

PJCIJL02200014 SIVA SAI PAVAN KUMAR KANAMARLAPUDI 823 LAURIE AVE SANTA CLARA CA 95054

### Notice to Employee

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 security and Medicare taxes, see Pub. 517. for 2023 if your adjusted gross income (AGI) is less than a **Corrections**. If your name, SSN, or address is incorrect, in 2023 and more than \$9,932.40 in social security and/or Tire certain amount. The amount of the credit is based on income correct Copies B, C, and 2 and ask your employer to correct 1 railroad retirement (RRTA) taxes were withheld, you may be and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid Form W-2c, Corrected Wage and Tax Statement, with the income tax. See the Form 1040 instructions. If you had more social security numbers (SSNs). You can't take the EIC if your SSA to correct any name, SSN, or money amount error than one railroad employer and more than \$5,821.20 in Tier 2 investment income is more than the specified amount for 2023 reported to the SSA on Form W-2. Be sure to get your copies RRTA tax was withheld, you may be able to claim a refund on or if income is earned for services provided while you were an of Form W-2c from your employer for all corrections made so Form 843. See the Instructions for Form 843. inmate at a penal institution. For 2023 income limits and more you may file them with your tax return. If your name and SSN information, visit www.irs.gov/EITC. See also Pub. 596. Any EIC are correct but aren't the same as shown on your social that is more than your tax liability is refunded to you, but security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. only if you file a tax return.

#### 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. See the Form 1040

Box 5. You may be required to report this amount on Form 8559. See the Form 1040 instructions to determine if you are required to complete Form 8559. 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 5200,000. Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on traventure the new for Event 400 interventions.

your tax return, see the Form 1040 instructions. You must file Form 14137 with your income tax return to report at least the allocated tip arount unless you can prove with adequate records that you received a smaller amount. If you amount unless you can prove with adequate records that your received a smaller amount. If you have records that show the actual amount of tips you neceived, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you dicht 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 (cateteria) plan). Any amount over your employer's plan limit is also included in box 1. Bee Form 2441. Box 10. This amount is (a) reported in box 11 it is a distribution made to your on anonqualified deferred compression or monouremented section 457(b) blan or bihand the bihas 3 and/or

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 nongualified 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 toreature of your right to the deterred amount. This box shouldn't be used if you had a deterral and a distitution in the same calendary year. If you made a deferral and received a distitution 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 acopy. Box 12. The following ist explains the codes shown in box 12. You may need this information to expland busine the state of determine (and one DE E or ed State) down the both.

complete your tax return. Elective deferrals (codes structure to L. Control index of the total of the control tax return. Elective deferrals (codes and L. F. r. and S) and designated Roth controllutions (codes AA, BB, and EE) under all plans are generally limited to a total of \$22,500 (\$15,500 if you only have SIMPLE plans; \$25,500 for section 403(b) plans if you quality for the Tsyear rule explained in Pub. 571). Deferrals under code G are limited to \$22,500. Deferrals under code H are limited to \$7,000

SSN to the IRS and the Social Security Administration (SSA). Clergy and religious workers. If you aren't subject to social DD is not taxable.

your employment record. Be sure to ask the employer to file able to claim a credit for the excess against your federal You may also visit the SSA website at www.SSA.gov.

Employee's social security number (SSN). For your Cost of employer-sponsored health coverage (if such cost Do you have to file? Refer to the Form 1040 instructions to protection, this form may show only the last four digits of your is provided by the employer). The reporting in box 12, using SSN. However, your employer has reported your complete code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code

Credit for excess taxes. If you had more than one employer

However, if you were at least age 50 in 2023, your employer may have allowed an additional deferral of up to \$7,500 (\$3,500 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on ele tive deferrals. For code G. 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 reterment 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 priory aergy short hen 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 orthonizions on for the current year.

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.

From 1040 instructors C—Taxable cost of gnup-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5) D—Elective defemals 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. B—Elective deferrals under a section 403(b) salary reduction agreement F—Elective deferrals under a section 408(b) salary reduction agreement F—Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement G=Elective deferrals under a section 408(b) (b) salary reduction greement

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)

J—Nortaxable sick pay (information only, not included in box 1, 3, or 5) K—20% excise tax on excess golden parachule payments. See the Form 1040 instructions. L=Substantiated employee business expense einihusements (inortaxable) M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over \$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 embrusements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) O=Nortaxable tax or the Form 1040 instructions for details on renorting this

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. 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 to figure any taxable and

T— Adoption benefits (not included in box1). Complete Form 8839 to figure any taxable and nontraxable 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 for reporting requirements.
W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889.
Y—Defermats under a section 400A nonqualified deferred compensation plan that fails to satisfy section 400A.

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 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD

is not taxable

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 reimbusement arrangement GG—Income from qualified quity grants under section 83(i) elections 30 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. Box 14. Employers may use this box to report information such as state disability insurance

Box 14. Employees may use the box to report niromation such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permittims deducted, nontraxelible income, educational assistance payments, or a member of the elergy's parsonage allowance and utilities. Raitroad employers use this box to report railload tetrement (RRTA) compersation. Ther tax, Tier 2 tax, Medicate tax, and Additional Medicate Tax. Include tips reported by the employee to the employer in national reterement (RRTA) compensation. Note: Keep Copy C of Form V-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 unit your hourin preview nordial entity threading is in tho case them is a pursition doub tay truncity report to nortic strength on the protect your social security benefits. begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year

Form W-2 Wage	and Tax Statement 2023 OME	Departme	Department of the Treasury - Internal Revenue Service					
Control number			Employer identification number 47-3597831		Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return			
Employer's name, address, and ZIP code Kelly Services Global, LLC			Employee's SSN XXX-XX-3434		1 Wages, tips, c	ther compensation 133,516.60	2 Federal income tax withheld 24,185.32	
999 West Big Beaver Rd. STE 401A			7 Social security tips		3 Social security wages 133,516.60		4 Social security tax withheld 8,278.03	
Troy MI 48084 Employee's first name and initial Last Name Suffix SIVA SAI PAVAN KUMAR KANAMARLAPUDI 823 LAURIE AVE SANTA CLARA CA 95054 Employee's address and ZIP code			8 Allocated tips		5 Medicare wages and tips 133,516.60		6 Medicare tax withheld 1,935.99	
			9		10 Dependent care benefits		11 Nonqualified plans	
			12a DD	5,573.84	13 Statutory E	ory Employee 🔲 14 Other		
			12b		Retirement Plan			
			12c		Third-party	Third-party sick pay		
			12d					
15 State CA	Employer's State ID number 473597831	16 State wages, tips, etc. 133,516.60	17 State income tax 10,216.12	18 Local wage	es, tips, etc. 19 Local income tax		20 Locality name	

This information is being furnished to the Internal Revenue Service

Form W-2 Wage and Tax Statement 2023 OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number			Employer identification number 47-3597831		Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return			
Employer's name, address, and ZIP code Kelly Services Global, LLC 999 West Big Beaver Rd. STE 401A Troy MI 48084 Employee's first name and initial Last Name Suffix SIVA SAI PAVAN KUMAR KANAMARLAPUDI 823 LAURIE AVE			Employee's SSN XXX-XX-3434		1 Wages, tips, other compensation 133,516.60		2 Federal income tax withheld 24,185.32	
			7 Social security tips		3 Social security wages 133,516.60		4 Social security tax withheld 8,278.03	
			8 Allocated tips		5 Medicare wages and tips 133,516.60		6 Medicare tax withheld 1,935.99	
			9		10 Dependent care benefits		11 Nonqualified plans	
SANTA CLARA CA 95054			12a DD	5,573.84	13 Statutory E	Employee 🗌 14 0	Other	
Employee's address and ZIP code			12b		Retirement Plan      Third-party sick pay			
			12c					
			12d					
15 State	Employer's State ID number	16 State wages, tips, etc.	17 State income tax	18 Local wage	es, tips, etc.	19 Local income tax	20 Locality name	
CA	473597831	133,516.60	10,216.12					

This information is being furnished to the Internal Revenue Service

Form W-2 Wage	and Tax Statement 2023 OME	Department of the Treasury - Internal Revenue Service					
Control number			Employer identification number 47-3597831		COPY B To Be Filed With Employee's FEDERAL Tax Return		
Employer's name, address, and ZIP code Kelly Services Global, LLC			Employee's SSN XXX-XX-3434		1 Wages, tips, other compensation 133,516.60		2 Federal income tax withheld 24,185.32
999 West Big Beaver Rd. STE 401A		7 Social security tips		3 Social security wages 133,516.60		4 Social security tax withheld 8,278.03	
Troy MI 48084 Employee's first name and initial Last Name Suffix SIVA SAI PAVAN KUMAR KANAMARLAPUDI 823 LAURIE AVE SANTA CLARA CA 95054			8 Allocated tips		5 Medicare wages and tips 133,516.60		6 Medicare tax withheld 1,935.99
			9		10 Dependent care benefits		11 Nonqualified plans
			12a DD	5,573.84	13 Statutory Employee		Other
			12b				
			12c				
Employee's address and ZIP code			12d		Third-party sick pay		
15 State CA	Employer's State ID number 473597831	16 State wages, tips, etc. 133,516.60	17 State income tax 10,216.12	18 Local wage	es, tips, etc.	19 Local income tax	20 Locality name

This information is being furnished to the Internal Revenue Service

Form W-2 Wage and Tax Statement 2023	OMB No. 1545-0008	Department of the Treasur	y - Internal Revenue Service
Control number		Employer identification number	COPV C For Employee's P

Control number			Employer identification number 47-3597831		COPY C For Employee's Records (See Notice to Employee on back of Copy B)			
Employer's Kelly Servio	name, address, and ZIP code ces Global, LLC	Employee's SSN XXX-XX-3434		1 Wages, tips, other compensation 133,516.60		2 Federal income tax withheld 24,185.32		
999 West Big Beaver Rd. STE 401A			7 Social security tips		3 Social security wages 133,516.60		4 Social security tax withheld 8,278.03	
Troy MI 480 Employee's	first name and initial	8 Allocated tips		5 Medicare wages and tips 133,516.60		6 Medicare tax withheld 1,935.99		
SIVA SAI PAVAN KUMAR KANAMARLAPUDI 823 LAURIE AVE SANTA CLARA CA 95054			9		10 Dependent care benefits		11 Nonqualified plans	
			12a DD	5,573.84	13 Statutory Employee 14 Other			
			12b		Retirement Plan			
		12c		Third-party	Third-party sick pay			
Employee's address and ZIP code			12d					
15 State CA	Employer's State ID number 473597831	16 State wages, tips, etc. 133,516.60	17 State income tax 10,216.12	18 Local wage	es, tips, etc.	19 Local income tax	20 Locality name	

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.

# Kelly.

### EARNED INCOME TAX CREDIT NOTIFICATION

All California employers are required to notify all of their employees of both the federal and California Earned Income Tax Credit (EITC).

Revenue and Taxation Code, § 19853 requires any employer, who is subject to, and is required to provide unemployment insurance to employees, to notify all employees that they may be eligible for the EITC. Employers shall give notification within one week before or after, or at the same time, they provide employees with an annual wage summary (IRS Form W-2, 1099).

## NOTICE TO EMPLOYEES

Based on your annual earnings, you may be eligible to receive the Earned Income Tax Credit (EITC) from the federal government. The federal EITC is a refundable federal income tax credit for low-income working individuals and families. The federal EITC has no effect on certain welfare benefits. In most cases, federal EITC payments will not be used to determine eligibility for Medicaid, supplemental security income, food stamps, low-income housing, or most temporary assistance for needy families payments. Even if you do not owe federal taxes, you must file a federal tax return to receive the federal EITC. Be sure to fill out the federal EITC form in the federal income tax return booklet. For information regarding your eligibility to receive the EITC, including information on how to obtain the IRS Notice 797, or any other necessary forms and instructions, contact the Internal Revenue Service at 1-800-829-3676 or through its website at https://www.irs.gov/.

You also may be eligible to receive the California EITC. The California EITC is a refundable state income tax credit for low-income working individuals and families. The California EITC is treated in the same manner as the federal EITC and generally will not be used to determine eligibility for welfare benefits under California law. To claim the California EITC, even if you do not owe California taxes, you must file a California income tax return and complete and attach the California EITC form (FTB 3514). For information on the availability of the credit, eligibility requirements, and how to obtain the necessary California forms and get help filing, contact the Franchise Tax Board at 1-800-852-5711 or through its website at <u>www.ftb.ca.gov</u>.