								Federal Box 1	Soc. Sec. Box 3	k 7 Medicare Box 5	
to the right is an explanation of your 11 2 magest						Gross Wage		112161 3032			
required to file a tax return, a negligence penalty or other sanction may be						Group Term Adoption	ı Life	56	.64 56	64 56.64	
Form W-2 Wage and Tax Statement 2022						Deferred Co Section 125		(8199. (7167.	•	39) (7167.39)	
						W-2 Wages	, -3-	99884	.57 108084	04 108084.04	
D. CONTROL NUMBER 001900140501	2022 OMI			OMB N	O. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 99884.57			2. FEDERAL INCOME TAX WITHHELD 8502.39		
B. EMPLOYER IDENTIFIC 20-5947231	ATION NUMBER (EIN)	A. EMPLOYEE'S 879-13-3547	SOCIAL SECU	JRITY NUN	1BER	3. SOCIAL SECURITY WAGES 108084.04			4. SOCIAL SECURITY TAX WITHHELD 6701.21		
C. EMPLOYER'S NAME, UBS Business Soluti	,	ODE				5. MEDICARE WAGES AND TIPS 108084.04			6. MEDICARE TAX WI	THHELD 1567.22	
1000 Harbor Blvd Weehawken NJ 07086				7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS				
						9. 10. DEPENDENT CARE BENEFITS					
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Vamsi K Vemula					11. NONQUALIFIED PLANS			12.a-d See instructions for box 12 C 56.64			
1132 Carlisle Place Mount Juliet TN 37122 USA				14. OTHER			D W DD	8199.47 2150.03 20124.00			
F. EMPLOYEE'S ADDRESS AND ZIP CODE								EMPLOYEE PLAI			
15. STATE EMPLOYE	R'S STATE ID NUMBER	16. STATE WAG	ES, TIPS, ET	C. 1	7. STATE INCOME 1	AX	18. LOCAL WAGES, 1	TIPS, ETC. 19	9. LOCAL INCOME TAX	20. LOCALITY NAME	

D. CONTROL NU 00190014050			2022	OMB NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSAT 99884.		2. FEDERAL INCOME TA	X WITHHELD 8502.39	
B. EMPLOYER ID	DENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S S	OCIAL SECUI	RITY NUMBER	3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD		
20-5947231 879-13-3547						108084.	.04	6701.21		
C. EMPLOYER'S I	NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD		
UBS Business	Solutions US LLC				108084.04			1567.22		
1000 Harbor Blvd Weehawken NJ 07086					7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS		
								10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Vamsi K Vemula					11. NONQUALIFIED PLANS			12.a-d C	56.64	
1132 Carlisle Place								D	8199.47	
Mount Juliet TN 37122							W DD	2150.03 20124.00		
USA										
F. EMPLOYEE'S ADDRESS AND ZIP CODE								13. STATUTORY RETIR	THIRD-PARTY SICK PAY	
15. STATE EM	MPLOYER'S STATE ID NUMBER	16. STATE WAGE	S, TIPS, ETC	. 17. STATE INCOME T	AX	18. LOCAL WAGES, TI	PS, 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 001900140501	2022	OMB NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSATION 99884.57	2. FEDERAL INCOME T	AX WITHHELD 8502.39		
B. EMPLOYER IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL SEC	URITY NUMBER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
20-5947231	879-13-3547			108084.04		6701.21		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP C	ODE		5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WI	6. MEDICARE TAX WITHHELD		
UBS Business Solutions US LLC				108084.04		1567.22		
1000 Harbor Blvd Weehawken NJ 07086			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 Vamsi K	LAST NAME Vemula	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d C	56.64		
1132 Carlisle Place			14. OTHER		D	8199.47		
Mount Juliet TN 37122					W DD	2150.03 20124.00		
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE						REMENT X THIRD-PARTY		
15. STATE EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS, E	TC. 17. STATE INCOME 1	AX	18. LOCAL WAGES, TIPS, 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

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D. CONTROL	L NUMBER				1. WAGES, T	PS, OTHER CON	//PENSATION	2.	. FEDERAL INCOME TA	X WITHHELD	
00190014	0501	202	2 OMB	NO. 1545-0008			99884.57			8502.39	
B. EMPLOYE	ER IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL	SECURITY NU	JMBER	3. SOCIAL SECURITY WAGES				4. SOCIAL SECURITY TAX WITHHELD		
20-594723	31	879-13-3547			108084.04				6701.21		
C. EMPLOYE	ER'S NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS			6.	6. MEDICARE TAX WITHHELD		
UBS Busin	ess Solutions US LLC				108084.04				1567.22		
1000 Harbor Blvd Weehawken NJ 07086					7. SOCIAL SECURITY TIPS			8.	8. ALLOCATED TIPS		
					9.			10	10. DEPENDENT CARE BENEFITS		
E. EMPLOYE	EE'S FIRST NAME AND INITIAL	LAST NAME		SUFF.	11. NONQUAL	IFIED PLANS		12.	.a-d See instructions for		
Vamsi K		Vemula							C D	56.6 8199.4	
1132 Carlisle Place					14. OTHER				W	8199.4 2150.0	
Mount Juliet TN 37122									DD	20124.0	
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE								13.		REMENT X THIRD-PARTY	
15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIP	S, ETC.	17. STATE INCOME 1	ΓAX	18. LOCAL WA	AGES, TIPS, ETC.	19. LO	CAL INCOME TAX	20. LOCALITY NAME	