							Federal Box 1	Soc. Sec. Box 3 8	7 Medicare Box 5	
To the right is an e Please note that th				ents.	Gross Wage		13557.	69 13557.	69 13557.69	
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						ı Life	58.	16 58.	16 58.16	
imposed on you if this income is taxable and you fail to report it. Form W-2 Wage and Tax Statement 2022						omp 5	(1355.7 (309.2	*	4) (309.24)	
Copy C—For EMPL	OYEE'S RECORI	OS				x/Wage Limit	nit			
					W-2 Wages		11950.	84 13306.	61 13306.61	
D. CONTROL NUMBER 000019988501	2022 OMB NO. 1545-000				1. WAGES, T	IPS, OTHER COMPENSA 11950		2. FEDERAL INCOME TAX WITHHELD 2522.41		
B. EMPLOYER IDENTIFICAT 20-4429448	ION NUMBER (EIN)	A. EMPLOYEE'S S XXX-XX-8638	OCIAL SECU	JRITY NUMBER	3. SOCIAL SECURITY WAGES 4. SOCIAL SECURITY TAX WITHHELD 825.01					
C. EMPLOYER'S NAME, AD	DRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS 6. MEDICARE TAX WITHHELD					
Coupa Software, Inc. 1855 S. Grant Street						1330	6.61		192.95	
San Mateo CA 94402					7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS					
					9. 10. DEPENDENT CARE BENEFITS					
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Arif Azim						IFIED PLANS		12.a-d See instructions fo	58.16	
5840 W Las Positas Blvd Pleasanton CA 94588 USA					14. OTHER CA	A SDI	145.73	D DD	1355.77 309.24	
F. EMPLOYEE'S ADDRESS A	AND ZIP CODE							13. STATUTORY RETIF	THIRD-PARTY SICK PAY	
15. STATE EMPLOYER'S CA 268-5613-	STATE ID NUMBER	16. STATE WAGE	S, TIPS, ET 11950.		TAX 881.51	18. LOCAL WAGES, 1	TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	
D. CONTROL NUMBER				•		IDS OTHER COMMENS		2 FEDERAL INCOME TA		

D. CONTROL N	UMBER					1. WAGES, T	PS, OTHER COMPENSAT	ION	2. FEDERAL INCOME TA	X WITHHELD	
0000199885	00019988501		2022	OMB	OMB NO. 1545-0008	11950.84			2522.41		
B. EMPLOYER I	DENTIFICATION NUMBER (E	N) A. EMPLOYEE'S	SOCIAL SEC	CURITY NU	JMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY TA	AX WITHHELD	
20-4429448 XXX-XX-8638			3			13306.61			825.01		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE							5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD	
Coupa Softw							13306.	61	192.95		
1855 S. Grant Street San Mateo CA 94402					7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS			
						9.			10. DEPENDENT CARE I	BENEFITS	
E. EMPLOYEE'S Arif	FIRST NAME AND INITIAL	LAST N. Azim	AME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	58.16	
5840 W Las Positas Blvd Pleasanton CA 94588 USA				14. OTHER CA SDI 145.73			D 1355.77 DD 309.24 13. STATUTORY RETIREMENT X THIRD-PARTY				
F. EMPLOYEE'S ADDRESS AND ZIP CODE								EMPLOYEE PLAN			
	MPLOYER'S STATE ID NUM	ER 16. STATE WAG	ES, TIPS, E	TC.	17. STATE INCOME	TAX	18. LOCAL WAGES, TII	PS, ETC. 1	9. LOCAL INCOME TAX	20. LOCALITY NAME	
CA 2	268-5613-8		11950	0.84		881.51					

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER		OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSA		2. FEDERAL INCOME TA			
000019988501	2022	OIVID NO. 1343-0006	11950.84				2522.41		
B. EMPLOYER IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL SECT	URITY NUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
20-4429448	XXX-XX-8638		13306.61				825.01		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CO	DDE		5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WIT	6. MEDICARE TAX WITHHELD		
Coupa Software, Inc.				13306	.61		192.95		
1855 S. Grant Street San Mateo CA 94402			7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	8. ALLOCATED TIPS		
			9.			10. DEPENDENT CARE	BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL Arif	LAST NAME Azim	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	58.16		
5840 W Las Positas Blvd Pleasanton CA 94588 USA				14. OTHER CA SDI 145.73 DD			1355.77 309.24		
F. EMPLOYEE'S ADDRESS AND ZIP CODE						13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY		
15. STATE EMPLOYER'S STATE ID NUMBER CA 268-5613-8	16. STATE WAGES, TIPS, ET 11950.		FAX 881.51	18. LOCAL WAGES, T	IPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL	NUMBER				1. WAGES. TI	PS, OTHER COMPENS	ATION	2. FEDERAL INCOME TA	X WITHHELD	
000019988		2	2022 OMB	NO. 1545-0008	11950.84			2522.41		
B. EMPLOYER	R IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOC	CIAL SECURITY N	JMBER 3. SOCIAL SECURITY WAGES				4. SOCIAL SECURITY TAX WITHHELD		
20-4429448 XXX-XX-8638					13306.61			825.01		
C. EMPLOYER	R'S NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WIT	6. MEDICARE TAX WITHHELD	
Coupa Soft					13306.61			192.95		
1855 S. Grant Street San Mateo CA 94402					7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS		
					9.			10. DEPENDENT CARE I	BENEFITS	
E. EMPLOYER	E'S FIRST NAME AND INITIAL	LAST NAME		SUFF.	11. NONQUALIFIED PLANS			12.a-d See instructions fo		
Arif		Azim						С	58.16	
5840 W La	as Positas Blvd				14. OTHER CA	SDI	145.73	D	1355.77	
	CA 94588					. 551	113173	DD	309.24	
							REMENT X THIRD-PARTY			
F. EMPLOYEE'S ADDRESS AND ZIP CODE								EMPLOYEE PLAN	SICK PAY	
15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES,	TIPS, ETC.	17. STATE INCOME 1	ΓAX	18. LOCAL WAGES,	TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	
CA	268-5613-8		11950.84		881.51					