								Federal Box	1	Soc. Sec. Box 3 &	7 Medicare B	Box 5
To the right is an Please note that				ents.		Gross Wage		17005 69	0.08	170050.0 691.2)50.08 591.20
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.						Group Term Adoption	Life	6	4.80	64.8	80	64.80
Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS						Deferred Co Section 125	i	(1353	.84)	(1353.8	,	53.84)
						W-2 Wages	x/Wage Limit	16945	2.24	(169452.2	1) (16945	52.24)
D. CONTROL NUMBER 001046828601		2022 OMB NO. 1545-000			O. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 169452.24			2.	2. FEDERAL INCOME TAX WITHHELD		
B. EMPLOYER IDENTIFICA 20-0393218	TION NUMBER (EIN)	A. EMPLOYEE'S 5 748-42-5444	SOCIAL SECU	JRITY NUM	/IBER	3. SOCIAL SE	3. SOCIAL SECURITY WAGES 4. SOCIAL SECURI					
C. EMPLOYER'S NAME, A Blackrock Corporatio		ODE				5. MEDICARE WAGES AND TIPS			6.	6. MEDICARE TAX WITHHELD		
40 East 52nd Street New York NY 10022						7. SOCIAL SEC	7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS					
						9.	9. 10. DEPENDENT CARE BENE				ENEFITS	
E. EMPLOYEE'S FIRST NA Poornima Sai Chowd		LAST NA Krotha			SUFF.	11. NONQUAL	IFIED PLANS		12.	12.a-d See instructions for box 12 C 64.80		
952 Sutter St Apt 9				14. OTHER CA VPDI 1601.60)	W Z DD		700.00 50.00 743.84		
San Francisco CA 94109 USA F. EMPLOYEE'S ADDRESS AND ZIP CODE									EMPLOYEE PLAN	EMENT X THIRD-PA	ARTY	
15. STATE EMPLOYER O17-075	S STATE ID NUMBER 3-8	16. STATE WAGE	170152.		7. STATE INCOME 1	13610.29	18. LOCAL WAGES, T	TIPS, ETC.	19. LOC	CAL INCOME TAX	20. LOCALITY NAM	ME

D. CONTROL NUM 001046828601	IBER		2022	OMB N	IO. 154	5-0008	1. WAGES, TI	PS, OTHER COMPEN 1694	SATION 52.24		2. FEDERAL INCOME TA	X WITHHELD	
B. EMPLOYER IDE	B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER					3. SOCIAL SECURITY WAGES				4. SOCIAL SECURITY TAX WITHHELD			
20-0393218 748-42-5444													
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE						5. MEDICARE	WAGES AND TIPS			6. MEDICARE TAX WIT	HHELD		
Blackrock Corpo													
	40 East 52nd Street						7. SOCIAL SEC	URITY TIPS			8. ALLOCATED TIPS		
New York NY 10	J022												
							9.				10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIF	RST NAME AND INITIAL	LAST NA	ME			SUFF.	11. NONQUAL	IFIED PLANS			12.a-d		
Poornima Sai C	Chowdary	Krotha	palli								C	64.80	
952 Sutter St							14. OTHER CA	VPDI	1601.	60	W	700.00 50.00	
Apt 9											DD.	7743.84	
	San Francisco CA 94109									- 1			
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE									13. STATUTORY RETIRED PLAN	REMENT X THIRD-PARTY SICK PAY			
15. STATE EMP	LOYER'S STATE ID NUMBER	16. STATE WAGE	ES, TIPS, ET	C. 1	L7. STATE	INCOME T	AX	18. LOCAL WAGES	, TIPS, ETC.	19.	LOCAL INCOME TAX	20. LOCALITY NAME	
CA 017	7-0753-8		170152.	.24			13610.29						

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FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 001046828601	2022	OMB NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSA 169452		2. FEDERAL INCOME TO	AX WITHHELD		
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 20-0393218	93218 748-42-5444		3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP C Blackrock Corporation US Inc.	ODE		5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD		
40 East 52nd Street New York NY 10022	7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	8. ALLOCATED TIPS				
			9.			10. DEPENDENT CARE	BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d			
Poornima Sai Chowdary 952 Sutter St Apt 9	Krothapalli		14. OTHER CA	VPDI	1601.60	2	64.80 700.00 50.00		
San Francisco CA 94109 USA F. EMPLOYEE'S ADDRESS AND ZIP CODE						13. STATUTORY RETI	7743.84 REMENT X THIRD-PARTY SICK PAY		
15. STATE EMPLOYER'S STATE ID NUMBER CA 017-0753-8	16. STATE WAGES, TIPS, E 170152		TAX 13610.29	18. LOCAL WAGES, T	IPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		

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FORM W-2 Wage and Tax Statement

D. CONTROL	NUMBER		014	D. N.O.	4545.0000	1. WAGES, TI	PS, OTHER COMPENSA	TION	2. FEDERAL INCOME TA	AX WITHHELD
0010468286	601		2022	B NO.	. 1545-0008		169452	2.24		
B. EMPLOYER	R IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SC	OCIAL SECURITY	NUMB	ER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
20-0393218	20-0393218 748-42-5444									
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE						5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	THHELD
	Corporation US Inc.									
40 East 52nd Street New York NY 10022					7. SOCIAL SEC	URITY TIPS		8. ALLOCATED TIPS		
						9.			10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE'	'S FIRST NAME AND INITIAL	LAST NAM	ΛE		SUFF.	11. NONQUAL	FIED PLANS		12.a-d See instructions fo	
Poornima S	Sai Chowdary	Krothap	alli						С	64.80
952 Sutter	St					14. OTHER CA	VPDI	1601.60	W	700.00
Apt 9	31						VFDI	1001.00		50.00
	sco CA 94109								DD	7743.84
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE								13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY	
15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES	, TIPS, ETC.	17. 9	STATE INCOME T	AX	18. LOCAL WAGES, T	IPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME
CA	017-0753-8		170152.24			13610.29				

								Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5		
	an explanation of y at the Gross amour			nents.		Gross Wages Txbl Benefits						
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.						Group Term Life Adoption Deferred Comp						
Form W-2 Wage and Tax Statement 2022 Copy C—For EMPLOYEE'S RECORDS							x/Wage Limit					
						W-2 Wages						
D. CONTROL NUMBER 001046828602			2022	OMB NO	O. 1545-0008	1. WAGES, TI	IPS, OTHER COMPENSA	ATION	2. FEDERAL INCOME TA	X WITHHELD		
B. EMPLOYER IDENTIF 20-0393218	ICATION NUMBER (EIN)	A. EMPLOYEE'S 5 748-42-5444	SOCIAL SEC	URITY NUM	BER	3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD			
	, ADDRESS, AND ZIP C	ODE				5. MEDICARE WAGES AND TIPS 6. MEDICARE TAX				HHELD		
Blackrock Corpora 40 East 52nd Stre New York NY 1002	et					7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS						
						9. 10. DEPENDENT CARE BENEFITS			BENEFITS			
E. EMPLOYEE'S FIRST Poornima Sai Cho		LAST NA Krotha			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d See instructions fo	r box 12		
952 Sutter St Apt 9 San Francisco CA 94109 USA					14. OTHER 13. STATUTORY RETIREMENT THIRD-PARTY							
	ESS AND ZIP CODE ER'S STATE ID NUMBER 93-218/000	16. STATE WAGE	67239		STATE INCOME 1	AX	18. LOCAL WAGES, T	IPS, ETC. 19	EMPLOYEE - PLAN LOCAL INCOME TAX	20. LOCALITY NAME		

D. CONTROL 001046828		2022 OMB NO. 1545-0008		1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME TAX WITHHELD
B. EMPLOYER 20-039321					CURITY WAGES	4. SOCIAL SECURITY TAX WITHHELD
C. EMPLOYER	R'S NAME, ADDRESS, AND ZIP C	ODE		5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WITHHELD
Blackrock C 40 East 52r New York N				7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS
				9.		10. DEPENDENT CARE BENEFITS
	E'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d
Poornima S	Sai Chowdary	Krothapalli				
952 Sutter Apt 9	St Sco CA 94109			14. OTHER		
USA	E'S ADDRESS AND ZIP CODE				13. STATUTORY RETIREMENT THIRD-PARTY PLAN SICK PAY	
	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS, E		AX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX 20. LOCALITY NAME
NJ	200-393-218/000	67239	9.04			

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Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 001046828602		2022	OMB NO. 1545-0008	1. WAGES, TI	PS, OTHER COMPENSATION	2. FEDERAL INCOME TA	X WITHHELD		
B. EMPLOYER IDENTIFICATION NUME 20-0393218					CURITY WAGES	4. SOCIAL SECURITY TA	4. SOCIAL SECURITY TAX WITHHELD		
C. EMPLOYER'S NAME, ADDRESS, AN	ID ZIP CODE			5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WITH	HHELD		
Blackrock Corporation US Inc. 40 East 52nd Street New York NY 10022				7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
				9.		10. DEPENDENT CARE B	ENEFITS		
E. EMPLOYEE'S FIRST NAME AND INIT Poornima Sai Chowdary	IAL LAST NA Krotha		SUFF.	11. NONQUAL	IFIED PLANS	12.a-d	12.a-d		
952 Sutter St Apt 9 San Francisco CA 94109 USA	05			14. OTHER		13. STATUTORY RETIRE			
F. EMPLOYEE'S ADDRESS AND ZIP CO 15. STATE EMPLOYER'S STATE ID NJ 200-393-218/000		ES, TIPS, ETC 67239.0		AX	18. LOCAL WAGES, TIPS, ETC.		20. LOCALITY NAME		

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Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL	LNUMBER		ON AD N	0 1545 0000	1. WAGES, T	PS, OTHER COMPENSATION	2. FEDERAL INCOME TA	XX WITHHELD		
001046828	8602	2022	OIVIB IN	O. 1545-0008						
B. EMPLOYER	R IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL S	ECURITY NUM	1BER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY T	AX WITHHELD		
20-039321	0-0393218 748-42-5444									
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE						WAGES AND TIPS	6. MEDICARE TAX WIT	THHELD		
	Corporation US Inc.									
40 East 52nd Street New York NY 10022						CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
					9.		10. DEPENDENT CARE	BENEFITS		
E. EMPLOYER	E'S FIRST NAME AND INITIAL	LAST NAME		SUFF.	11. NONQUAL	IFIED PLANS	12.a-d See instructions fo	r box 12		
Poornima S	Sai Chowdary	Krothapalli								
952 Sutter	r St				14. OTHER					
Apt 9										
	isco CA 94109							REMENT THIRD-PARTY		
USA F. EMPLOYER	E'S ADDRESS AND ZIP CODE						13. STATUTORY RETII			
15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS,	ETC. 17	7. STATE INCOME 1	ΓAX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		
NJ	200-393-218/000	672	39.04							