To the right is an explanation of your W-2 - Please note that the Gross amount may inc! This information is being furnished to the 1 Service. If you are required to file a tax ret penalty or other sanction may be imposed is taxable and you fail to report it. Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS	lude adjustments. Internal Revenue urn, a negligence	Gross Wages Txbl Benefits Group Term Life Adoption Deferred Comp Section 125 Other Pretax/Wage Limit W-2 Wages	Federal Box 1 144108.35 140.38 (8991.70) (4504.50) 130752.53	3 and 7 144108.35 14 140.38 (4504.50)	Hox 5 1408.35 140.38 14504.50)	
D. CONTROL NUMBER 000303688101	2022	OMB NO. 1545 - 0008	1. WAGES, TIPS, OTHER	130752.53	2. FEDERAL ISCOM	14172.44
B EMPLOYER IDENTIFICATION NUMBER (IN) 34-0590250	292-17	N SOCIAL SECURITY NUMBER	3. SOCIAL SECURITY WA	139744.23	4 SOCIAL SECURIT	D.EBHITTW.XAT Y
C. EMPLOYER'S NAME, ADDRESS, AND ZEP CODE. Nordson Corporation			3. MEDICARE WAGES AN	139744.23	6. MEDICARE TAX V	2026.29
28601 Clemens Rd. Westlake OH 44145	13. Statutory Employee	Retirement Third-Party Plan Sick Pay	7. SOCIAL SUCURITY TIP	8	8. ALLOCATED TIPS	
		X	9. IL NONQUALIFIED PLAS		10. DEPENDENT CA	
	ST NAME DÍTU	XIII	CA SDI	1535.64	C D DD	140.38 8991.70 16010.02
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Nordson Corporation 28601 Clemens Rd.			7 SOCIAL SECURITY TIPS	139744.2	8 ALLOCATED T	2026.29
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Siva Kol 12604 Oak Knoll Rd Apt 4 Poway CA 92064 USA	lu		14 OTHER CA SDI	1535.64	- G	140.38 8991.70 16010.02
F EMPLOYEE'S ADDRESS AND ZIP CODE 15 STATE EMPLOYER'S STATE ID NUMBER CA 143-6860-9	16. STATE WAGES, TIPS, ETC.	17 STATE INCOME TAX	783.45 18 LOCAL	WAGES, TIPS, ETC. 19. LOCA	Employée	Retirement X Third-Party Sick Pay 20. LOCALITY NAME
Form W-2 Wage and Tax Statem Copy 2—To Be Filed With Employee's Statem	ent	202		De	partment of the Tr	reasury - Internal Revenue Service
D CONTROL NUMBER 000303688101	(OMB NO. 1545 - 0008	1. WAGES, TIPS, OTHER C	130752.53		ME TAX WITHHELD 14172.44
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28601 Clemens Rd. Westlake OH 44145			7 SOCIAL SECURITY TIPS	5	8 ALLOCATED TIP	PS .
			e Paramatan and Arm		10 DEPENDENT O	CARE BENEFITS
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USA F EMPLOYEE'S ADDRESS AND ZIP CODE			Tour 120	WACES TIRE ETC. I	13. Statutory Employee	Retirement Third-Party Sick Pay
CA 143-6860-9	16 STATE WAGES, TIPS, ETC. 1307	3	783.45	STATE OF THE PARTY		20 LOCALITY NAME
Form W-2 Wage and Tax Statem Copy 2—To Be Filed With Employee's State	ent e, City, or Local Income	Tax Return 202	2	De	partment of the Tr	reasury - Internal Revenue Service
0 CONTROL NUMBER 000303688101		MB NO. 1545 - 0008	1 WAGES, TIPS, OTHER C	130752.53	3	ME TAX WITHHELD 14172.44
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	it name Illu	SUFF	11, NONQUALIFIED PLANS 14 OTHER CA SDI	1535.64	12 and See Instruc C D DD	140.38 8991.70 16010.02
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P.O. BOX 44921 INDIANAPOLIS IN 46244-4921

Recipient's Information

Recipient's ID Number: XXX-XX-2476

INCLUDES CASH BONUS(ES) OF \$225.00

CHECKING

SIVA KOLLU 12604 OAK KNOLL RD APT 4 POWAY CA 92064-5530

Tax Year 2022 Form 1099-INT Interest Income (Copy B)

This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Payer's Information

Federal ID Number: 13-4994650 JPMORGAN CHASE BANK, N.A.

COPIES OF YOUR 2022 FORM 1099 STATEMENTS ARE AVAILABLE ONLINE AT WWW.CHASE.COM

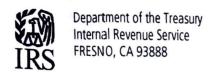
Form 1099-INT Questions

Phone Support: 1-800-935-9935

FATCA Filing requirement

_	0.40						(OMB No. 1545-0112)
Box 1. 2. 3. 4. 5. 6 7. 8.	Description Interest income Early withdrawal penalty Interest on U.S. Savings Bo Treasury Obligations Federal income tax withhe Investment expenses Foreign tax paid Foreign country or U.S. pos Tax exempt interest	nds and e ld	\$225.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 (See Details) \$0.00	9. 10. 11. 12. 13. 14. 15.	Tax-exempt and tax State State identification no	easury obligations k-exempt bond credit bond CUSIP no.	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 (See Details) (See Details) (See Details) (See Details) (See Details)
D-4-	ils of Form 1099-INT Inte	rest Income					(OMB No. 1545-0112)
Acco	unt Number unt Description	Box #1 Interest income	Box #2 withdrawal p			Other Boxes	
873168	3105	\$225.00	Pg .	\$0.00		#15 State	CA NO

Original



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SIVA & LAKSHMITEJASWINI KOLLU 12604 OAK KNOLL RD APT 4 POWAY CA 92064-5530

217300

(5)	Statement Showing Interest Income from	Calendar Year		
ev. 10-2013)	the Internal Revenue Service (Please keep this copy for your records)	2022		
FORM 1099-INI (Rev.	Recipient's Identification Number	Total Interest Paid or Credited		
	XXX-XX-2476	\$143.03		

THIS IS NOT A TAX BILL. It shows the taxable interest paid to you during the calendar year by the Internal Revenue Service. If you are required to file a tax return, report this interest as income on your return. This amount may represent interest on an overpayment for more than one year, or more than one kind of tax. This interest may have been paid with your tax refund or part or all may have been applied against other taxes you owed.