						Federal Box 1	Soc. Sec. Box 3 & 7	Medicare Box 5		
To th	ne right is information w	which shows your total wages	hv	Gross Wages		146625.45	146625.45	146625.45		
W-2	box and the amount of	f any deferred compensation a at were subtracted from total	and/or	Txbl Benefits		54.68	54.68	54.68		
	es to arrive at your W-2			Group Term Life		201.50	201.50	201.50		
Gen	eral instructions for the	se forms, including an explan	ation	Adoption Deferred Comp		(0016 41)				
	ne letter codes used in l Brate document.	box 12, are available on a		Section 125		(9016.41) (4265.56)	(4265.56)	(4265.56)		
				Other Pretax/Wag	ge Lim					
				W-2 Wages		133599.66	142616.07	142616.07		
	ee's social security number	b Employer identification number (EIN	I)	d Control number						
	87-4472	36-1258310		001160654801	4 18/	4:41	2 Federalines		No. 1545-0008	
	er's name, address, and ZIP co	de			1 wag	es, tips, other compensation 133599.6		me tax withheld	13940.41	
	ois Tool Works Inc. Harlem Avenue				3 Soci	al security wages	4 Social secur	ity tax withheld		
Glen	view IL 60025					142616.0			8842.20	
					5 Med	icare wages and tips 142616.0	6 Medicare tax	withheld	2067.93	
(0) (0)	ee's first name and initial	Last name	Su	ff.	7 Soci	al security tips	8 Allocated tip	s	2007.55	
Vam 4772	si 2 Lake valley Drive	Kukkapalli			23333334					
Apt : Lis l e	1A IL 60532				9		10 Dependent	10 Dependent care benefits		
USA					11 No	nqualified plans	12a See instr	uctions for box 12		
f Employe	ee's address and ZIP code						Code C	ı	201.50	
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State i	ncome tax	13	Statutory Retirement Third-party employee plan sick Pay	, 12b Code D	ĩ	9016.41	
IL	36-1258310 000 8	46028.54		2275.72	l		12c			
18 Local v	vages, tips, etc.	19 Local income tax	20 Localit	y name	14 Oth	er	Code DD	1	21417.50	
							Code			
	2 Wage and Tax Statemen or EMPLOYEE'S RECORDS	t		2023		This information is being furnish	Department of the led to the Internal Revenue			
						negligence penalty or other sancti	on may be imposed on yo	if this income is taxable	and you fail to report	
		b Employer identification number (EIN			_					
	ee's social security number 87-4472	36-1258310	')	d Control number 001160654801				OMB	No. 1545-0008	
c Employe	er's name, address, and ZIP co	de			1 Wag	es, tips, other compensation	2 Federal inco	me tax withheld		
Illino	ois Tool Works Inc.					133599.6			13940.41	
	Harlem Avenue view IL 60025				3 Soci	al security wages 142616.0		ty tax withheld	8842.20	
					5 Med	icare wages and tips	6 Medicare tax	withheld		
e Employ	ee's first name and initial	Last name	Su	ff	_	142616.0	_		2067.93	
Vam	si	Kukkapalli	ou		7 Soci	al security tips	8 Allocated tip	S		
4772 Apt	2 Lake valley Drive 1A				9		10 Dependent	care benefits		
Lis l e USA	IL 60532									
	ee's address and ZIP code				11 No	nqualified plans	12a See instr Code C	uctions for box 12	201.50	
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 Ctata i	ncome tax	13	Statutory Retirement Third-party			201.50	
IL	36-1258310 000 8	46028.54	17 State I	2275.72	13	employee plan sick Pay	Code D		9016.41	
	200					X	Code DD	1	21417.50	
18 Local v	wages, tips, etc.	19 Local income tax	20 Localit	y name	14 Oth	er	12d Code	1		
					Ì		0000			
	2 Wage and Tax Statemen			2022			Department of the	Treasury - Internal	Revenue Servic	
Сору В—Т	o Be Filed With Employee's FE	DERAL Tax Return.		2023						
	ee's social security number	b Employer identification number (EIN	1)	d Control number				XI		
	87-4472 er's name, address, and ZIP co	36-1258310		001160654801	1 Wan	es, tips, other compensation	2 Federal inco	OMB me tax withheld	No. 1545-0008	
		ue			, mag	133599.6		me tax witimeta	13940.41	
155	ois Tool Works Inc. Harlem Avenue				3 Soci	al security wages	l l	ty tax withheld		
Glen	view IL 60025					142616.0			8842.20	
					5 Med	icare wages and tips 142616.0	6 Medicare tax	withheld	2067.93	
	ee's first name and initial	Last name	Su	ff.	7 Soci	al security tips	8 Allocated tip	s		
	Lake valley Drive	Kukkapalli			_		100 000	. 2		
	1A IL 60532				9		10 Dependent	care benefits		
USA					11 No	nqualified plans	12a See instr	uctions for box 12		
f Employe	ee's address and ZIP code						Code C	Î	201.50	
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State i	ncome tax	13	Statutory Retirement Third-party employee plan sick Pay	Code D	Ĩ	9016.41	
IL	36-1258310 000 8	46028.54		2275.72	1	_ x _	12c			
18 Local v	vages, tips, etc.	19 Local income tax	20 Localit	y name	14 Oth	er	Code DD 12d	<u> </u>	21417.50	
			}				Code			

To the right is information which shows your total wages by W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total wages to arrive at your W-2 wages. General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.				Gross Wages Txbl Benefits Group Term Life Adoption Deferred Comp Section 125 Other Pretax/Wag W-2 Wages	ge Limit					
				I Control number						
$\overline{}$	'7-4472 's name, address, and ZIP co	36-1258310 de		001160654802	OMB No. 1 Wages, tips, other compensation 2 Federal income tax withheld			OMB No. 1545-0008		
50 000	s Tool Works Inc.				477. 174					
155 Harlem Avenue Glenview IL 60025					3 Social security wages 4 Social security tax withheld			eld		
					5 Medicare wages and tips		6 Medicare tax withheld			
(0) (0)	e's first name and initial	Last name	Su	ff.	7 Social security tips 8 Allocated tips					
Vamsi Kukkapalli 4772 Lake valley Drive Apt 1A				9 10 Dependent care benefits			s			
Lisle IL 60532 USA								500 E-00-00-0		
f Employee	's address and ZIP code				11 Nonqua	lified plans		12a See instructions for li Code	oox 12 	
15 State	Employer's state ID Number 36-1258310	16 State wages, tips, etc. 87571.12	17 State i	ncome tax	13 Stat	utory Retirement Third-pa loyee plan sick Pa	arty y	12b Code	ı	
MI	30-1230310	0/3/1.12		3624.78				12c Code	ľ	
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other			12d Code	l	
								Code		
	Wage and Tax Statemen r EMPLOYEE'S RECORDS	t		2023	II.	This information is being fur negligence penalty or other sa	nished to th	tment of the Treasury— ne Internal Revenue Service. If yo be imposed on you if this income	u are required to file a tax return	
	e's social security number	b Employer identification number (EIN 36-1258310	1)	d Control number 001160654802						
	's name, address, and ZIP co			00110003.002	1 Wages, t	ips, other compensation		2 Federal income tax with	OMB No. 1545-0008 held	
155 H	s Tool Works Inc. Iarlem Avenue iew IL 60025				3 Social se	curity wages		4 Social security tax withheld		
Gienv	100023				5 Medicare	wages and tips		6 Medicare tax withheld		
e Employee Vamsi	e's first name and initial	Last name Kukkapalli	Su	ff.	7 Social se	curity tips		8 Allocated tips		
4772 Lake valley Drive Apt 1A Lisle IL 60532				9 10 Dependent care benefits			S			
USA f Employee's address and ZIP code				11 Nonqualified plans		12a See instructions for box 12 Code				
15 State MI	Employer's state ID Number 36-1258310	16 State wages, tips, etc. 87571.12	17 State i	ncome tax 3624.78	13 Stat	utory Retirement Third-pa loyee plan sick Pa	arty y	12b Code	ľ	
-01	30 1230310	0/3/1.12		3024.70		x]	12c Code	ı	
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other			12d Code	ľ	
	Wage and Tax Statemen Be Filed With Employee's FE			2023			Depa	rtment of the Treasury -	Internal Revenue Servi	
838-8	e's social security number 37–4472	b Employer identification number (EIN 36-1258310	1)	d Control number 001160654802					OMB No. 1545-0008	
	's name, address, and ZIP co	de			1 Wages, t	ips, other compensation		2 Federal income tax with	held	
Illinois Tool Works Inc. 155 Harlem Avenue Glenview IL 60025					3 Social se	curity wages		4 Social security tax withheld		
					5 Medicare	wages and tips		6 Medicare tax withheld		
Vamsi		Last name Kukkapalli	ff.	7 Social security tips 8 Allocated tips						
4772 Lake valley Drive Apt 1A Lisle IL 60532					9 10 Dependent care			10 Dependent care benefit	s	
USA f Employee	's address and ZIP code			11 Nonqua	lified plans		12a See instructions for I	00x 12		
15 State	Employer's state ID Number		17 State i	ncome tax	13 Stat	utory Retirement Third-pa	arty v	12b	i	
MI	36-1258310	87571.12		3624.78		X X	3	Code 12c		
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other			Code 12d	<u> </u>	
								Code		

Form W-2 Wage and Tax Statement
Copy 2—To Be Filed With Employee's State, City, or local Income Tax Return