

9411.68		261.47	
1	Wages, tips, other comp.	2	Federal income tax withheld
9411.68		583.52	
3	Social security wages	4	Social security tax withheld
9411.68		136.48	
5	Medicare wages and tips	6	Medicare tax withheld
Employer's name, address, and ZIP code Riverview School District PO Box 519 Duvall WA 98019			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a	
		12b	
13 Statutory employee Retirement plan Third-party sick pay		12c	
		12d	
14		Employee's social security no. 866-70-1303 Employer ID number (EIN) 91-6001639 Control number	
Himabindu Vuriti 27411 NE 152nd Ct Duvall WA 98019			
Employee's name, address, and ZIP code			
15 St	Employer's state ID number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.		19 Local income tax	20 Locality name
Wage and Tax Statement Form Copy B This information is being furnished to the IRS. W-2 To Be Filed With Employee's FEDERAL Tax Return. 2024 OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

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Wage and Tax Statement Form Copy 2 This information is being furnished to the IRS. W-2 To Be Filed With Employee's State, City, or Local Income Tax Return. 2024 OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

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Wage and Tax Statement Form Copy C — For EMPLOYEE'S RECORDS W-2 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. 2024 OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

Instructions for Employee

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 non governmental 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 (\$18,000 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.
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 gold 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—Employer 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.

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.

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 income 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. 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.
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.

1 Wages, tips, other compensation 38536.93		2 Federal income tax withheld 3131.32	
3 Social security wages 42195.56		4 Social security tax withheld 2616.12	
5 Medicare wages and tips 42195.56		6 Medicare tax withheld 611.84	
c Employer's name, address and ZIP code FCA US LLC 1000 CHRYSLER DRIVE AUBURN HILLS MI 48326-2766			
		10 Dependent care benefits	11 Nonqualified plans
12a See instructions for box 12 C 71.84	12b D 3658.63	12c	
12d		12e	
b Employer's identification number 27-0187394		d Employee's social security number 882-78-4210	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		
e Employee's name NETHRAVATHI SRINIVAS REDDY 1933 Golfview Dr APT 203 Troy MI 48084-3934			
f Employee's address and ZIP code			
2022		15 State Employer's state I.D. number MI 27-0187394	16 State wages, tips, etc. 38536.93
Form W2 Wage and Tax Statement		17 State income tax 1563.94	18 Local wages, tips, etc.
Copy B To Be Filed with Employee's FEDERAL Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

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Copy C for EMPLOYEE'S RECORDS Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
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QUESTION? CALL 877-827-7744

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Copy for EMPLOYEE'S State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

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Form W2 Wage and Tax Statement		17 State income tax 1563.94	18 Local wages, tips, etc.
Copy for EMPLOYEE'S State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

Virat Agarwal - 030067 - NVIDIA Corporation

W-2

Scan QR code to go to TurboTax and import your W-2 information and file your return. Or by typing this into your browser:
<https://turbotax.intuit.com/affiliate/ultipaper>



Form W-2 Wage & Tax Statement 2024
Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

Department of the Treasury - Internal Revenue Service OMB No. 1545-0008

a Employee's social security number XXX-XX-8111		1 Wages, tips, other compensation 134938.28		2 Federal income tax withheld 25649.32		
c Employer's name, address, and ZIP code NVIDIA Corporation 2788 San Tomas Expressway Santa Clara, CA 95051 USA		3 Social security wages 61321.96		4 Social security tax withheld 3801.96		
		5 Medicare wages and tips 61321.96		6 Medicare tax withheld 889.17		
		7 Social security tips 0.00		8 Allocated tips 0.00		
b Employer identification number (EIN) 94-3177549		9		10 Dependent care benefits 0.00		
e Employee's name, address, and ZIP code Virat Agarwal 1656 Hope Drive, Apt 1429 Santa Clara, CA 95054		11 Nonqualified plans 0.00		13 Statutory Retirement Third-party employee plan sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		
		12 See instructions for box 12 C 151.32 D 23000.00 DD 5244.27 W 1000.02		14 Other VPDI 1587.85		
15 State CA	Employer's state ID No. 397-6790-0	16 State wages, tips, etc. 135938.30	17 State income tax 11001.40	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage & Tax Statement 2024
Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

Department of the Treasury - Internal Revenue Service

OMB No. 1545-0008

a Employee's social security number XXX-XX-8111			1 Wages, tips, other compensation 134938.28		2 Federal income tax withheld 25649.32	
c Employer's name, address, and ZIP code NVIDIA Corporation 2788 San Tomas Expressway Santa Clara, CA 95051 USA			3 Social security wages 61321.96		4 Social security tax withheld 3801.96	
			5 Medicare wages and tips 61321.96		6 Medicare tax withheld 889.17	
			7 Social security tips 0.00		8 Allocated tips 0.00	
b Employer identification number (EIN) 94-3177549			9		10 Dependent care benefits 0.00	
e Employee's name, address, and ZIP code Virat Agarwal 1656 Hope Drive, Apt 1429 Santa Clara, CA 95054			11 Nonqualified plans 0.00		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	
			12 See instructions for box 12 C 151.32 D 23000.00 DD 5244.27 W 1000.02		14 Other VPDI 1587.85	
15 State CA	Employer's state ID No. 397-6790-0	16 State wages, tips, etc. 135938.30	17 State income tax 11001.40	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage & Tax Statement 2024
Copy C-For EMPLOYEE'S RECORDS.

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Department of the Treasury - Internal Revenue Service OMB No. 1545-0008

a Employee's social security number XXX-XX-8111		1 Wages, tips, other compensation 134938.28		2 Federal income tax withheld 25649.32		
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		5 Medicare wages and tips 61321.96		6 Medicare tax withheld 889.17		
		7 Social security tips 0.00		8 Allocated tips 0.00		
b Employer identification number (EIN) 94-3177549		9		10 Dependent care benefits 0.00		
e Employee's name, address, and ZIP code Virat Agarwal 1656 Hope Drive, Apt 1429 Santa Clara, CA 95054		11 Nonqualified plans 0.00		13 Statutory employee Retirement Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		
		12 See instructions for box 12 C 151.32 D 23000.00 DD 5244.27 W 1000.02		14 Other VPDI 1587.85		
15 State CA	Employer's state ID No. 397-6790-0	16 State wages, tips, etc. 135938.30	17 State income tax 11001.40	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2022

Copy C, for employee's records

c Employer's name, address, and ZIP code DOTCOM TEAM LLC 325 WOOD RD STE 103 BRAINTREE MA 02184			d Control number 0940-Y411ZE72 000000845 - PAYROL		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation
			86-0973809		283-93-5919		193268.00
			13 Statutory employee	Retirement plan	Third-party sick pay	3 Social security wages	2 Federal income tax withheld
e Employee's name, address, and ZIP code ANOOP ANAND 482 APPLE DR EXTON PA 19341			12 See instructions for box 12		14 Other PASUI 116.01		147000.00
							20568.64
							4 Social security tax withheld
							9114.00
							6 Medicare wages and tips
							193268.00
							2802.39
							8 Medicare tax withheld
							7 Social Security Tips
							8 Allocated Tips
							10 Dependent care benefits
							11 Nonqualified plans
15 State PA	Employer's state ID number 93191363	16 State wages, tips, etc. 193268.00	17 State income tax 5933.27	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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.

Form W-2 Wage and Tax Statement 2022

Copy B, to be filed with employee's FEDERAL tax return

c Employer's name, address, and ZIP code DOTCOM TEAM LLC 325 WOOD RD STE 103 BRAINTREE MA 02184			d Control number 0940-Y411ZE72 000000845 - PAYROL		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation
			86-0973809		283-93-5919		193268.00
			13 Statutory employee	Retirement plan	Third-party sick pay	3 Social security wages	2 Federal income tax withheld
e Employee's name, address, and ZIP code ANOOP ANAND 482 APPLE DR EXTON PA 19341			12 See instructions for box 12		14 Other PASUI 116.01		20568.64
							9114.00
							4 Social security tax withheld
							147000.00
							6 Medicare wages and tips
							193268.00
							2802.39
							8 Medicare tax withheld
							7 Social Security Tips
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15 State PA	Employer's state ID number 93191363	16 State wages, tips, etc. 193268.00	17 State income tax 5933.27	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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Form W-2 Wage and Tax Statement 2022

Copy 2, to be filed with employee's tax return for PA

c Employer's name, address, and ZIP code DOTCOM TEAM LLC 325 WOOD RD STE 103 BRAINTREE MA 02184			d Control number 0940-Y411ZE72 000000845 - PAYROL		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation
			86-0973809		283-93-5919		193268.00
			13 Statutory employee	Retirement plan	Third-party sick pay	3 Social security wages	2 Federal income tax withheld
e Employee's name, address, and ZIP code ANOOP ANAND 482 APPLE DR EXTON PA 19341			12 See instructions for box 12		14 Other PASUI 116.01		20568.64
							9114.00
							4 Social security tax withheld
							147000.00
							6 Medicare wages and tips
							193268.00
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							8 Medicare tax withheld
							7 Social Security Tips
							8 Allocated Tips
							10 Dependent care benefits
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15 State PA	Employer's state ID number 93191363	16 State wages, tips, etc. 193268.00	17 State income tax 5933.27	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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.

Form W-2 Wage and Tax Statement 2022

c Employer's name, address, and ZIP code			d Control number		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation
							2 Federal income tax withheld
			13 Statutory employee	Retirement plan	Third-party sick pay	3 Social security wages	4 Social security tax withheld
e Employee's name, address, and ZIP code			12 See instructions for box 12		14 Other		5 Medicare wages and tips
							6 Medicare tax withheld
							7 Social Security Tips
							8 Allocated Tips
							10 Dependent care benefits
							11 Nonqualified plans
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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.

Employee Reference Copy W-2 Wage and Tax Statement Copy C for employee's records.		2023 OMB No. 1545-0008	
d Control number 032197	Dept. PITT/6JC	Corp. 401069	Employer use only A 836
c Employer's name, address, and ZIP code HITACHI RAIL STS USA INC 1000 TECHNOLOGY DRIVE PITTSBURGH PA 15219-3120 Batch #03274			
e/f Employee's name, address, and ZIP code YOGIREDDY YERRAMREDDY 2221 BEAR RUN DR PITTSBURGH PA 15237			
b Employer's FED ID number 25-1579001	a Employee's SSA number XXX-XX-9725		
1 Wages, tips, other comp. 128879.67	2 Federal income tax withheld 8874.35		
3 Social security wages 143658.46	4 Social security tax withheld 8906.82		
5 Medicare wages and tips 143658.46	6 Medicare tax withheld 2083.05		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C 113.88		
14 Other 103.60 SUI	12b D 14778.79 12c DD 29484.87 12d 13 Stat emp. Ret. plan 3rd party sick pay X		
15 State PA	Employer's state ID no. 17668351	16 State wages, tips, etc. 143544.58	
17 State income tax 3850.81	18 Local wages, tips, etc. 143544.58		
19 Local income tax 1867.97	20 Locality name 700102		

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	700102 PITTS Local Wages, Tips, Etc. Box 18 of W-2
Gross Pay	154,235.84	154,235.84	154,235.84	154,235.84
Plus GTL (C-Box 12)	113.88	113.88	113.88	N/A
Less Misc. Non Taxable Comp.	6,236.94	6,236.94	6,236.94	6,236.94
Less 401(k) (D-Box 12)	14,778.79	N/A	N/A	N/A
Less Other Cafe 125	4,454.32	4,454.32	4,454.32	4,454.32
Reported W-2 Wages	128,879.67	143,658.46	143,658.46	143,544.58

Note - Fringe benefits include : Other \$210.52

2. Employee Name and Address.

**YOGIREDDY YERRAMREDDY
2221 BEAR RUN DR
PITTSBURGH PA 15237**

* PA local wages and withholding are reported to employee work location PSD unless it is outside of PA (Per Act 32).

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1 Wages, tips, other comp. 128879.67		2 Federal income tax withheld 8874.35	
3 Social security wages 143658.46		4 Social security tax withheld 8906.82	
5 Medicare wages and tips 143658.46		6 Medicare tax withheld 2083.05	
d Control number 032197	Dept. PITT/6JC	Corp. 401069	Employer use only A 836
c Employer's name, address, and ZIP code HITACHI RAIL STS USA INC 1000 TECHNOLOGY DRIVE PITTSBURGH PA 15219-3120			
b Employer's FED ID number 25-1579001		a Employee's SSA number XXX-XX-9725	
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 C 113.88	
14 Other 103.60 SUI		12b D 14778.79 12c DD 29484.87 12d 13 Stat emp. Ret. plan 3rd party sick pay X	
e/f Employee's name, address and ZIP code YOGIREDDY YERRAMREDDY 2221 BEAR RUN DR PITTSBURGH PA 15237			
15 State PA	Employer's state ID no. 17668351	16 State wages, tips, etc. 143544.58	
17 State income tax 3850.81		18 Local wages, tips, etc. 143544.58	
19 Local income tax 1867.97		20 Locality name 700102	
Federal Filing Copy W-2 Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.			

1 Wages, tips, other comp. 128879.67		2 Federal income tax withheld 8874.35	
3 Social security wages 143658.46		4 Social security tax withheld 8906.82	
5 Medicare wages and tips 143658.46		6 Medicare tax withheld 2083.05	
d Control number 032197	Dept. PITT/6JC	Corp. 401069	Employer use only A 836
c Employer's name, address, and ZIP code HITACHI RAIL STS USA INC 1000 TECHNOLOGY DRIVE PITTSBURGH PA 15219-3120			
b Employer's FED ID number 25-1579001		a Employee's SSA number XXX-XX-9725	
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a C 113.88	
14 Other 103.60 SUI		12b D 14778.79 12c DD 29484.87 12d 13 Stat emp. Ret. plan 3rd party sick pay X	
e/f Employee's name, address and ZIP code YOGIREDDY YERRAMREDDY 2221 BEAR RUN DR PITTSBURGH PA 15237			
15 State PA	Employer's state ID no. 17668351	16 State wages, tips, etc. 143544.58	
17 State income tax		18 Local wages, tips, etc. 143544.58	
19 Local income tax 1867.97		20 Locality name 700102	
City or Local Reference Copy W-2 Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return.			

1 Wages, tips, other comp. 128879.67		2 Federal income tax withheld 8874.35	
3 Social security wages 143658.46		4 Social security tax withheld 8906.82	
5 Medicare wages and tips 143658.46		6 Medicare tax withheld 2083.05	
d Control number 032197	Dept. PITT/6JC	Corp. 401069	Employer use only A 836
c Employer's name, address, and ZIP code HITACHI RAIL STS USA INC 1000 TECHNOLOGY DRIVE PITTSBURGH PA 15219-3120			
b Employer's FED ID number 25-1579001		a Employee's SSA number XXX-XX-9725	
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a C 113.88	
14 Other 103.60 SUI		12b D 14778.79 12c DD 29484.87 12d 13 Stat emp. Ret. plan 3rd party sick pay X	
e/f Employee's name, address and ZIP code YOGIREDDY YERRAMREDDY 2221 BEAR RUN DR PITTSBURGH PA 15237			
15 State PA	Employer's state ID no. 17668351	16 State wages, tips, etc. 143544.58	
17 State income tax		18 Local wages, tips, etc. 143544.58	
19 Local income tax 1867.97		20 Locality name 700102	
City or Local Filing Copy W-2 Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return.			

PA.State		Reference		Copy	
W-2		Wage and Tax		2023	
Statement				OMB No. 1545-0008	
Copy 2 to be filed with employee's State Income Tax Return.					
d Control number	Dept.	Corp.	Employer use only		
032197	PITT/6JC	401069	A 837		
c Employer's name, address, and ZIP code					
HITACHI RAIL STS USA INC 1000 TECHNOLOGY DRIVE PITTSBURGH PA 15219-3120					
Batch #03274					
e/f Employee's name, address, and ZIP code					
YOGIREDDY YERRAMREDDY 2221 BEAR RUN DR PITTSBURGH PA 15237					
b Employer's FED ID number	a Employer's SSA number				
25-1579001	XXX-XX-9725				
1 Wages, tips, other comp.	2 Federal income tax withheld				
128879.67	8874.35				
3 Social security wages	4 Social security tax withheld				
143658.46	8906.82				
5 Medicare wages and tips	6 Medicare tax withheld				
143658.46	2083.05				
7 Social security tips	8 Allocated tips				
9	10 Dependent care benefits				
11 Nonqualified plans	12a See instructions for box 12				
	C 113.88				
14 Other	12b D 14778.79				
103.60 PA SUI	12c DD 29484.87				
	12d				
	13 Stat emp. Ret. plan 3rd party sick pay				
	X				
15 State	Employer's state ID no.	16 State wages, tips, etc.			
PA	17668351	143544.58			
17 State income tax	18 Local wages, tips, etc.				
3850.81					
19 Local income tax	20 Locality name				

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

	PA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	154,235.84
Plus GTL (C-Box 12)	N/A
Less Misc. Non Taxable Comp.	6,236.94
Less 401(k) (D-Box 12)	N/A
Less Other Cafe 125	4,454.32
Reported W-2 Wages	143,544.58

Note - Fringe benefits include : Other \$210.52

2. Employee Name and Address.

YOGIREDDY YERRAMREDDY
2221 BEAR RUN DR
PITTSBURGH PA 15237

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1 Wages, tips, other comp.	2 Federal income tax withheld				
128879.67	8874.35				
3 Social security wages	4 Social security tax withheld				
143658.46	8906.82				
5 Medicare wages and tips	6 Medicare tax withheld				
143658.46	2083.05				
d Control number	Dept.	Corp.	Employer use only		
032197	PITT/6JC	401069	A 837		
c Employer's name, address, and ZIP code					
HITACHI RAIL STS USA INC 1000 TECHNOLOGY DRIVE PITTSBURGH PA 15219-3120					
b Employer's FED ID number	a Employer's SSA number				
25-1579001	XXX-XX-9725				
7 Social security tips	8 Allocated tips				
9	10 Dependent care benefits				
11 Nonqualified plans	12a See instructions for box 12				
	C 113.88				
14 Other	12b D 14778.79				
103.60 PA SUI	12c DD 29484.87				
	12d				
	13 Stat emp. Ret. plan 3rd party sick pay				
	X				
e/f Employee's name, address and ZIP code					
YOGIREDDY YERRAMREDDY 2221 BEAR RUN DR PITTSBURGH PA 15237					
15 State	Employer's state ID no.	16 State wages, tips, etc.			
PA	17668351	143544.58			
17 State income tax	18 Local wages, tips, etc.				
3850.81					
19 Local income tax	20 Locality name				

PA.State		Filing		Copy	
W-2		Wage and Tax		2023	
Statement				OMB No. 1545-0008	
Copy 2 to be filed with employee's State Income Tax Return.					

INTENTIONALLY
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Employee Reference Copy	
Wage and Tax Statement	
2024	
OMB No. 1545-0008	
Copy C for employee's records.	
d Control number	Dept.
210905 CHIC/XQA	833000
Corp.	Employer use only
	A
c Employer's name, address, and ZIP code	
ASSOCIATED MATERIALS LLC	
3773 STATE ROAD	
CUYAHOGA FALLS OH 44223	
Batch #03107	
e/f Employee's name, address, and ZIP code	
TAMALIKA SENGUPTA	
1704 FROST LANE	
NAPERVILLE IL 60564	
b Employer's FED ID number	a Employee's SSA number
75-1872487	XXX-XX-8335
1 Wages, tips, other comp.	2 Federal income tax withheld
39872.47	5764.24
3 Social security wages	4 Social security tax withheld
40008.63	2480.54
5 Medicare wages and tips	6 Medicare tax withheld
40008.63	580.13
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	C 70.16
14 Other	12b D 136.16
	12c
	12d
	13 Stat emp Ret. plan 3rd party sick pay
	X
15 State IL	Employer's state ID no. 75-1872487 000 2
16 State wages, tips, etc.	39872.47
17 State income tax	18 Local wages, tips, etc.
1970.18	
19 Local income tax	20 Locality name

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	IL. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	39 , 938 . 47	39 , 938 . 47	39 , 938 . 47	39 , 938 . 47
Plus GTL (C-Box 12)	70 . 16	70 . 16	70 . 16	70 . 16
Less 401(k) (D-Box 12)	136 . 16	N/A	N/A	136 . 16
Reported W-2 Wages	39,872.47	40,008.63	40,008.63	39,872.47

2. Employee Name and Address.

TAMALIKA SENGUPTA
1704 FROST LANE
NAPERVILLE IL 60564

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1 Wages, tips, other comp.	2 Federal income tax withheld
39872.47	5764.24
3 Social security wages	4 Social security tax withheld
40008.63	2480.54
5 Medicare wages and tips	6 Medicare tax withheld
40008.63	580.13
d Control number	Dept.
210905 CHIC/XQA	833000
Corp.	Employer use only
	A
c Employer's name, address, and ZIP code	
ASSOCIATED MATERIALS LLC	
3773 STATE ROAD	
CUYAHOGA FALLS OH 44223	
b Employer's FED ID number	a Employee's SSA number
75-1872487	XXX-XX-8335
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	C 70.16
14 Other	12b D 136.16
	12c
	12d
	13 Stat emp Ret. plan 3rd party sick pay
	X
e/f Employee's name, address and ZIP code	
TAMALIKA SENGUPTA	
1704 FROST LANE	
NAPERVILLE IL 60564	
15 State IL	Employer's state ID no. 75-1872487 000 2
16 State wages, tips, etc.	39872.47
17 State income tax	18 Local wages, tips, etc.
1970.18	
19 Local income tax	20 Locality name
Federal Filing Copy	
Wage and Tax Statement	
2024	
OMB No. 1545-0008	
Copy B to be filed with employee's Federal Income Tax Return.	

1 Wages, tips, other comp.	2 Federal income tax withheld
39872.47	5764.24
3 Social security wages	4 Social security tax withheld
40008.63	2480.54
5 Medicare wages and tips	6 Medicare tax withheld
40008.63	580.13
d Control number	Dept.
210905 CHIC/XQA	833000
Corp.	Employer use only
	A
c Employer's name, address, and ZIP code	
ASSOCIATED MATERIALS LLC	
3773 STATE ROAD	
CUYAHOGA FALLS OH 44223	
b Employer's FED ID number	a Employee's SSA number
75-1872487	XXX-XX-8335
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a C 70.16
14 Other	12b D 136.16
	12c
	12d
	13 Stat emp Ret. plan 3rd party sick pay
	X
e/f Employee's name, address and ZIP code	
TAMALIKA SENGUPTA	
1704 FROST LANE	
NAPERVILLE IL 60564	
15 State IL	Employer's state ID no. 75-1872487 000 2
16 State wages, tips, etc.	39872.47
17 State income tax	18 Local wages, tips, etc.
1970.18	
19 Local income tax	20 Locality name
IL. State Reference Copy	
Wage and Tax Statement	
2024	
OMB No. 1545-0008	
Copy 2 to be filed with employee's State Income Tax Return.	

1 Wages, tips, other comp.	2 Federal income tax withheld
39872.47	5764.24
3 Social security wages	4 Social security tax withheld
40008.63	2480.54
5 Medicare wages and tips	6 Medicare tax withheld
40008.63	580.13
d Control number	Dept.
210905 CHIC/XQA	833000
Corp.	Employer use only
	A
c Employer's name, address, and ZIP code	
ASSOCIATED MATERIALS LLC	
3773 STATE ROAD	
CUYAHOGA FALLS OH 44223	
b Employer's FED ID number	a Employee's SSA number
75-1872487	XXX-XX-8335
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a C 70.16
14 Other	12b D 136.16
	12c
	12d
	13 Stat emp Ret. plan 3rd party sick pay
	X
e/f Employee's name, address and ZIP code	
TAMALIKA SENGUPTA	
1704 FROST LANE	
NAPERVILLE IL 60564	
15 State IL	Employer's state ID no. 75-1872487 000 2
16 State wages, tips, etc.	39872.47
17 State income tax	18 Local wages, tips, etc.
1970.18	
19 Local income tax	20 Locality name
IL. State Filing Copy	
Wage and Tax Statement	
2024	
OMB No. 1545-0008	
Copy 2 to be filed with employee's State Income Tax Return.	

2024 W-2 and EARNINGS SUMMARY

Employee Reference Copy	
W-2 Wage and Tax Statement 2024	
Copy C for employee's records. OMB No. 1545-0008	
d Control number	761968 W11
Dept.	IND_00
Corp.	DVGB
Employer use only	79562
c Employer's name, address, and ZIP code	
INTERNATIONAL BUSINESS MACHINES CORPORATION 2455 SOUTH ROAD POUGHKEEPSIE, NY 12601-5400	
e/f Employee's name, address, and ZIP code	
ASIF A MOHAMMED 516 SANTA FE TRAIL APT 221 IRVING, TX 75063	
b Employer's FED ID number	13-0871985
a Employee's SSA number	XXX-XX-2394
1 Wages, tips, other comp.	80211.35
2 Federal income tax withheld	4850.12
3 Social security wages	84643.84
4 Social security tax withheld	5247.92
5 Medicare wages and tips	84643.84
6 Medicare tax withheld	1227.34
7 Social security tips	
8 Allocated tips	
9	
10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12
	C 50.92
14 Other	12b D 4432.49
	12c W 1600.00
	12d DD 24937.44
	13 Stat emp Ret. plan 3rd party sick pay
	X
15 State	Employer's state ID no.
16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement for 2024 plus any additional 2024 compensation or adjustment received after the 12/27/24 payroll close.

For other tax and payroll information, visit the Payroll Services Web Site at <https://w3.ibm.com/hr/web/us/payroll> on the IBM Intranet.

ASIF A MOHAMMED
516 SANTA FE TRAIL
APT 221
IRVING, TX 75063

Social Security Number: XXX-XX-2394

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1 Wages, tips, other comp.	80211.35	2 Federal income tax withheld	4850.12
3 Social security wages	84643.84	4 Social security tax withheld	5247.92
5 Medicare wages and tips	84643.84	6 Medicare tax withheld	1227.34
d Control number	761968 W11	Dept.	IND_00
Corp.	DVGB	Employer use only	79562
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 2455 SOUTH ROAD POUGHKEEPSIE, NY 12601-5400			
b Employer's FED ID number	13-0871985	a Employee's SSA number	XXX-XX-2394
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12		
	C 50.92		
14 Other	12b D 4432.49		
	12c W 1600.00		
	12d DD 24937.44		
	13 Stat emp Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
ASIF A MOHAMMED 516 SANTA FE TRAIL APT 221 IRVING, TX 75063			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
Federal Filing Copy			
W-2 Wage and Tax Statement 2024			
Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008			

1 Wages, tips, other comp.	80211.35	2 Federal income tax withheld	4850.12
3 Social security wages	84643.84	4 Social security tax withheld	5247.92
5 Medicare wages and tips	84643.84	6 Medicare tax withheld	1227.34
d Control number	761968 W11	Dept.	IND_00
Corp.	DVGB	Employer use only	79562
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 2455 SOUTH ROAD POUGHKEEPSIE, NY 12601-5400			
b Employer's FED ID number	13-0871985	a Employee's SSA number	XXX-XX-2394
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12		
	C 50.92		
14 Other	12b D 4432.49		
	12c W 1600.00		
	12d DD 24937.44		
	13 Stat emp Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
ASIF A MOHAMMED 516 SANTA FE TRAIL APT 221 IRVING, TX 75063			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
State Filing Copy			
W-2 Wage and Tax Statement 2024			
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

1 Wages, tips, other comp.	80211.35	2 Federal income tax withheld	4850.12
3 Social security wages	84643.84	4 Social security tax withheld	5247.92
5 Medicare wages and tips	84643.84	6 Medicare tax withheld	1227.34
d Control number	761968 W11	Dept.	IND_00
Corp.	DVGB	Employer use only	79562
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 2455 SOUTH ROAD POUGHKEEPSIE, NY 12601-5400			
b Employer's FED ID number	13-0871985	a Employee's SSA number	XXX-XX-2394
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12		
	C 50.92		
14 Other	12b D 4432.49		
	12c W 1600.00		
	12d DD 24937.44		
	13 Stat emp Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
ASIF A MOHAMMED 516 SANTA FE TRAIL APT 221 IRVING, TX 75063			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
17 State income tax		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
City or Local Filing Copy			
W-2 Wage and Tax Statement 2024			
Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008			

Copy B—To Be Filed With Employee's FEDERAL Tax Return.		OMB No. 1545-0008	
a Employee's soc. sec. no. XXX-XX-9101	1 Wages, tips, other comp. 7528.86	2 Federal income tax withheld 244.83	
b Employer ID number (EIN) 41-0215170	3 Social security wages 7591.80	4 Social security tax withheld 470.69	
	5 Medicare wages and tips 7591.80	6 Medicare tax withheld 110.08	
c Employer's name, address, and ZIP code Target Corporation 7000 Target Parkway N. Mail Stop: NCC-0102 Minneapolis, MN 55445			
d Control number a.2077 Mount			
e Employee's name, address, and ZIP code Bharathi Yerramreddy 40 CHARLES ST LIVINGSTON, NJ 07039-2959			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12 D 62.94	
13 Statutory employee	14 Other LST 22.00 PASUI 5.31	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
PA 19468354	7591.80	233.07	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. 7591.80	19 Local income tax 75.93	20 Locality name 71 OHIO	

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service.

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return		OMB No. 1545-0008	
a Employee's soc. sec. no. XXX-XX-9101	1 Wages, tips, other comp. 7528.86	2 Federal income tax withheld 244.83	
b Employer ID number (EIN) 41-0215170	3 Social security wages 7591.80	4 Social security tax withheld 470.69	
	5 Medicare wages and tips 7591.80	6 Medicare tax withheld 110.08	
c Employer's name, address, and ZIP code Target Corporation 7000 Target Parkway N. Mail Stop: NCC-0102 Minneapolis, MN 55445			
d Control number a.2077 Mount			
e Employee's name, address, and ZIP code Bharathi Yerramreddy 40 CHARLES ST LIVINGSTON, NJ 07039-2959			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code D 62.94	
13 Statutory employee	14 Other LST 22.00 PASUI 5.31	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
PA 19468354	7591.80	233.07	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. 7591.80	19 Local income tax 75.93	20 Locality name 71 OHIO	

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS

Copy C—For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)		OMB No. 1545-0008	
a Employee's soc. sec. no. XXX-XX-9101	1 Wages, tips, other comp. 7528.86	2 Federal income tax withheld 244.83	
b Employer ID number (EIN) 41-0215170	3 Social security wages 7591.80	4 Social security tax withheld 470.69	
	5 Medicare wages and tips 7591.80	6 Medicare tax withheld 110.08	
c Employer's name, address, and ZIP code Target Corporation 7000 Target Parkway N. Mail Stop: NCC-0102 Minneapolis, MN 55445			
d Control number a.2077 Mount			
e Employee's name, address, and ZIP code Bharathi Yerramreddy 40 CHARLES ST LIVINGSTON, NJ 07039-2959			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12 D 62.94	
13 Statutory employee	14 Other LST 22.00 PASUI 5.31	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
PA 19468354	7591.80	233.07	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. 7591.80	19 Local income tax 75.93	20 Locality name 71 OHIO	

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS
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

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return		OMB No. 1545-0008	
a Employee's soc. sec. no. XXX-XX-9101	1 Wages, tips, other comp. 7528.86	2 Federal income tax withheld 244.83	
b Employer ID number (EIN) 41-0215170	3 Social security wages 7591.80	4 Social security tax withheld 470.69	
	5 Medicare wages and tips 7591.80	6 Medicare tax withheld 110.08	
c Employer's name, address, and ZIP code Target Corporation 7000 Target Parkway N. Mail Stop: NCC-0102 Minneapolis, MN 55445			
d Control number a.2077 Mount			
e Employee's name, address, and ZIP code Bharathi Yerramreddy 40 CHARLES ST LIVINGSTON, NJ 07039-2959			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code D 62.94	
13 Statutory employee	14 Other LST 22.00 PASUI 5.31	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
PA 19468354	7591.80	233.07	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. 7591.80	19 Local income tax 75.93	20 Locality name 71 OHIO	

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury - IRS
BW24UP NTF 2585808 3 BW24UP



FIAT CHRYSLER AUTOMOBILES

CIMS 485-12-22,
1000 CHRYSLER DR,
AUBURN HILLS, MI 48326-2766

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
PERMIT #2655
DETROIT, MI

12506932 2129388 A
NETHRAVATHI SRINIVAS REDDY UMT
1933 Golfview Dr
APT 203
Troy MI 48084-3934

NOTICE TO EMPLOYEE

The wage and tax information shown on this form is being submitted to the IRS and appropriate State and Local Authorities. File Copy B with your Federal tax return and attach provided copies to your State and/or Local return.

Earned Income Credit (EIC) – For 2022, if you earned less than **\$16,480** and have no qualifying children, if you earned less than **\$43,492** and have one qualifying child, if you earned less than **\$49,399** and have two or more qualifying children, or if you earned less than **\$53,057** and have three or more qualifying children you may qualify for the earned income credit. **(Note: If married filing jointly, all maximums are increased by (\$6,130).** You cannot claim EIC if your investment income is more than **\$10,300**. Any EIC that is more than your tax liability is refunded to you only if you file a tax return. See your Forms 1040 instructions and Pub.596 for more details on the EIC. You can get the instructions and publications by calling toll-free **1-800-TAX-FORM**.

Credit for Excess Tax – If more than one employer paid you wages during **2022** and more than the maximum social security employee tax of **\$9114** was withheld; you may claim the excess as a credit against your Federal income tax. See tax return instructions.

Box 10 – This amount is the total dependent care benefits your employer provided you, including spending account contributions. Any amount over \$10,500 is also included in Box 1. See tax instructions for Form 1040.

Box 11 – This amount is a distribution from a non-qualified deferred compensation plan and is included in Box 1. Or it may be a contribution by your employer to a non-qualified plan that is included in Box 3 and/or Box 5.

Box 12 – If there is an amount in this box; it will be accompanied by a code. Code explanations are:

(C) Taxable cost of group term life insurance coverage over \$50,000 (included in Box 1, 3 (up to social security wage base), and 5).

(D) Deferred pay contributions (Section 401k)

(M) Uncollected social security tax on taxable cost of group term life insurance over \$50,000 (retirees only; see form 1040 instructions).

(N) Uncollected Medicare tax on taxable cost of group term life insurance over \$50,000 (retirees only; see form 1040 instructions).

(V) Income from exercise of nonstatutory stock option (included in Box 1, 3 (up to social security wage base), and 5. See Pub. 525

(W) Employer and Employee contributed HSA amounts.

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

(DD) Cost of employer-sponsored health coverage

Box 13 - Retirement Plan. If this box is marked X, special limits may apply to the amount of IRA contributions you may deduct on your return **(SEE YOUR TAX ADVISOR). See Pub. 590-A**

1. The following information reflects your final pay statement plus employer adjustments that comprise your W-2 statement.

Earnings Description	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages
Gross Wages	159052.30	159052.30	159052.30
Less Exempt Wages	- 1000.02	- 97673.34	- 97673.34
Less Deferred Comp	- 23000.00		
Less Housing/Transportation	- 0.00	- 0.00	- 0.00
Less Dependent Care	- 0.00	- 0.00	- 0.00
Less Sec 125	- 114.00	- 114.00	- 114.00
Less Excess Wages		- 0.00	
Taxable Wages (Reported on Form W2)	134938.28 Box 1 of W-2	61321.96 Box 3 of W-2	61321.96 Box 5 of W-2

2. Employee W-4 profile to change your Employee W-4 profile information, file a new W-4 with the payroll department

FIT: T 0

SIT Res: CASIT S 0

SIT Work: CASIT S 0

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. 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.

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.

Instructions for Employee

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

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 (not included in box 1)

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 taxexempt 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

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.

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 credit (EIC). You may be able to take the EIC for 2022 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 EIC if your investment income is more than the specified amount for 2022 or if income is earned for services provided while you were an inmate at a penal institution. For 2022 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596, Earned Income Credit. **Any EIC 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, Social Security and Other Information for Members of the Clergy and Religious Workers.

Instructions for Employee

- 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, Additional Medicare Tax. 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, Social Security and Medicare Tax on Unreported Tip Income, 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, 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 \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 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
- 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

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.

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 2022 and more than \$9,114 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 \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

- H**—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See 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, Archer MSAs and Long-Term Care Insurance Contracts.
- S**—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)
- T**—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, 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, Taxable and Nontaxable Income, 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, Health Savings Accounts (HSAs).
- 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

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, Contributions to Individual Retirement Arrangements (IRAs).

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.

Instructions for Employee

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 \$22,500 (\$15,500 if you only have SIMPLE plans; \$25,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$22,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2023, 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
- 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 (not included in box 1)
- 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

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.

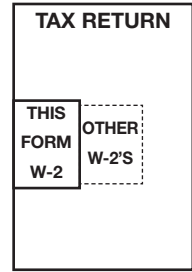
Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

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.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



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 credit (EIC). You may be able to take the EIC for 2023 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 EIC if your investment income is more than the specified amount for 2023 or if income is earned for services provided while you were an inmate at a penal institution. For 2023 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596. Any EIC 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.

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 2023 and more than \$9,932.40 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 \$5,821.20 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

Instructions for Employee

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.

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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

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.

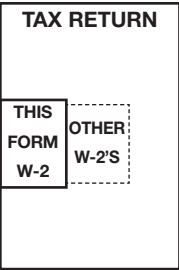
Department of the Treasury - Internal Revenue Service

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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.

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. 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.

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.

9411.68		261.47	
1	Wages, tips, other comp.	2	Federal income tax withheld
9411.68		583.52	
3	Social security wages	4	Social security tax withheld
9411.68		136.48	
5	Medicare wages and tips	6	Medicare tax withheld
Employer's name, address, and ZIP code Riverview School District PO Box 519 Duvall WA 98019			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a	
		12b	
13 Statutory employee		12c	
Retirement plan		12d	
Third-party sick pay			
14		Employee's social security no. 866-70-1303	
		Employer ID number (EIN) 91-6001639	
		Control number	
Himabindu Vuriti 27411 NE 152nd Ct Duvall WA 98019			
Employee's name, address, and ZIP code			
15 St	Employer's state ID number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.		19 Local income tax	20 Locality name
Wage and Tax Statement Copy B This information is being furnished to the IRS. To Be Filed With Employee's FEDERAL Tax Return. OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

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Instructions for Employee

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

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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 non governmental 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.

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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.

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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.

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J—Nontaxable sick pay (information only, not included in box 1, 3, or 5).

K—20% excise tax on excess gold parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable).

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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—Employer 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.**

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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.

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.

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 income 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. 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.

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.

Virat Agarwal - 030067 - NVIDIA Corporation

W-2

Scan QR code to go to TurboTax and import your W-2 information and file your return. Or by typing this into your browser:
<https://turbotax.intuit.com/affiliate/ultipaper>



Form W-2 Wage & Tax Statement 2024
Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

Department of the Treasury - Internal Revenue Service OMB No. 1545-0008

a Employee's social security number XXX-XX-8111		1 Wages, tips, other compensation 134938.28		2 Federal income tax withheld 25649.32		
c Employer's name, address, and ZIP code NVIDIA Corporation 2788 San Tomas Expressway Santa Clara, CA 95051 USA		3 Social security wages 61321.96		4 Social security tax withheld 3801.96		
		5 Medicare wages and tips 61321.96		6 Medicare tax withheld 889.17		
		7 Social security tips 0.00		8 Allocated tips 0.00		
b Employer identification number (EIN) 94-3177549		9		10 Dependent care benefits 0.00		
e Employee's name, address, and ZIP code Virat Agarwal 1656 Hope Drive, Apt 1429 Santa Clara, CA 95054		11 Nonqualified plans 0.00		13 Statutory Retirement Third-party employee plan sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		
		12 See instructions for box 12 C 151.32 D 23000.00 DD 5244.27 W 1000.02		14 Other VPDI 1587.85		
15 State CA	Employer's state ID No. 397-6790-0	16 State wages, tips, etc. 135938.30	17 State income tax 11001.40	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage & Tax Statement 2024
Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

Department of the Treasury - Internal Revenue Service

OMB No. 1545-0008

a Employee's social security number XXX-XX-8111			1 Wages, tips, other compensation 134938.28		2 Federal income tax withheld 25649.32	
c Employer's name, address, and ZIP code NVIDIA Corporation 2788 San Tomas Expressway Santa Clara, CA 95051 USA			3 Social security wages 61321.96		4 Social security tax withheld 3801.96	
			5 Medicare wages and tips 61321.96		6 Medicare tax withheld 889.17	
			7 Social security tips 0.00		8 Allocated tips 0.00	
b Employer identification number (EIN) 94-3177549			9		10 Dependent care benefits 0.00	
e Employee's name, address, and ZIP code Virat Agarwal 1656 Hope Drive, Apt 1429 Santa Clara, CA 95054			11 Nonqualified plans 0.00		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	
			12 See instructions for box 12 C 151.32 D 23000.00 DD 5244.27 W 1000.02		14 Other VPDI 1587.85	
15 State CA	Employer's state ID No. 397-6790-0	16 State wages, tips, etc. 135938.30	17 State income tax 11001.40	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage & Tax Statement 2024
Copy C-For EMPLOYEE'S RECORDS.

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.

Department of the Treasury - Internal Revenue Service OMB No. 1545-0008

a Employee's social security number XXX-XX-8111		1 Wages, tips, other compensation 134938.28		2 Federal income tax withheld 25649.32		
c Employer's name, address, and ZIP code NVIDIA Corporation 2788 San Tomas Expressway Santa Clara, CA 95051 USA		3 Social security wages 61321.96		4 Social security tax withheld 3801.96		
		5 Medicare wages and tips 61321.96		6 Medicare tax withheld 889.17		
		7 Social security tips 0.00		8 Allocated tips 0.00		
b Employer identification number (EIN) 94-3177549		9		10 Dependent care benefits 0.00		
e Employee's name, address, and ZIP code Virat Agarwal 1656 Hope Drive, Apt 1429 Santa Clara, CA 95054		11 Nonqualified plans 0.00		13 Statutory employee Retirement Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		
		12 See instructions for box 12 C 151.32 D 23000.00 DD 5244.27 W 1000.02		14 Other VPDI 1587.85		
15 State CA	Employer's state ID No. 397-6790-0	16 State wages, tips, etc. 135938.30	17 State income tax 11001.40	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

1. The following information reflects your final pay statement plus employer adjustments that comprise your W-2 statement.

Earnings Description	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages
Gross Wages	159052.30	159052.30	159052.30
Less Exempt Wages	- 1000.02	- 97673.34	- 97673.34
Less Deferred Comp	- 23000.00		
Less Housing/Transportation	- 0.00	- 0.00	- 0.00
Less Dependent Care	- 0.00	- 0.00	- 0.00
Less Sec 125	- 114.00	- 114.00	- 114.00
Less Excess Wages		- 0.00	
Taxable Wages (Reported on Form W2)	134938.28 Box 1 of W-2	61321.96 Box 3 of W-2	61321.96 Box 5 of W-2

2. Employee W-4 profile to change your Employee W-4 profile information, file a new W-4 with the payroll department

FIT: T 0

SIT Res: CASIT S 0

SIT Work: CASIT S 0

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. 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.

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.

Instructions for Employee

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.

1 Wages, tips, other compensation 38536.93		2 Federal income tax withheld 3131.32	
3 Social security wages 42195.56		4 Social security tax withheld 2616.12	
5 Medicare wages and tips 42195.56		6 Medicare tax withheld 611.84	
c Employer's name, address and ZIP code FCA US LLC 1000 CHRYSLER DRIVE AUBURN HILLS MI 48326-2766			
		10 Dependent care benefits	11 Nonqualified plans
12a See instructions for box 12 C 71.84	12b D 3658.63	12c	
12d		12e	
b Employer's identification number 27-0187394		d Employee's social security number 882-78-4210	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		
e Employee's name NETHRAVATHI SRINIVAS REDDY 1933 Golfview Dr APT 203 Troy MI 48084-3934			
f Employee's address and ZIP code			
2022		15 State Employer's state I.D. number MI 27-0187394	16 State wages, tips, etc. 38536.93
Form W2 Wage and Tax Statement		17 State income tax 1563.94	18 Local wages, tips, etc.
Copy B To Be Filed with Employee's FEDERAL Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

1 Wages, tips, other compensation 38536.93		2 Federal income tax withheld 3131.32	
3 Social security wages 42195.56		4 Social security tax withheld 2616.12	
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		10 Dependent care benefits	11 Nonqualified plans
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f Employee's address and ZIP code			
2022		15 State Employer's state I.D. number MI 27-0187394	16 State wages, tips, etc. 38536.93
Form W2 Wage and Tax Statement		17 State income tax 1563.94	18 Local wages, tips, etc.
Copy C for EMPLOYEE'S RECORDS Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

QUESTION? CALL 877-827-7744

1 Wages, tips, other compensation 38536.93		2 Federal income tax withheld 3131.32	
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c Employer's name, address and ZIP code FCA US LLC 1000 CHRYSLER DRIVE AUBURN HILLS MI 48326-2766			
		10 Dependent care benefits	11 Nonqualified plans
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12d		12e	
b Employer's identification number 27-0187394		d Employee's social security number 882-78-4210	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		
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f Employee's address and ZIP code			
2022		15 State Employer's state I.D. number MI 27-0187394	16 State wages, tips, etc. 38536.93
Form W2 Wage and Tax Statement		17 State income tax 1563.94	18 Local wages, tips, etc.
Copy for EMPLOYEE'S State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

1 Wages, tips, other compensation 38536.93		2 Federal income tax withheld 3131.32	
3 Social security wages 42195.56		4 Social security tax withheld 2616.12	
5 Medicare wages and tips 42195.56		6 Medicare tax withheld 611.84	
c Employer's name, address and ZIP code FCA US LLC 1000 CHRYSLER DRIVE AUBURN HILLS MI 48326-2766			
		10 Dependent care benefits	11 Nonqualified plans
12a See instructions for box 12 C 71.84	12b D 3658.63	12c	
12d		12e	
b Employer's identification number 27-0187394		d Employee's social security number 882-78-4210	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		
e Employee's name NETHRAVATHI SRINIVAS REDDY 1933 Golfview Dr APT 203 Troy MI 48084-3934			
f Employee's address and ZIP code			
2022		15 State Employer's state I.D. number MI 27-0187394	16 State wages, tips, etc. 38536.93
Form W2 Wage and Tax Statement		17 State income tax 1563.94	18 Local wages, tips, etc.
Copy for EMPLOYEE'S State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

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

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 (not included in box 1)

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 taxexempt 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

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.



FIAT CHRYSLER AUTOMOBILES

CIMS 485-12-22,
1000 CHRYSLER DR,
AUBURN HILLS, MI 48326-2766

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
PERMIT #2655
DETROIT, MI

12506932 2129388 A
NETHRAVATHI SRINIVAS REDDY UMT
1933 Golfview Dr
APT 203
Troy MI 48084-3934

NOTICE TO EMPLOYEE

The wage and tax information shown on this form is being submitted to the IRS and appropriate State and Local Authorities. File Copy B with your Federal tax return and attach provided copies to your State and/or Local return.

Earned Income Credit (EIC) – For 2022, if you earned less than **\$16,480** and have no qualifying children, if you earned less than **\$43,492** and have one qualifying child, if you earned less than **\$49,399** and have two or more qualifying children, or if you earned less than **\$53,057** and have three or more qualifying children you may qualify for the earned income credit. **(Note: If married filing jointly, all maximums are increased by (\$6,130).** You cannot claim EIC if your investment income is more than **\$10,300**. Any EIC that is more than your tax liability is refunded to you only if you file a tax return. See your Forms 1040 instructions and Pub.596 for more details on the EIC. You can get the instructions and publications by calling toll-free **1-800-TAX-FORM**.

Credit for Excess Tax – If more than one employer paid you wages during **2022** and more than the maximum social security employee tax of **\$9114** was withheld; you may claim the excess as a credit against your Federal income tax. See tax return instructions.

Box 10 – This amount is the total dependent care benefits your employer provided you, including spending account contributions. Any amount over \$10,500 is also included in Box 1. See tax instructions for Form 1040.

Box 11 – This amount is a distribution from a non-qualified deferred compensation plan and is included in Box 1. Or it may be a contribution by your employer to a non-qualified plan that is included in Box 3 and/or Box 5.

Box 12 – If there is an amount in this box; it will be accompanied by a code. Code explanations are:

(C) Taxable cost of group term life insurance coverage over \$50,000 (included in Box 1, 3 (up to social security wage base), and 5).

(D) Deferred pay contributions (Section 401k)

(M) Uncollected social security tax on taxable cost of group term life insurance over \$50,000 (retirees only; see form 1040 instructions).

(N) Uncollected Medicare tax on taxable cost of group term life insurance over \$50,000 (retirees only; see form 1040 instructions).

(V) Income from exercise of nonstatutory stock option (included in Box 1, 3 (up to social security wage base), and 5. See Pub. 525

(W) Employer and Employee contributed HSA amounts.

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

(DD) Cost of employer-sponsored health coverage

Box 13 - Retirement Plan. If this box is marked X, special limits may apply to the amount of IRA contributions you may deduct on your return **(SEE YOUR TAX ADVISOR). See Pub. 590-A**

Instructions for Employee

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

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.

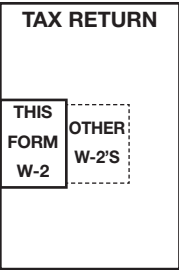
Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

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.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



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.

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. 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.

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.

1 Wages, tips, other compensation 38536.93		2 Federal income tax withheld 3131.32	
3 Social security wages 42195.56		4 Social security tax withheld 2616.12	
5 Medicare wages and tips 42195.56		6 Medicare tax withheld 611.84	
c Employer's name, address and ZIP code FCA US LLC 1000 CHRYSLER DRIVE AUBURN HILLS MI 48326-2766			
		10 Dependent care benefits	11 Nonqualified plans
12a See instructions for box 12 C 71.84	12b D 3658.63	12c	
12d		12e	
b Employer's identification number 27-0187394		d Employee's social security number 882-78-4210	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		
e Employee's name NETHRAVATHI SRINIVAS REDDY 1933 Golfview Dr APT 203 Troy MI 48084-3934			
f Employee's address and ZIP code			
2022		15 State Employer's state I.D. number MI 27-0187394	16 State wages, tips, etc. 38536.93
Form W2 Wage and Tax Statement		17 State income tax 1563.94	18 Local wages, tips, etc.
Copy B To Be Filed with Employee's FEDERAL Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

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Copy C for EMPLOYEE'S RECORDS Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

QUESTION? CALL 877-827-7744

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Copy for EMPLOYEE'S State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service		19 Local income tax	20 Locality Name
OMB No. 1545-0008			

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OMB No. 1545-0008			



FIAT CHRYSLER AUTOMOBILES

CIMS 485-12-22,
1000 CHRYSLER DR,
AUBURN HILLS, MI 48326-2766

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
PERMIT #2655
DETROIT, MI

12506932 2129388 A
NETHRAVATHI SRINIVAS REDDY UMT
1933 Golfview Dr
APT 203
Troy MI 48084-3934

NOTICE TO EMPLOYEE

The wage and tax information shown on this form is being submitted to the IRS and appropriate State and Local Authorities. File Copy B with your Federal tax return and attach provided copies to your State and/or Local return.

Earned Income Credit (EIC) – For 2022, if you earned less than **\$16,480** and have no qualifying children, if you earned less than **\$43,492** and have one qualifying child, if you earned less than **\$49,399** and have two or more qualifying children, or if you earned less than **\$53,057** and have three or more qualifying children you may qualify for the earned income credit. **(Note: If married filing jointly, all maximums are increased by (\$6,130).** You cannot claim EIC if your investment income is more than **\$10,300**. Any EIC that is more than your tax liability is refunded to you only if you file a tax return. See your Forms 1040 instructions and Pub.596 for more details on the EIC. You can get the instructions and publications by calling toll-free **1-800-TAX-FORM**.

Credit for Excess Tax – If more than one employer paid you wages during **2022** and more than the maximum social security employee tax of **\$9114** was withheld; you may claim the excess as a credit against your Federal income tax. See tax return instructions.

Box 10 – This amount is the total dependent care benefits your employer provided you, including spending account contributions. Any amount over \$10,500 is also included in Box 1. See tax instructions for Form 1040.

Box 11 – This amount is a distribution from a non-qualified deferred compensation plan and is included in Box 1. Or it may be a contribution by your employer to a non-qualified plan that is included in Box 3 and/or Box 5.

Box 12 – If there is an amount in this box; it will be accompanied by a code. Code explanations are:

(C) Taxable cost of group term life insurance coverage over \$50,000 (included in Box 1, 3 (up to social security wage base), and 5).

(D) Deferred pay contributions (Section 401k)

(M) Uncollected social security tax on taxable cost of group term life insurance over \$50,000 (retirees only; see form 1040 instructions).

(N) Uncollected Medicare tax on taxable cost of group term life insurance over \$50,000 (retirees only; see form 1040 instructions).

(V) Income from exercise of nonstatutory stock option (included in Box 1, 3 (up to social security wage base), and 5. See Pub. 525

(W) Employer and Employee contributed HSA amounts.

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

(DD) Cost of employer-sponsored health coverage

Box 13 - Retirement Plan. If this box is marked X, special limits may apply to the amount of IRA contributions you may deduct on your return **(SEE YOUR TAX ADVISOR). See Pub. 590-A**