									Federal Box	1 Soc.	Sec. Box 3 &	7 Medicare Box 5
to the right is an explanation of your in 2 mages.							Gross Wage		150775 415		150775.4 415.3	
required to file a tax return, a negligence penalty or other sanction may be							Group Term Adoption	ı Life	126	5.62	126.6	126.62
imposed on you if this income is taxable and you fail to report it.						Deferred Co		(8769.48)				
		d Tax Stateme YEE'S RECORI					Section 125		(1310.	.66)	(1310.6	.,
сору с	TOI LITITEO	TEL 3 RECORE	,,					x/Wage Limit			(3006.7	·
							W-2 Wages		141237	7.29	147000.0	00 150006.77
D. CONTROL I				2022	OMB NO	D. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 141237.29		2. FEDERAL INCOME TAX WITHHELD 24060.52			
B. EMPLOYER	RIDENTIFICATIO	N NUMBER (EIN)	A. EMPLOYEE'S	SOCIAL SEC	URITY NUM	BER	3. SOCIAL SECURITY WAGES 4. SOCIAL SECURITY TAX WITHHELD				X WITHHELD	
86-0652659	9		329-95-6220					147000.00 9114.00				9114.00
C. EMPLOYER	R'S NAME, ADDE	RESS, AND ZIP CO	DDE				5. MEDICARE	WAGES AND TIPS		6. MEDICA	RE TAX WIT	
pSemi Corp								15000	6.77			2175.10
San Diego (ll Park Drive CA 92121						7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS					
						9. 10. DEPENDENT CARE BENEFITS				ENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.						11. NONQUALIFIED PLANS 12.a-d See instructions for box 12			box 12 126.62			
Vinay Kumar Peddireddy									_ D		8769.48	
902 W Alleghany Dr						14. OTHER			w		1000.00	
Apt 2D Arlington Heights IL 60004									DD		7317.96	
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE								13. STATUTO EMPLOYE	E PLAN	EMENT X THIRD-PARTY SICK PAY		
			16. STATE WAGE			. STATE INCOME T		18. LOCAL WAGES,	TIPS, ETC. 1	9. LOCAL INCO	OME TAX	20. LOCALITY NAME
IL	86-0652659	000 1		141337	.29		6905.04					

D. CONTROL NUMBER 000025246601	2022	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION 141237.29	2. FEDERAL INCOME TO	AX WITHHELD 24060.52		
B. EMPLOYER IDENTIFICATION NUMBER (EI) A. EMPLOYEE'S SOCIAL SEC	URITY NUMBER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
86-0652659	329-95-6220			147000.00		9114.00		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP	CODE		5. MEDICARE WAGES AND TIPS 6. MEDICARE TAX WITHHELD			THHELD		
pSemi Corporation				150006.77	2175.10			
9369 Carroll Park Drive San Diego CA 92121			7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
			9.		10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d			
Vinay Kumar Peddireddy					C	126.62		
902 W Alleghany Dr			14. OTHER		D	8769.48		
Apt 2D			THE OTHER		W	1000.00		
Arlington Heights IL 60004					DD	7317.96		
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE					13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY		
15. STATE EMPLOYER'S STATE ID NUMB	R 16. STATE WAGES, TIPS, E	TC. 17. STATE INCOME 1	AX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		
IL 86-0652659 000 1	141337	'.29	6905.04					

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 000025246601	2022	OMB NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSATION 141237.29	2. FEDERAL INCOME T	AX WITHHELD 24060.52		
B. EMPLOYER IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL SECU	JRITY NUMBER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY	4. SOCIAL SECURITY TAX WITHHELD		
86-0652659	329-95-6220			147000.00	9114.00			
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CO	ODE		5. MEDICARE	5. MEDICARE WAGES AND TIPS 6. MEDICARE TAX WITHHELD				
pSemi Corporation				150006.77		2175.10		
9369 Carroll Park Drive San Diego CA 92121			7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
			9.		10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.				11. NONQUALIFIED PLANS				
Vinay Kumar	Peddireddy				С	126.62		
003 W Allesham Du					D	8769.48		
902 W Alleghany Dr Apt 2D			14. OTHER		W	1000.00		
Arlington Heights IL 60004					DD	7317.96		
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE					13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY		
15. STATE EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS, ET	C. 17. STATE INCOME	TAX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		
IL 86-0652659 000 1	141337.	29	6905.04					

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL	NUMBER		0140	NO. 4545.0000	1. WAGES, TI	PS, OTHER COMPEN	SATION	2. FEDERAL INCOME TA	X WITHHELD	
000025246	6601	20	D22 OIVIB	OMB NO. 1545-0008	141237.29			24060.52		
B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER						CURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD		
86-0652659 329-95-6220						147000.00 9114.00			9114.00	
C. EMPLOYER	R'S NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WIT	6. MEDICARE TAX WITHHELD	
pSemi Corp					150006.77			2175.10		
9369 Carro San Diego	oll Park Drive CA 92121				7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS		
					9.			10. DEPENDENT CARE BENEFITS		
E. EMPLOYER	E'S FIRST NAME AND INITIAL	SUFF.	11. NONQUALIFIED PLANS			12.a-d See instructions fo				
Vinay Kumar Peddireddy								С	126.62	
902 W Alle	edhany Dr		14. OTHER			D	8769.48			
Apt 2D	ignan, D.							W	1000.00	
	Heights IL 60004							DD	7317.96	
USA	E'S ADDRESS AND ZIP CODE						13. STATUTORY RETII	REMENT X THIRD-PARTY SICK PAY		
15. STATE	EMPLOYER'S STATE ID NUMBER 16. STATE WAGES, TIPS, ETC. 17. STATE INCOME		AX	18. LOCAL WAGES,	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME			
IL	86-0652659 000 1	14	1337.29		6905.04					