1 Wages, tips, other compensation 228409.92	2 Federal income tax withheld 46106.96			
c Employer's name, address, and ZIP code  DeLorean Artificial Intelligence Inc 2875 South Ocean Blvd, Suite 200-60 Palm Beach FL 33480	3 Social security wages 168599.73	4 Social security tax withheld 10453.20			
	5 Medicare wages and tips 250999.92	6 Medicare tax withheld 4098.50			
	7 Social security tips	8 Allocated tips			
d Control number	9	10 Dependent care benefits			
e Employee's first name and initial Ram Prasad 5455 Gracen Way	Suff. Bora	11 Nonqualified plans  13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>  14 Other CA SDI: 2760.96	12a See instructions for box 12 D 22590.00		
Dublin	CA 94568		12b  12c  12d		
f Employee's address and ZIP code					
15 State Employer's state ID number CA 168-2715-6	16 State wages, tips, etc. 228409.92	17 State income tax 18502.16	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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

2024

Department of the Treasury—Internal Revenue Service

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

**Future developments.** For the latest information about developments related to Form W-2, such as legislation enacted after it was published, go to [www.irs.gov/FormW2](http://www.irs.gov/FormW2).

## Notice to Employee

**Do you have to file?** Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

**Earned income tax credit (EITC).** You may be able to take the EITC for 2024 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EITC if your investment income is more than the specified amount for 2024 or if income is earned for services provided while you were an inmate at a penal institution. For 2024 income limits and more information, visit [www.irs.gov/EITC](http://www.irs.gov/EITC). See also Pub. 596. **Any EITC that is more than your tax liability is refunded to you, but only if you file a tax return.**

**Employee's social security number (SSN).** For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

**Clergy and religious workers.** If you aren't subject to social security and Medicare taxes, see Pub. 517.

**Corrections.** If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at [www.SSA.gov](http://www.SSA.gov).

**Cost of employer-sponsored health coverage (if such cost is provided by the employer).** The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

**Credit for excess taxes.** If you had more than one employer in 2024 and more than \$10,453.20 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$6,129.90 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

(See also *Instructions for Employee* on the back of Copy C.)

	<b>a</b> Employee's social security number <b>766-72-8304</b>	OMB No. 1545-0008					
<b>b</b> Employer identification number (EIN) <b>88-1122629</b>		<b>1</b> Wages, tips, other compensation <b>228409.92</b>		<b>2</b> Federal income tax withheld <b>46106.96</b>			
<b>c</b> Employer's name, address, and ZIP code  DeLorean Artificial Intelligence Inc 2875 South Ocean Blvd, Suite 200-60 Palm Beach FL 33480		<b>3</b> Social security wages <b>168599.73</b>		<b>4</b> Social security tax withheld <b>10453.20</b>			
		<b>5</b> Medicare wages and tips <b>250999.92</b>		<b>6</b> Medicare tax withheld <b>4098.50</b>			
		<b>7</b> Social security tips		<b>8</b> Allocated tips			
<b>d</b> Control number		<b>9</b>		<b>10</b> Dependent care benefits			
<b>e</b> Employee's first name and initial Ram Prasad		<b>Suff.</b>	<b>11</b> Nonqualified plans		<b>12a</b> D 22590.00		
Bora			<b>13</b> Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	<b>12b</b> 	
5455 Gracen Way			<b>14</b> Other CA SDI: 2760.96		<b>12c</b> 		
Dublin CA 94568					<b>12d</b> 		
<b>f</b> Employee's address and ZIP code		<b>15</b> State Employer's state ID number CA 168-2715-6	<b>16</b> State wages, tips, etc. 228409.92	<b>17</b> State income tax 18502.16	<b>18</b> Local wages, tips, etc.	<b>19</b> Local income tax	<b>20</b> Locality name

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

**2024**

Department of the Treasury—Internal Revenue Service

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

## Instructions for Employee *(continued from back of Copy C)*

### Box 12 *(continued)*

- F**—Elective deferrals under a section 408(k)(6) salary reduction SEP  
**G**—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan  
**H**—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.  
**J**—Nontaxable sick pay (information only, not included in box 1, 3, or 5)  
**K**—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.  
**L**—Substantiated employee business expense reimbursements (nontaxable)  
**M**—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.  
**N**—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.  
**P**—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)  
**Q**—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.  
**R**—Employer contributions to your Archer MSA. Report on Form 8853.  
**S**—Employee salary reduction contributions under a section 408(p) SIMPLE plan  
**T**—Adoption benefits (not included in box 1). Complete Form 8839 to figure any taxable and nontaxable amounts.  
**V**—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525 for reporting requirements.  
**W**—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889.

**Y**—Deferrals under a section 409A nonqualified deferred compensation plan

**Z**—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

**AA**—Designated Roth contributions under a section 401(k) plan

**BB**—Designated Roth contributions under a section 403(b) plan

**DD**—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**

**EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

**FF**—Permitted benefits under a qualified small employer health reimbursement arrangement

**GG**—Income from qualified equity grants under section 83(i)

**HH**—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

**II**—Medicaid waiver payments excluded from gross income under Notice 2014-7.

**Box 13.** If the “Retirement plan” box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A.

**Box 14.** Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy’s parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

**Note:** Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

	<b>a</b> Employee's social security number <b>766-72-8304</b>	OMB No. 1545-0008	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.				
<b>b</b> Employer identification number (EIN) <b>88-1122629</b>		<b>1</b> Wages, tips, other compensation <b>228409.92</b>		<b>2</b> Federal income tax withheld <b>46106.96</b>			
<b>c</b> Employer's name, address, and ZIP code  DeLorean Artificial Intelligence Inc 2875 South Ocean Blvd, Suite 200-60 Palm Beach FL 33480		<b>3</b> Social security wages <b>168599.73</b>		<b>4</b> Social security tax withheld <b>10453.20</b>			
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		<b>7</b> Social security tips		<b>8</b> Allocated tips			
<b>d</b> Control number		<b>9</b>		<b>10</b> Dependent care benefits			
<b>e</b> Employee's first name and initial Ram Prasad		Last name Bora	Suff.	<b>11</b> Nonqualified plans		<b>12a</b> See instructions for box 12 D 22590.00	
5455 Gracen Way				<b>13</b> Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	<b>12b</b> <input type="checkbox"/> <input type="checkbox"/>
Dublin		CA 94568		<b>14</b> Other CA SDI: 2760.96		<b>12c</b> <input type="checkbox"/> <input type="checkbox"/>	
						<b>12d</b> <input type="checkbox"/> <input type="checkbox"/>	
<b>15</b> State Employer's state ID number CA 168-2715-6	<b>16</b> State wages, tips, etc. 228409.92	<b>17</b> State income tax 18502.16	<b>18</b> Local wages, tips, etc.			<b>19</b> Local income tax	<b>20</b> Locality name

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

**Copy C—For EMPLOYEE'S RECORDS**  
(See Notice to Employee on the back of Copy B.)

**2024**

Department of the Treasury—Internal Revenue Service

Safe, accurate,  
FAST! Use



## Instructions for Employee

(See also *Notice to Employee* on the back of Copy B.)

**Box 1.** Enter this amount on the wages line of your tax return.

**Box 2.** Enter this amount on the federal income tax withheld line of your tax return.

**Box 5.** You may be required to report this amount on Form 8959. See the Form 1040 instructions to determine if you are required to complete Form 8959.

**Box 6.** This amount includes the 1.45% Medicare tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

**Box 8.** This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137 with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

**Box 10.** This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

**Box 11.** This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and

received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

**Box 12.** The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$23,000 (\$16,000 if you only have SIMPLE plans; \$26,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$23,000. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2024, your employer may have allowed an additional deferral of up to \$7,500 (\$3,500 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

**Note:** If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

**A**—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**B**—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

**C**—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

**D**—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

**E**—Elective deferrals under a section 403(b) salary reduction agreement  
*(continued on back of Copy 2)*