

To the right is an explanation of your W-2 wages. Please note that the Gross amount may include adjustments.		Federal Box 1		Soc. Sec. Box 3 and 7	Medicare Box 5
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.		Gross Wages	144108.35	144108.35	144108.35
Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS		Taxbl Benefits		140.38	140.38
		Group Term Life		140.38	140.38
		Adoption			
		Deferred Comp	(8991.70)		
		Section 125	(4504.50)	(4504.50)	(4504.50)
		Other Pretax/Wage Limit			
		W-2 Wages	130752.53	139744.23	139744.23

D. CONTROL NUMBER 000303688101	OMB NO. 1545 - 0008	1. WAGES, TIPS, OTHER COMPENSATION 130752.53	2. FEDERAL INCOME TAX WITHHELD 14172.44
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 34-0590250	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 292-17-2476	3. SOCIAL SECURITY WAGES 139744.23	4. SOCIAL SECURITY TAX WITHHELD 8664.14
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Nordson Corporation 28601 Clemens Rd. Westlake OH 44145		5. MEDICARE WAGES AND TIPS 139744.23	6. MEDICARE TAX WITHHELD 2026.29
E. EMPLOYEE'S FIRST NAME AND INITIAL Siva		7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS
LAST NAME Kollu		9.	10. DEPENDENT CARE BENEFITS
F. EMPLOYEE'S ADDRESS AND ZIP CODE 12604 Oak Knoll Rd Apt 4 Poway CA 92064 USA		11. NONQUALIFIED PLANS CA SDI 1535.64	12. a-d See instructions for box 12 C 140.38 D 8991.70 DD 16010.02
15. STATE CA	16. STATE WAGES, TIPS, ETC. 130752.53	17. STATE INCOME TAX 6783.45	18. LOCAL WAGES, TIPS, ETC.
19. LOCAL INCOME TAX	20. LOCALITY NAME		

D. CONTROL NUMBER 000303688101	OMB NO. 1545 - 0008	1. WAGES, TIPS, OTHER COMPENSATION 130752.53	2. FEDERAL INCOME TAX WITHHELD 14172.44
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 34-0590250	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 292-17-2476	3. SOCIAL SECURITY WAGES 139744.23	4. SOCIAL SECURITY TAX WITHHELD 8664.14
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Nordson Corporation 28601 Clemens Rd. Westlake OH 44145		5. MEDICARE WAGES AND TIPS 139744.23	6. MEDICARE TAX WITHHELD 2026.29
E. EMPLOYEE'S FIRST NAME AND INITIAL Siva		7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS
LAST NAME Kollu		9.	10. DEPENDENT CARE BENEFITS
F. EMPLOYEE'S ADDRESS AND ZIP CODE 12604 Oak Knoll Rd Apt 4 Poway CA 92064 USA		11. NONQUALIFIED PLANS CA SDI 1535.64	12. a-d See instructions for box 12 C 140.38 D 8991.70 DD 16010.02
15. STATE CA	16. STATE WAGES, TIPS, ETC. 130752.53	17. STATE INCOME TAX 6783.45	18. LOCAL WAGES, TIPS, ETC.
19. LOCAL INCOME TAX	20. LOCALITY NAME		

Form W-2 Wage and Tax Statement 2022 Department of the Treasury - Internal Revenue Service
Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return

D. CONTROL NUMBER 000303688101	OMB NO. 1545 - 0008	1. WAGES, TIPS, OTHER COMPENSATION 130752.53	2. FEDERAL INCOME TAX WITHHELD 14172.44
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 34-0590250	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 292-17-2476	3. SOCIAL SECURITY WAGES 139744.23	4. SOCIAL SECURITY TAX WITHHELD 8664.14
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Nordson Corporation 28601 Clemens Rd. Westlake OH 44145		5. MEDICARE WAGES AND TIPS 139744.23	6. MEDICARE TAX WITHHELD 2026.29
E. EMPLOYEE'S FIRST NAME AND INITIAL Siva		7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS
LAST NAME Kollu		9.	10. DEPENDENT CARE BENEFITS
F. EMPLOYEE'S ADDRESS AND ZIP CODE 12604 Oak Knoll Rd Apt 4 Poway CA 92064 USA		11. NONQUALIFIED PLANS CA SDI 1535.64	12. a-d See instructions for box 12 C 140.38 D 8991.70 DD 16010.02
15. STATE CA	16. STATE WAGES, TIPS, ETC. 130752.53	17. STATE INCOME TAX 6783.45	18. LOCAL WAGES, TIPS, ETC.
19. LOCAL INCOME TAX	20. LOCALITY NAME		

Form W-2 Wage and Tax Statement 2022 Department of the Treasury - Internal Revenue Service
Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return

D. CONTROL NUMBER 000303688101	OMB NO. 1545 - 0008	1. WAGES, TIPS, OTHER COMPENSATION 130752.53	2. FEDERAL INCOME TAX WITHHELD 14172.44
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 34-0590250	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 292-17-2476	3. SOCIAL SECURITY WAGES 139744.23	4. SOCIAL SECURITY TAX WITHHELD 8664.14
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Nordson Corporation 28601 Clemens Rd. Westlake OH 44145		5. MEDICARE WAGES AND TIPS 139744.23	6. MEDICARE TAX WITHHELD 2026.29
E. EMPLOYEE'S FIRST NAME AND INITIAL Siva		7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS
LAST NAME Kollu		9.	10. DEPENDENT CARE BENEFITS
F. EMPLOYEE'S ADDRESS AND ZIP CODE 12604 Oak Knoll Rd Apt 4 Poway CA 92064 USA		11. NONQUALIFIED PLANS CA SDI 1535.64	12. a-d See instructions for box 12 C 140.38 D 8991.70 DD 16010.02
15. STATE CA	16. STATE WAGES, TIPS, ETC. 130752.53	17. STATE INCOME TAX 6783.45	18. LOCAL WAGES, TIPS, ETC.
19. LOCAL INCOME TAX	20. LOCALITY NAME		

Form W-2 Wage and Tax Statement 2022 Department of the Treasury - Internal Revenue Service
Copy B—To Be Filed With Employee's FEDERAL tax return
This information is being furnished to the Internal Revenue Service.



P.O. BOX 44921
 INDIANAPOLIS IN 46244-4921

**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.

Recipient's Information



0018076 102 NSP0TAS0 122 000000000000 0703 CA

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

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

Recipient's ID Number: XXX-XX-2476

Original

(OMB No. 1545-0112)

Summary of Form 1099-INT Interest Income

Box	Description	Amount	Box	Description	Amount
1.	Interest income	\$225.00	9.	Specified private activity bond interest	\$0.00
2.	Early withdrawal penalty	\$0.00	10.	Market discount	\$0.00
3.	Interest on U.S. Savings Bonds and Treasury Obligations	\$0.00	11.	Bond premium	\$0.00
4.	Federal income tax withheld	\$0.00	12.	Bond premium on Treasury obligations	\$0.00
5.	Investment expenses	\$0.00	13.	Bond premium on tax-exempt bond	(See Details)
6.	Foreign tax paid	\$0.00	14.	Tax-exempt and tax credit bond CUSIP no.	(See Details)
7.	Foreign country or U.S. possession	(See Details)	15.	State	(See Details)
8.	Tax exempt interest	\$0.00	16.	State identification no.	(See Details)
			17.	State tax withheld	(See Details)
				FATCA Filing requirement	(See Details)

(OMB No. 1545-0112)

Details of Form 1099-INT Interest Income

Account Number	Box #1 Interest income	Box #2 Early withdrawal penalty	Box #3 Interest on U.S. Savings Bonds and Treas. Obligations	Other Boxes	
873168105	\$225.00	\$0.00	\$0.00	#15 State	CA
CHECKING				FATCA Filing requirement	NO
INCLUDES CASH BONUS(ES) OF \$225.00					

009401701110218076000100000000



Department of the Treasury
Internal Revenue Service
FRESNO, CA 93888

217300.290218.97774.22062 1 AV 0.455 371



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



217300

Form 1099-INT (Rev. 10-2013)

Statement Showing Interest Income from the Internal Revenue Service	Calendar Year
(Please keep this copy for your records)	2022
Recipient's Identification Number XXX-XX-2476	Total Interest Paid or Credited \$143.03
PAYER'S Federal Identification Number 38-1798424 (INTERNAL REVENUE USE ONLY)	

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.