

006-002941-W-2-28262-PWRLIGHT

**Year To Date Earnings**

Regular Hourly Pay	77607.65
Holiday Pay	1815.40
Hire Bonus	5000.00
Group Term Life > \$50,000	123.66
Non CA STD Plan	294.12

**Year To Date Deductions**

401(k) Savings Plan	4793.11
Cigna Critical Illness	27.00
Cigna Accident	48.42
Cigna Hospital	107.46
Delta Dental Core	36.72
Health Savings Account EE	160.00
Medical Insurance	788.40
Unvaccinated Surcharge	1200.03
Vision Service Plan	11.88

Social Security No.:  
XXX-XX-7569

a Employee's social security number XXX-XX-7569	d Control number 003828 WY/2QM	7 Social security tips	1 Wages, tips, other compensation 79050.72	2 Federal income tax withheld 12466.84
c Employer's name, address, and ZIP code SunPower Corporation, Systems 1414 HARBOUR WAY SOUTH Suite 1901 RICHMOND, CA 94804		8 Allocated tips	3 Social security wages 83843.83	4 Social security tax withheld 5198.32
b Employer identification number (EIN) 20-8248962		9	5 Medicare wages and tips 83843.83	6 Medicare tax withheld 1215.74
e Employee's first name and initial Last name SRIVENU GOPAL KRISHNA VIRIVENTI 989 TIGER LN CHARLOTTE, NC 28262		10 Dependent care benefits	11a See instructions for box 12 C 123.66	11b D 4793.11
f Employee's address and ZIP code		11 Nonqualified plans	12c DD 5688.00	12d W 160.00
		13 Statutory Retirement Third-party employee plan sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	14 Other	
15 State Employer's State ID No NC 600683134	16 State wages, tips, etc. 79050.72	17 State income tax 3566.00	18 Local wages, tips, etc.	19 Local income tax
		20 Locality name		

**2022**  
OMB No. 1545-0008

**Form W-2 Wage and Tax Statement**

**Employee's Copy**

Copy C - For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)  
Department of the Treasury-Internal Revenue Service. 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.

**2022**  
OMB No. 1545-0008

**Form W-2 Wage and Tax Statement**

**State Filing Copy**

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.  
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-7569	d Control number 003828 WY/2QM	7 Social security tips	1 Wages, tips, other compensation 79050.72	2 Federal income tax withheld 12466.84
c Employer's name, address, and ZIP code SunPower Corporation, Systems 1414 HARBOUR WAY SOUTH Suite 1901 RICHMOND, CA 94804		8 Allocated tips	3 Social security wages 83843.83	4 Social security tax withheld 5198.32
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		20 Locality name		

**2022**  
OMB No. 1545-0008

**Form W-2 Wage and Tax Statement**

**Federal Filing Copy**

Copy B - To Be Filed With Employee's FEDERAL Tax Return.  
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-7569	d Control number 003828 WY/2QM	7 Social security tips	1 Wages, tips, other compensation 79050.72	2 Federal income tax withheld 12466.84
c Employer's name, address, and ZIP code SunPower Corporation, Systems 1414 HARBOUR WAY SOUTH Suite 1901 RICHMOND, CA 94804		8 Allocated tips	3 Social security wages 83843.83	4 Social security tax withheld 5198.32
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