Copy B-To Be Filed W Federal Tax Return.	41-0852411 OMB No. 1545-0008				
a Employee's soc. sec. no.	1 Wages, tips, other comp. 20495.50	2 Federal income tax withheld			
XXX-XX-2030	3 Social security wages	4 Social security tax withheld			
b Employer ID number (EIN)		,			
45.0700457	5 Medicare wages and tips	6 Medicare tax withheld			
45-2700157 c Employer's name, address	and ZID ands				
' '					
E-GIANTS TECHN   4500 WESTOWN					
WEST DES MOIN	50266				
d Control number					
e Employee's name, address	, and ZIP code	Suff.			
VASUDEVA REDI 2316 CERROS LN					
DENTON	TX	76207			
7 Social security tips	8 Allocated tips	9			
10 Dependent care benefits	11 Nonqualified plans	12a Code			
13 Statutory employee 14 O	her	12b Code			
Retirement plan		12c Code			
Third-party sick pay		12d Code			
	number 16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury IRS This information is being furnished to the Internal Revenue Service.					

Copy 2-10 Be File	ome Ta	n Employee's State, ax Return.		41-0852411 OMB No. 1545-0008	
a Employee's soc. sec		1 Wages, tips, other comp.	$\sqrt{}$	2 Federal income tax withhe	
XXX-XX-2030		20495.50 3 Social security wages		4 Social security tax withhel	
b Employer ID numbe	r (FIN)	3 Social security wages		4 Social Security tax withine	
2p.oyor 12 mambo	. (=)	5 Medicare wages and tips	;	6 Medicare tax withheld	
45-2700157					
c Employer's name, a	ddress, a	and ZIP code			
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WEST DES N	S	IA	50266		
d Control number	132				
e Employee's name, a	ddress,	and ZIP code		S	
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DENTON	JS LIN	8 Allocated tins	TX	7 0207	
DENTON		8 Allocated tips	TX	76207	
DENTON 7 Social security tips		8 Allocated tips 11 Nonqualified plans	TX	10201	
DENTON		11 Nonqualified plans	TX	9	
DENTON 7 Social security tips 10 Dependent care bei 13 Statutory employee Retirement plan	nefits	11 Nonqualified plans	TX	9 12a Code	
DENTON 7 Social security tips 10 Dependent care bei	nefits	11 Nonqualified plans	TX	9 12a Code 12b Code	
DENTON 7 Social security tips 10 Dependent care bet 13 Statutory employee Retirement plan Third-party sick pay	nefits  14 Oth	11 Nonqualified plans		9 12a Code 12b Code 12c Code 12d Code	
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DENTON 7 Social security tips 10 Dependent care bet 13 Statutory employee Retirement plan Third-party sick pay	nefits  14 Oth	11 Nonqualified plans	etc.	9 12a Code 12b Code 12c Code 12d Code	

Copy C-For EMPLOYE Notice to Employee or	E'S RECORDS (See the back of Copy B.)	41-0852411 OMB No. 1545-0008		
a Employee's soc. sec. no. XXX-XX-2030	1 Wages, tips, other comp. 20495.50	2 Federal income tax withheld 1727.62		
	3 Social security wages	4 Social security tax withheld		
b Employer ID number (EIN)	5 Medicare wages and tips	6 Medicare tax withheld		
45-2700157 c Employer's name, address	and ZIP code			
E-GIANTS TECHN 4500 WESTOWN	OLOGIES, LLC			
WEST DES MOIN	ES IA	50266		
d Control number				
e Employee's name, address	and ZIP code	Suff.		
VASUDEVA REDI 2316 CERROS LN	Y MUTHYALA			
DENTON	TX	76207		
7 Social security tips	8 Allocated tips	9		
10 Dependent care benefits	11 Nonqualified plans	12a Code		
13 Statutory employee 14 O	12b Code			
Retirement plan	12c Code			
Third-party sick pay	12d Code			
15 State Employer's state ID	number 16 State wages, tips, etc.			
18 Local wages, tips, etc.	19 Local income tax	17 State income tax 20 Locality name		

LVVV VV anan		20495.50		1/27.62		
XXX-XX-2030		3 Social security wages		4 Social security tax withheld		
b Employer ID number (I	(EIN) 5 Medicare wages and tips			e	6 Medicare tax withheld	
45-2700157	آ ا	5 Medicare wages and lips		3	o Medicare tax withheld	
c Employer's name, add	ress, and	d ZIF	code			
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WEST DES MOINES IA					50266	
d Control number	32					
e Employee's name, add	dress, an	d ZI	P code		Suff.	
VASUDEVA RE 2316 CERROS		I	MUTHYALA			
DENTON				TX	76207	
7 Social security tips 8 Al			ocated tips		9	
10 Dependent care bene	fits 1	1 No	onqualified plans		12a Code	
13 Statutory employee 14 Other					12b Code	
Retirement plan					12c Code	
Third-party sick pay					12d Code	
15 State Employer's state	e ID num	ber	16 State wages, tips	, etc.	17 State income tax	
18 Local wages, tips, etc	1	19 Lo	ocal income tax		20 Locality name	
Form W-2 Wage and Ta	x Statem	nent	2023		Dept. of the Treasury IRS	

1 Wages, tips, other comp. 20495.50

Form W-2 Wage and Tax Statement DAA

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return.

a Employee's soc. sec. no.

41-0852411 OMB No. 1545-0008

2 Federal income tax withheld 1727.62

## **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

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

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 ande 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

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 \$9,932.40 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 \$5,821.20 in Tier 2 RRTA tax was withheld, yo may also be able to claim a refund on Form 843. See the Instructions for Form

(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 altifout includes the 1-asys webscate is as with feet on an Medicare wages and tips shown in box 5, as well as the 0-3% Additional Medicare wages and tips shown in box 5, as well as the 0-3% Additional Medicare wages and tips above \$200,000 count is not included in box 1, 3, 5 or 7. For information box 6, we can be compared to the country of the properties o

401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code 6, 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 pensino 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. Al-Uncollected social security or RRTA tax on nits. 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 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 C-Elective deferrals under a section 408(k) 6) salary reduction SEP

G-Elective deflerals 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.

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-Substantiated 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 P-EXCludation moving expense reminusements pain one-up at a minimum. 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 883-2.

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 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 your health savings account. Report on Form 8889.

Y-Deterrals under a section 409A nonqualified deferred compensation plan

\*\*Y-Deferrals under a section 409A nonqualified deferred compensation plan Z-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(b) plan BB-Designated Roth contributions under a section 401(b) plan Db-Dc.00 of employers personated health overlage. The amount reported with Db-Dc.00 of the properties of the plan of th

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

GG-income from quantized country.

HHAggregate deferrals under section 83(i) elections as or time cubes on 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 taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, deducational assistance. insurance premiums deutoted, nortaxable income, educational assistance payments, or anember of the clery's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) correpersation. Ther 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in callroad retirement (RRTA) compensation. Well-care the employee to the employer in callroad retirement (RRTA) compensation. Well-care the employee to the seminor after the due take for filling your income tax return. However, to help protect your social security benefits, seep Copy C unit you begin receiving social security benefits, just in case there is a question about your work read and/or earnings in a particular year.