141202.53 1 Wages, tips, other comp. 147000.00	14112.57 2 Federal income tax withheld					
	2 Federal income tax withheld					
147000.00						
	9114.00					
3 Social security wages	4 Social security tax withheld					
161702.53	2344.69					
5 Medicare wages and tips	6 Medicare tax withheld					
Employer's name, address, and ZIP code Saviynt Inc						
1301 E El Segundo B	lvd					
Suite D						
El Segundo, CA 9024	5-4303					
7 Social security tips	8 Allocated tips					
0.00						
9	10 Dependent care benefits					
	0.00					
11 Nonqualified plans	12a C 120.96					
0.00	12b D 20500.00					
13 Statutory Retirement Third-party sick pay	12c DD 1964.40					
X	12d W 988.88					
14	Employee's social security no. 016174341					
	Employer ID number (EIN) 473807420					
	Control 760656					
Shyam Rajendran 3935 Silver Queen Ct Mason, OH 45036						
	State wages, tips, etc. 17 State income ta					
	5123.20					
	D Local income tax 20 Locality name OH-Mason					
101702.53	1702.04 On-Mason					
Wage and Tax Staten	nent Form					
Copy B This information is being furnished to the IRS. W-2 To Be Filed With Employee's FEDERAL Tax Return. OMB No. 1545-0008 Department of the Treasury – Internal Revenue Service						

141202.53	2						14112.57
14 1202.33 1 Wages, tips, other comp.			,	14112.37			
· rrages, aps, sales semp.							
147000.00 3 Social security wages			4	9114.00 4 Social security tax withheld			
161702.53 5 Medicare wages and tips				2344.69 6 Medicare tax withheld			
Employer's name, address, and ZIP code							
Saviynt In							
1301 E E	Seg	undo	Blv	d			
Suite D	J						
El Seguno	do, C	A 902	245	-43	03		
7 Social security tips			ε	8 Allocated tips			
0.00							
9			1	10 Dependent care benefits			
							0.00
11 Nonqualified plans				2a	С		120.96
0.00		70111		2b	D		20500.00
13 Statutory employee Plan Third-party sick pay		` '	2c	DD		1964.40	
	Х		- +	2d	W		988.88
14			E	Employee's social security no. 016174341			
				Employer ID number (EIN) 473807420			
			C	ontro	,		760656
Shyam Raj 3935 Silve Mason, Oh Employee's name, a	r Que 1 4503	en Ct 36					
15 St. Employer's			16 St	ate w	ages, tips	, etc.	17 State income tax
	4-03360		1412				5123.20
			Local income tax		20 Locality name		
18 Local wages, tip 161702.53			1 7 7 8	52.()	4		OH-Mason

tion is being furnished to the IRS. If you are required return, a negligence penalty or other sanction may be you if this income is taxable and you fail to report it.

Department of the Treasury - Internal

2022

1 Wages, tips, other comp.	2 Federal income tax withheld							
147000.00 3 Social security wages	9114.00 4 Social security tax withheld							
161702.53 5 Medicare wages and tips	2344.69 6 Medicare tax withheld							
Employer's name, address, and ZIP code Saviynt Inc 1301 E El Segundo Blvd Suite D El Segundo, CA 90245-4303								
7 Social security tips 0.00	8 Allocated tips							
9	10 Dependent care benefits 0.00							
11 Nonqualified plans	12a C 120.96							
0.00	12b D 20500.00							
13 Statutory Retirement Third-party sick pay	12c DD 1964.40							
X	12d W 988.88							
14	Employee's social security no. 016174341							
	Employer ID number (EIN) 473807420							
	Control 760656							
Shyam Rajendran 3935 Silver Queen Ct Mason, OH 45036 Employee's name, address, and ZIP code								
15 St. Employer's state ID number	16 State wages, tips, etc. 17 State income tax							
OH ' 54-033606	141202.53 5123.20							
18 Local wages, tips, etc. 161702.53	19 Local income tax 1782.04 20 Locality name OH-Mason							
Wage and Tax Statement Copy 2 W-2 To Be Filed With Employee's State, City, or Local Income Tax Return OMS No. 1545-9008 Department of the Treasury – Internal Revenue Service								

14112.57

141202.53 1 Wages, tips, other comp.	2 Federal incor	14112.57 ne tax withheld						
147000.00 3 Social security wages		9114.00 Social security tax withheld						
161702.53 5 Medicare wages and tips		2344.69						
Employer's name, address, and ZIP code Saviynt Inc 1301 E El Segundo Blvd Suite D El Segundo, CA 90245-4303								
7 Social security tips 0.00	8 Allocated tip	8 Allocated tips						
9	10 Dependent care benefits 0.00							
11 Nonqualified plans	12a C	120.96						
0.00	12b D	20500.00						
13 Statutory Retirement Third-party sick pay	12c DD	1964.40						
X	12d W	988.88						
Employee's social security r 016174341								
	Employer ID number (EIN) 473807420							
	Control number	760656						
Shyam Rajendran 3935 Silver Queen Ct Mason, OH 45036 Employee's name, address, and ZIP code 15 st. Employer's state ID number OH 54-033606 16 State wages, tips, etc. 17 State income tax 5123.20								
18 Local wages, tips, etc. 161702.53	9 Local income tax 1782.04	20 Locality name OH-Mason						
Wage and Tax Statement Copy 2 W-2 To Be Filed With Employee's State, City, or Local Income Tax Return Department of the Treasury - Internal Revenue Service								

Instructions for Employee

141202.53

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax.

See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must the Form 4137, Social Security and Medicare Tax on any of those Medicare with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 for figure the social security and Medicare tox wed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security and Medicare tox owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return.

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (catefreia) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 10. This amount is (a perported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 3 if it is a porry ear deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no the used

Instructions.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made a cosses deferrant, consider these amounts for the year shown, not the current year, if no year A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over \$50.000 finel-lated 15.

TRANSPORTED TO TRANSPORT C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5) section 40 (k) cash or deferred arrangement. Also includes D—Elective deferrals to a section 40 (k) cash or deferred arrangement. Also includes control to the control that its part of a section 40 (k) arrangement. E—Elective deferrals under a section 400(k) salary reduction agreement F—Elective deferrals under a section 408(k) (s) salary reduction sEPP G—Elective deferrals under a section 408(k) (s) salary reduction SEP G—Elective deferrals under a section 408(k) (s) salary reduction SEP G—Elective deferrals under a section 408(k) (s) salary reduction SEP G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(k) deferred compensation plan 1—Elective deferrals to a section 501(c) (18)(l0) tax-exempt organization plan. See the Form 1040 instructions form 1040 instructions. L—Substantiated employee business expense reimbursements (nontaxable) M—Uncollected social security or RRTA tax or taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

M—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

P—Excludable orwind expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nontaxable combate pay. See the Form 1040 instructions for details on reporting this amount of the proper contributions to your Archer MSA. Report on Form 8853, Archer MSAs and 1000-16 fm Care See Texture 1000 fm Care Texture 1000 fm C

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

T-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V-Income from exercise of nonstatinous desired.

Expenses, to figure any taxable and nontaxable amounts.

Expenses, to figure any taxable and nontaxable amounts.

Verification or exercise of nonstatutory stock option(s) (included in boxes 1, 3 up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafetral) plan) by our health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan Taxable and the section 409A nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

A—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 401(k) plan

DB—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization and the section of the properties of the prop

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan. FF—Permitted benefits under a qualified small employer health reimbursement arrangement GG—Income from qualified equity grants under section 83(i) elections as of the close of the calendar year Box 13. If the Felterment plan 'box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Felterment plant agreements (RAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permiums deducted, parsonage allowance and utilities. Railroad employers use this box to report railroad retriement (FRRI) compensation. Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retriement (RRIR) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due rate for filien union of the control of the contr

[RRTA] compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Notice to Employee

INOTICE 10 Employee

Do you have to file? After to the form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2022 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit to the EIC if you rivestment income is more than the specified amount for 2022 or if income is seamed for services provided while you were an immate at a penal institution. For 2022 income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

If you file a tax return.

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Religious Workers.

Corrections, If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employer to correct your employer to correct and the second of the correct and the second of the s

calling 900-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit to expense taxes. If you had more than one employer in 2022 and more than 93,114 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may 1040 instructions. If you had more than one provided retirement of the control of t

NTF 2585266

SEE REVERSE SIDE FOR OPENING INSTRUCTIONS