EDERAL Tax Return.	th Employee's	Form V		OMB No. 1545-0008	
	1 Wages, tips, other co	Wage and Tax	deral income t		
2022	121915.51		11112	.50	
a Employee's SSN XXX-XX-0648	3 Social security wages 144660.59	4 Sc	cial security ta 8968.9		
Employer ID No. (EIN) 94-1687665	5 Medicare wages and 144660.59	ips <mark>6</mark> Me	6 Medicare tax withheld 2097.58		
Employer's name, address a BANK OF AMERICA, 100 NORTH TRYON SUITE 170 CHARLOTTE, NC 282	NATIONAL ASSOCIA STREET	ATION			
Control number					
e – f Employee's name, addr APPANA PEDIREDL/ 12863 PLATT DR FRISCO, TX 75035					
7 Social security tips	8 Allocated tips	9			
10 Dependent care benefits	11 Nonqualified plans	12a co C		. for box 12 28.94	
3 Statutory employee Ret	tirement plan Third-party	-	de	745.08	
4 Other		12c co DD 12d co	ode 259	992.24	
5 State Employer's state ID n	o. 16 State wages, tip	s, etc. 17 S	tate income ta	x	
18 Local wages, tips, etc.	19 Local income ta	< 20 L	ocality name		
	Department	of the Treasury	- Internal Rev	venue Servic	
eturn, a negligence penalty or o ail to report it. Copy C — For EMPLOYEI	ed to the Internal Revenue S ther sanction may be impose E'S RECORDS (See	ervice. If you are d on you if this Form \	e required to fil ncome is taxa	e a tax ble and you OMB No.	
eturn, a negligence penalty or o ail to report it. Copy C — For EMPLOYEI Notice to Employee on th	ed to the Internal Revenue S ther sanction may be impose E'S RECORDS (See e back of Copy 2.) 1 Wages, tips, other con	ervice. If you are d on you if this Form V Wage and Tax	e required to fil ncome is taxal N-2 Statement deral income t	e a tax ble and you OMB No. 1545-0008 ax withheld	
eturn, a negligence peñalty or o ail to report it. Copy C — For EMPLOYEI Notice to Employee on th 2022 a Employee's SSN	ed to the Internal Revenue S ther sanction may be impose E'S RECORDS (See e back of Copy 2.) 1 Wages, tips, other con 121915.51 3 Social security wages	ervice. If you are d on you if this Form 1 Wage and Tax np. 2 Fe	e required to fil ncome is taxal N-2 Statement deral income t 11112. cial security ta	e a tax ble and you OMB No. 1545-0008 ax withheld 50 x withheld	
	ed to the Internal Revenue S ther sanction may be impose E'S RECORDS (See e back of Copy 2.) 1 Wages, tips, other con 121915.51	ervice. If you are d on you if this Form V Wage and Tax mp. 2 Fe 4 Sc	e required to fil ncome is taxai N-2 Statement deral income t 11112.	e a tax ble and you 0MB No. 1545-0008 ax withheld 50 x withheld 96	
eturn, a negligence peñalty or o iail to report it. Copy C — For EMPLOYEI Notice to Employee on th 2022 a Employee's SSN XXX-XX-0648	ad to the Internal Revenue S ther sanction may be impose E'S RECORDS (See e back of Copy 2.) 1 Wages, tips, other con 121915.51 3 Social security wages 144660.59 5 Medicare wages and 144660.59 ind ZIP code NATIONAL ASSOCIA	ervice. If you are d on you if this Form V Wage and Tax mp. 2 Fe 4 Sc ips 6 Me	e required to fil ncome is taxal N-2 Statement deral income t 11112 cial security ta 8968.S	e a tax ble and you 0MB No. 1545-0008 ax withheld 50 x withheld 06 nheld	
eturn, a negligence peñalty or o al to report it. Copy C — For EMPLOYEI Notice to Employee on th 2022 a Employee's SSN XXX-XX-0648 b Employer ID No. (EIN) 94-1687665 c Employer's name, address a BANK OF AMERICA, 100 NORTH TRYON SUITE 170 CHARLOTTE, NC 282	ad to the Internal Revenue S ther sanction may be impose E'S RECORDS (See e back of Copy 2.) 1 Wages, tips, other con 121915.51 3 Social security wages 144660.59 5 Medicare wages and 144660.59 ind ZIP code NATIONAL ASSOCIA	ervice. If you are d on you if this Form V Wage and Tax mp. 2 Fe 4 Sc ips 6 Me	Prequired to fill ncome is taxal N-2 Statement deral income t 11112 cial security ta 8968.5 edicare tax with	e a tax ble and you 0MB No. 1545-0008 ax withheld 50 x withheld 06 nheld	
return, a negligence peñalty or o iail to report it. Copy C — For EMPLOYEI Notice to Employee on th 2022 a Employee's SSN XXX-XX-0648 b Employer ID No. (EIN) 94-1687665 c Employer's name, address a BANK OF AMERICA, 100 NORTH TRYON SUITE 170 CHARLOTTE, NC 282	ed to the Internal Revenue S ther sanction may be impose E'S RECORDS (See back of Copy 2.) 1 Wages, tips, other con 121915.51 3 Social security wages 144660.59 5 Medicare wages and 144660.59 ind ZIP code NATIONAL ASSOCI/ STREET	ervice. If you are d on you if this Form V Wage and Tax mp. 2 Fe 4 Sc ips 6 Me	Prequired to fill ncome is taxal N-2 Statement deral income t 11112 cial security ta 8968.5 edicare tax with	e a tax ble and you 0MB No. 1545-0008 ax withheld 50 x withheld 06 nheld	
eturn, a negligence peñalty or o iail to report it. Copy C — For EMPLOYEI Notice to Employee on th 2022 a Employee's SSN XXX-XX-0648 b Employer ID No. (EIN) 94-1687665 c Employer's name, address a BANK OF AMERICA, 100 NORTH TRYON SUITE 170 CHARLOTTE, NC 282 d Control number e — f Employee's name, addr APPANA PEDIREDLA 12863 PLATT DR FRISCO, TX 75035 7 Social security tips	ed to the Internal Revenue S ther sanction may be impose e back of Copy 2.) 1 Wages, tips, other con 121915.51 3 Social security wages 144660.59 5 Medicare wages and 144660.59 nd ZIP code NATIONAL ASSOCIA STREET 202	Price. If you are d on you if this Wage and Tax np. 2 Fe 4 Sc ips 6 Me ATION	Prequired to fill ncome is taxa V-2 Statement deral income t 11112. cial security ta 8968. dicare tax witt 2097.	e a tax ble and you OMB No. 1545-0008 ax withheld 50 x withheld 58	
eturn, a negligence peñalty or o ail to report it. Copy C — For EMPLOYEI Notice to Employee on th 2022 a Employee's SSN XXX-XX-0648 b Employer ID No. (EIN) 94-1687665 c Employer's name, address a BANK OF AMERICA, 100 NORTH TRYON SUITE 170 CHARLOTTE, NC 282 d Control number e — f Employee's name, addre APPANA PEDIREDLA 12863 PLATT DR FRISCO, TX 75035 7 Social security tips 10 Dependent care benefits	ed to the Internal Revenue S ther sanction may be impose E'S RECORDS (See e back of Copy 2.) 1 Wages, tips, other con 121915.51 3 Social security wages 144660.59 5 Medicare wages and 144660.59 ind ZIP code NATIONAL ASSOCI/ STREET 202 ess and ZIP code A 8 Allocated tips 11 Nonqualified plans	Price. If you are d on you if this Wage and Tax mp. 2 Fe 4 Sc ips 6 Me ATION	e required to fil ncome is taxa Statement deral income t 11112. cial security ta 8968.5 edicare tax with 2097.5	e a tax ble and you 0MB No. 1545-0008 ax withheld 50 x withheld 06 nheld	
eturn, a negligence peñalty or o ail to report it. Copy C — For EMPLOYEI Notice to Employee on th 2022 a Employee's SSN XXX-XX-0648 b Employer'D No. (EIN) 94-1687665 c Employer's name, address a BANK OF AMERICA, 100 NORTH TRYON SUITE 170 CHARLOTTE, NC 282 d Control number a — f Employee's name, addre APPANA PEDIREDLA 12863 PLATT DR FRISCO, TX 75035 7 Social security tips	ed to the Internal Revenue S ther sanction may be impose e back of Copy 2.) 1 Wages, tips, other con 121915.51 3 Social security wages 144660.59 5 Medicare wages and 144660.59 nd ZIP code NATIONAL ASSOCIA STREET 202	Price. If you are d on you if this Wage and Tax mp. 2 Fe 4 Sc ips 6 Me ATION	e required to fill ncome is taxal Statement deral income t 11112 cial security ta 8968.5 edicare tax with 2097.5	e a tax ble and you OMB No. 1545-0008 ax withheld 50 x withheld 58	

Copy 2 — To Be Filed With Employee's State, City, or Local Income Tax Return				Fo Wage and	rm W-2 d Tax Stat	OMB No. 1545-0008			
2022		1 Wages, tips, other comp. 121915.51		пр. 2	2 Federal income tax withhele 11112.50				
a	Employee's SSN XXX-XX-0648		Social security wages 144660.59			4 Social security tax withheld 8968.96			
b	Employer ID No. (EIN) 94-1687665		Medicare wages and tips 144660.59			6 Medicare tax withheld 2097.58			
с	Employer's name, address and BANK OF AMERICA, 100 NORTH TRYON S SUITE 170 CHARLOTTE, NC 282	NATIONAL STREET	ASSOCI	ATION					
d	Control number								
e –	-f Employee's name, addres APPANA PEDIREDLA 12863 PLATT DR FRISCO, TX 75035		e						
7	Social security tips	8 Allocated	tips	9)				
10	Dependent care benefits	11 Nonqual	ified plans		2a code C		for box 12 8.94		
13	Statutory employee Retire	ment plan	Third-party s		2b code D	227	45.08		
14	Other				2c code DD 2d code	259	92.24		
15	State Employer's state ID no.	16 Stat	e wages, tips	s, etc. 1	7 State	income tax			
18	Local wages, tips, etc.	19 Loca	al income tax	2	0 Locali	ity name			
	Department of the Treasury — Internal Revenue Service						enue Service		

Copy 2 — To Be Filed With Employee's State, City, or Local Income Tax Return			-	orm W-2 nd Tax Stat	OMB No. 1545-0008		
	2022	0 . 1 .	Wages, tips, other comp. 121915.51		2 Federal income tax withheld 11112.50		
a	Employee's SSN XXX-XX-0648	3 Social security 14466	0.59	4 Social security tax withh 8968.96			
b	Employer ID No. (EIN) 94-1687665	5 Medicare wag 14466		6 Medicare tax withheld 2097.58			
c Employer's name, address and ZIP code BANK OF AMERICA, NATIONAL ASSOCIATION 100 NORTH TRYON STREET SUITE 170 CHARLOTTE, NC 28202							
d	Control number						
e — f Employee's name, address and ZIP code APPANA PEDIREDLA 12863 PLATT DR FRISCO, TX 75035							
7	Social security tips	8 Allocated tips		9			
10	Dependent care benefits	11 Nonqualified	plans	12a code C		for box 12 8.94	
13	Statutory employee Retire	ement plan Thir	d-party sick pay	12b code D	227	45.08	
14	Other			12c code DD 12d code	259	92.24	
15	State Employer's state ID no.	16 State wa	and time ato	17 State	incomo tov		
13			ges, tips, etc.	17 State income tax			
18	Local wages, tips, etc.	19 Local ind	come tax	20 Local	ity name		

17 State income tax

20 Locality name

16 State wages, tips, etc.

19 Local income tax

15 State Employer's state ID no.

18 Local wages, tips, etc.

Notice to Employee

Do you have to file? Refer 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. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2022 or if income is earned for services provided while you were an inmate at a penal institution. For 2022 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only 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.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. 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 for excess taxes. If you had more than one employer in 2022 and more than \$9,114 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

(See also Instructions for Employee on the back of Copy B.)

Instructions for Employee (continued from back of Copy B)

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 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 excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current 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 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement
F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G-Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H-Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

-Nontaxable sick pay (information only, not included in box 1, 3, or 5)

 K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.
L—Substantiated employee business expense reimbursements (nontaxable)
M—Uncollected social security or RTA tax on taxable cost of group-term life insurance over \$50,000 (from a carbot parachute) for 1040 instructions. \$50,000 (former employees only). See the Form 1040 instructions.

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

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

(Continued on the back of Copy C.)

Instructions for Employee (See also Notice to Employee, on the back of adjacent Copy 2.)

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 file Form 4137. Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated to amount unless you can prove with adequate records that 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 the advector of the state of the s tips. Use Form 4137 to figure the social security and Medicare tax owed 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 tips will be credited to your social security record (used to figure your benefits).

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 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported 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 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

(Continued below on the back of Copy 2.)

Instructions for Employee (continued from back of adjacent Copy 2)

Q-Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts. S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included

in box 1)

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 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.

-Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Deferrals under a section 409A nonqualified deferred compensation plan –Income under a 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.

AA—Designated Roth contributions under a section 401(k) plan **BB**—Designated Roth contributions under a section 403(b) plan

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 Coesing 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)
HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement 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 Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation. Tier 1 tax. Tier 2 tax. Medicare tax. and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (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.