| Copy B-To Be Filed With Employee's 41-0852411<br>Federal Tax Return. OMB No. 1545-0008  |  |                    |                  |  |  |  |
|---|--|--------------------|------------------|--|--|--|
| a Employee's soc. sec. no   | . 1  | Wages, tips, othe  | r comp.<br>13.00 | 2 Federal income tax withheld              |  |  |
| XXX-XX-2520   |  | Social security wa |                  | 27111.12<br>4 Social security tax withheld |  |  |
| b Employer ID number (EI  | _  |                    | 13.00            | 9034.21                                    |  |  |
|   | 5 Medicare wages and tips                      |                    |                  | 6 Medicare tax withheld                    |  |  |
| 45-5522328  |  | 1457               | 13.00            | 2112.84                                    |  |  |
| c Employer's name, address, and ZIP code  |  |                    |                  |  |  |  |
| GLOBALCLICK I<br>6909 S HOLLY C<br>STE 135<br>CENTENNIAL  |  |                    | со               | 80112                                      |  |  |
| d Control number 2  |  |                    |                  |  |  |  |
| e Employee's name, addre  | e Employee's name, address, and ZIP code Suff. |                    |                  |  |  |  |
| NAGA PRADEEP GAJULA<br>4851 KOKOMO DR<br>APT 7014<br>SACRAMENTO CA 95835  |  |                    |                  |  |  |  |
| 7 Social security tips  |  | 8 Allocated tips   |                  | 9  |  |  |
| 10 Dependent care benefits  | t care benefits 11 Nonqualified plans          |                    |                  | 12a Code                                   |  |  |
| 3 Statutory employee 14 Other   |  |                    | 12b Code         |  |  |  |
| Retirement plan   |  |                    | 12c Code         |  |  |  |
| Third-party sick pay  |  |                    |                  | 12d Code                                   |  |  |
| CA 077-0964-5   |  |                    | 5713.00          | 10803.04                                   |  |  |
| 15 State Employer's state ID number 16 State wages, tips, etc.  |  |                    |                  | 17 State income tax                        |  |  |
| 18 Local wages, tips, etc. 19 Local income tax  |  |                    | 20 Locality name |  |  |  |
| 145713.   | 00   | 1                  | 311.42           | CASDI                                      |  |  |
| Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury IRS This information is being furnished to the Internal Revenue Service. |  |                    |                  |  |  |  |

| Copy 2-To Be Filed With Employee's State, 41-0852411<br>City, or Local Income Tax Return. OMB No. 1545-0008 |       |                           |     |                                      |  |  |
|---|-------|---------------------------|-----|--------------------------------------|--|--|
| a Employee's soc. sec. no.  |       |                           |     | Federal income tax withheld 27111 12 |  |  |
| XXX-XX-2520   |       |                           |     | 4 Social security tax withheld       |  |  |
| b Employer ID number (EIN)  |       | 145713.00                 |     | 9034.21                              |  |  |
|   |       | 5 Medicare wages and tips |     | 6 Medicare tax withheld              |  |  |
| 45-5522328  |       | 145713.00                 |     | 2112.84                              |  |  |
| c Employer's name, address, and ZIP code  |       |                           |     |                                      |  |  |
| GLOBALCLICK LL<br>6909 S HOLLY CIF<br>STE 135<br>CENTENNIAL   |       | со                        |     | 80112                                |  |  |
| d Control number 2  |       |                           |     |                                      |  |  |
| e Employee's name, address, and ZIP code Suff.  |       |                           |     |                                      |  |  |
| NAGA PRADEEP GAJULA<br>4851 KOKOMO DR<br>APT 7014<br>SACRAMENTO CA 95835                                    |       |                           |     |                                      |  |  |
| 7 Social security tips  | 8 AI  | located tips              | 9   |                                      |  |  |
| 10 Dependent care benefits  |       | 11 Nonqualified plans     |     | 12a Code                             |  |  |
| 13 Statutory employee 14 Oth  | er    |                           | 12  | 2b Code                              |  |  |
| Retirement plan   |       |                           | 12  | 2c Code                              |  |  |
| Third-party sick pay  | ay    |                           |     | 12d Code                             |  |  |
| CA 077-0964-5   |       | 145713.00                 |     | 10803.04                             |  |  |
| 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax                          |       |                           |     |                                      |  |  |
| 18 Local wages, tips, etc. 19 Local income tax  |       |                           |     | 20 Locality name                     |  |  |
| 145713.00 1311.42   |       | CASDI                     |     |                                      |  |  |
| Form W-2 Wage and Tax Stat  | ement | 2023                      | . [ | Dept. of the Treasury IRS            |  |  |
| DAA   |       |                           |     | · •                                  |  |  |

| Copy C-For EMPL<br>Notice to Employee                          | Copy C-For EMPLOYEE'S RECORDS (See 41-0852411<br>Notice to Employee on the back of Copy B.) OMB No. 1545-0008   |                       |  |                               |                                    |  |
|--|---|-----------------------|--|-------------------------------|------------------------------------|--|
| a Employee's soc. sec. no.                                     |   |                       | ages, tips, other comp.                | 2 Federal income tax withheld |                                    |  |
| XXX-XX-2520  |   |                       | 145713.00                              |                               | 27111.12                           |  |
|  |   | 3 Sc                  | ocial security wages                   | 4 3                           | 4 Social security tax withheld     |  |
| b Employer ID number   | r (EIN)   | - 14                  | 145713.00                              | 9034.21                       |                                    |  |
| 15 550000  | 15 550000   |                       | 5 Medicare wages and tips<br>145713.00 |                               | 6 Medicare tax withheld<br>2112.84 |  |
| 45-5522328<br>c Employer's name, address, and 2                |   |                       |  |                               | 2112.04                            |  |
|  | ,   |                       |  |                               |                                    |  |
| GLOBALCLIC   |   | ,                     |  |                               |                                    |  |
| STE 135  | I CIR   |                       |  |                               |                                    |  |
|  |   |                       | CO                                     |                               | 80112                              |  |
|  | -   |                       | 00                                     |                               | 00112                              |  |
| d Control number   | d Control number  |                       |  |                               |                                    |  |
| e Employee's name, a   | ddress, a   | ind Z                 | IP code                                |                               | Suff.                              |  |
|  | ED  |                       | GAJULA                                 |                               |                                    |  |
| 4851 KOKOM   |   |                       | OAJOLA                                 |                               |                                    |  |
| APT 7014   | O DI  |                       |  |                               |                                    |  |
|  | SACRAMENTO CA 95835   |                       |  |                               |                                    |  |
|  | <u> </u>  |                       |  | 9                             |                                    |  |
| 7 Social security tips   |   | 8 Allocated tips      |  | 9                             |                                    |  |
| 10 Dependent care benefits                                     |   | 11 Nonqualified plans |  | 12a Code                      |                                    |  |
| 13 Statutory employee  | 13 Statutory employee 14 Other  |                       |  | 12b Code                      |                                    |  |
|  |   |                       |  |                               |                                    |  |
| Retirement plan  | Retirement plan   |                       |  | 12c Code                      |                                    |  |
| Third-party sick pay   | •   |                       |  |                               | 2d Code                            |  |
| rima party clore pay   |   |                       |  | '2                            |                                    |  |
| CA 077-0964-   | 5   |                       | 145713.00                              |                               | 10803.04                           |  |
| 15 State Employer's state ID number 1                          |   |                       | 16 State wages, tips, etc.             |                               | 17 State income tax                |  |
| 18 Local wages, tips, etc.                                     |   | 19 Local income tax   |  | 20 Locality name              |                                    |  |
| 145713.00  |   | 1311.42               |  | lc                            | CASDI                              |  |
|  |   |                       |  | ١                             |                                    |  |
| Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury IRS |   |                       |  |                               |                                    |  |
| This information is being f                                    | This information is being furnished to the IRS. 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. DAA |                       |  |                               |                                    |  |
|  |   |                       |  |                               |                                    |  |

| Copy 2-To Be Filed Wit<br>City, or Local Income T  | 41-0852411<br>OMB No. 1545-0008         |   |  |
|--|---|---|--|
| a Employee's soc. sec. no.   | 1 Wages, tips, other comp.<br>145713.00 | 2 Federal income tax withheld 27111.12    |  |
| XXX-XX-2520<br>b Employer ID number (EIN)  | 3 Social security wages<br>145713.00    | 4 Social security tax withheld<br>9034.21 |  |
|  | 5 Medicare wages and tips               | 6 Medicare tax withheld                   |  |
| 45-5522328   | 145713.00                               | 2112.84                                   |  |
| c Employer's name, address,<br>GLOBALCLICK LL<br>6909 S HOLLY CIF<br>STE 135<br>CENTENNIAL | С                                       | 80112                                     |  |
| d Control number   |   |   |  |
| e Employee's name, address,  | and ZIP code                            | Suff.                                     |  |
| 4851 KOKOMO DF<br>APT 7014<br>SACRAMENTO<br>7 Social security tips                         | CA<br>8 Allocated tips                  | 95835<br>9                                |  |
| 7 Social security lips   | o Allocated lips                        | 9   |  |
| 10 Dependent care benefits   | 11 Nonqualified plans                   | 12a Code                                  |  |
| 13 Statutory employee 14 Ot  | ner                                     | 12b Code                                  |  |
| Retirement plan  |   | 12c Code                                  |  |
| Third-party sick pay   |   | 12d Code                                  |  |
| CA 077-0964-5  | 145713.00                               | 10803.04                                  |  |
| 15 State Employer's state ID n   | umber 16 State wages, tips, etc.        | 17 State income tax                       |  |
| 18 Local wages, tips, etc.   | 19 Local income tax                     | 20 Locality name                          |  |
| 145713.00  | 1311.42                                 | CASDI                                     |  |
| Form W-2 Wage and Tax Sta  | ement 2023                              | Dept. of the Treasury IRS                 |  |

## Notice to Employee

Do you have to file? Refer to the Forrm 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 2023 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 2023 or if income is earned for services provided while you were an inmate at a penal institution. For 2023 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 vou 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

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 and 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 2023 and more Credit for excess taxes. If you had more than one employer in 2023 and more than \$9,932 do 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 \$5,827.120 in Tier 2 RRTA tax was withheld, you may also 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 C.)

## Instructions for Employee

(See also Notice to Employee on the back of Copy B.) 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

Box 5. You may be required to report this amount on Form 8959.. See the Form 1040 instructions to determine if you are required to complete Form 8959.

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

Box 6. This anticular licitudes line 1.45% Netoticale 1 ak winifield on all Nedicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of hose Medicare wages and tips allow 6. This/out/out/site intervention in box 5, as well as the 0.9% Additional Medicare Tax on any of hose Medicare wages and tips allow 6. This/out/site intervention is the form 1040 instructions. You must file form 137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated by amount thesis 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 fit is its more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you dinvit the credited to your social security record (used to figure your benefits). Box 10. This amount includes cartify tips will be credited to your social security record (used to figure your benefits). Box 10. This amount included in box 1. See Form 2441. Social security and Medicare tax owed no tips you directed in box 1. See Form 2441. Social security and Medicare tax awall Medicare tax are use there is no longer a substantial risk of forfeiture of your right to the deferred amounts from some calendar year, your employer should file form section 457(b) plan, or (b) included in box 3. and/or box 5 fit is a piror year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes well ad deferral and a distribution in the same calendar year, your employer should file Form Son 12. The subjoyer Report of Special Wage Payments, with se Social Security Administration and give you a cocy. Box 12. The tollowing ist explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals for dollowing ist explains the codes show in box 12. You may need this info

401(k)(11) and 408(p) SIMPLE plans). This additional deterral amount is not subject to the overall limit on elective deterrals. For code G, the limit on elective deterrals 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 deterral 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 deterrals, 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.

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 SMIPLE retirement account that is part of a section 401(k) arrangement. E-Elective deferrals under a section 403(b) salary reduction SEP E-Elective deferrals under a section 403(b) salary reduction SEP E-Elective deferrals and er a section 403(b) 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.

U-so are roun row instructions for now to deduct. J-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. Instructions. L-Substaniated employee business expense reimbursements (nontaxable) 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.

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

instructions. P-Excludable moving expense reimbursements paid directly to a member of the Prexcludation moving expense reminusements para directory to a memory U.S. Armed Forces (not included in box 1, 3, or 5) 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.

Recompose communications to your Arctiert mode, report on Form 3853. S-Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1) -Adoption benefits (not included in box 1). Complete Form 8839 to figure any taxable and nontaxable amounts.

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 for reporting requirements. W-Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to vur health savings account. Report on Form 8889. Y-Deferrals under a section 409A nonqualified deferred compensation plan

V-Defersits under a section 409A nonqualified deferred compensation plan Z-Income under a 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 plas interest. See the Form 1040 instructions. AA-Designated Roth contributions under a section 401(b) plan BB-Designated Roth contributions under a section 401(b) plan BB-Designated Roth contributions under a section 403(b) plan EE-Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a governmental section 457(b) plan. FF-Permitted benefits under a qualified small employer health reimbursement arrangement GG-Income from qualified exuity grants under section R400

come from qualified equity grants under section 83(i) gregate deferrals under section 83(i) elections as of the close of

GG-income trom quantizes very HH-Aggregate deferrals under section 83(i) elections as or the cuteer the calendar year Box 13. If the Reteinment 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 taxes withheld, union dues, uniform payments, health insurance previous deducted, nontraable income educational asistance and the clergy's parsonage allowance and utilities. insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Raincad employeers use this box to report raincad retirement (RRTA) compensation. Ther 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in anircad retirement (RRTA) compensation. Note: Keep Copy C of Form W-2 for al least 3 years after the due date for filing your income tax terum. However, to help protect your social security benefits, keep Copy C unit you begin receiving social security benefits, just in case there is a question about your work record nafder earnings in a particular year.