64998.					5127.47
 Wages, tips, other comp 		2	Federal	inco	ome tax withheld
64998.	75				4029.92
3 Social security wages		4	Social s	ecu	urity tax withheld
64998.	75				942.48
5 Medicare wages and tips	3 6	6	Medica	re ta	ax withheld
Ennoyer's name address, and ZIP code ANVE LLC 5741 CRAIN HWY Upper Marlboro MD 20772					
7 Social security tips	8	3	Allocate	d ti	ps
9	1	10	Depend	ent	care benefits
11 Nonqualified plans	1	2	a	Γ	
	1	2	5		
13 Statutory Retrement Third-per sick pay	1	20	•		
	1	20	d		
14	Employee's soc				
	Employer ID no 46-42772				
				7004375007	
SANTOSH R SAMALA 2701 Keystone lane, Apt # 101 Vienna VA 22180					
Employee's name, address, and ZIP code					
15 St. Employer's state ID number VA 30-464277270F-001	16 State wages, tips, etc 64998.75		17 State income tax 2991.90		
18 Local wages, tps, etc.	19 Local income tax		20 Locality name		
Wage and Tax Statement Form					
Copy B This information is being furnished to the IRS To Be Filed With Employee's FEDERAL Tax Return.					
OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service					

1 Wages, tips, other comp		Federal ind	come tax withheld			
64998.	75		4029.92			
3 Social security wages	4	Social sec	urity tax withheld			
64998.	. ~		942.48			
5 Medicare wages and tips		6 Medicare tax withheld				
Employer's name, address, and ZIP code ANVE LLC						
5741 CRAIN HWY						
Upper Marlboro	MD 2	0772				
7 Social security tips	8	8 Allocated tips				
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	K	10 Dependent care benefits				
11 Nonqualified plans	12a					
i i Nonqualileu pians	12					
13 Statutory Retirement Third part sick pay						
employee plan sick pay	12					
14			noial acquirity no			
		Employee's social security no. XXX-XX-4375				
		Employer ID number (EIN)				
		46-4277270				
		Control 000847004375007				
SANTOSH R SAMALA						
2701 Keystone lane, Apt # 101						
Vienna VA 22180						
			I			
Employee's name, address, and ZIP code						
15 St Employer's state iD number VA 30-464277270F-001	16 State wages, tips, etc. 17 State income ta					
VA 30-4042//2/01-001	64998.75 2991.90					
18 Local wages, tips, etc.	19 Local income tax 20 Locality name					
	11000	III	The transmity indities			

Wage and Tax Statement

CODY C - For EMPLOYEE'S RECORDS

Department of the Treasury

This information is being furnished to the IRS If you are required to file a tax return, a negligence constity or other renotion may be imposed on you if this income is taxable and you fail to report it.

64998.75

64998.					5127.47
1 Wages, tips, other comp		2	Federal	inco	me tax withheld
64998.	75				4029.92
3 Social security wages		4	Social s	ecu	rity tax withheld
64998.					942.48
5 Medicare wages and tips	-	6	Medica	re ta	ax withheld
Employers mame, soddress, and ZiP code ANVE LLC 5741 CRAIN HWY Upper Marlboro MD 20772					
7 Social security tips		8	Allocate	d ti	ps
9 100		O Dependent care benefits			
11 Nonqualified plans		12	a		
		12	b		
13 Statutory Retirement Third-par sick pay	ty	12c			
	_	12			
14	Employee's soc			cial security no. 4375	
	Employer ID no 46-42772				
Gentral 00084			7004375007		
SANTOSH R SAMALA 2701 Keystone lane, Apt # 101 Vienna VA 22180 Employee's name, address, and ZIP code					
15 St. Employer's state ID number	169	tate	Wages time	etc	17 State Income tax
VA 30-464277270F-001	64998.75		2991.90		
18 Local wages, tps, etc.	19 Local income tax		20 Locality name		
Wage and Tax Statement Form Copy 2 W-2 To Be Filed With Employee's State,					
City, or Local Income Tax Return OMB No. 1545-0008 Department of the Treasury - Internal F				msl Revenue Service	

5127.47

Form

1

W-2

2023

S. SHALL AND

Instructions for Employee
Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the fosteral income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8359. See the Form 1040 instructions to sidermite if you are required to complete Form 8459.

Box 6. This amount includes the 1 45% Medicare tax withheld on all Medicare wayes and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wayes and tips above \$200,000.

and tips shown in box 5, as well as the 0.99% Additional Medicare Tox on any of those Medicare varies and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7, For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137 with your income tax return to report at least the allocated tip amount unless you can prove with actequate records that you received a smaller amount, or the provided and the second of the second of the second of the your experted and the amount of the your experted as most amount or the provided and the second of the your experted and the second of the your experted and the second of the your experted and the year of the amount of the your experted and the year of the second of the your experted and the year of the second of the year of the second year of the year of year of the year of year year of y

ario you a copy.

Special vicine Porjaminate, with the Social Social Administration and sort 2. The boltowing list explains the codes aboven in box 1.2 You may need this blown in box 1.2 the boltowing list explains the codes and the sound in box 1.2 You may need this inhametion to complete your tex nature. Explain clearing the code in the codes A.R. Bit, and ET instead read the contributions of solid size instead to a total of \$22,500 (\$15,500 it you only have SIMPLE plants, \$55,500 it or section 40(3)b) plans it you qualify for the 15-year rule explained in Pot 171 (before such code did are limited to \$22,500 (before size under code Here limited to \$7,000 However it for you were of beast age \$50 in (202, your employer may have allowed an activitional deferral of up to \$7,500 (\$3,500 for section 40(6)(11) and 40(6)) SIMPLE plants, This actional deferral amount is not subject to the overall limit on elective deferrals may be higher for the last 3 years plants. This actions of storage of context your plant administrator for more information. Amounts in covers of this desire of the form 1040 instruction contains deciring deferral must be included in income. See Neter 16 of the plant of the plant of the plant in the plant of the plant in the plants of the plant of the plant of the plants.

the Form 1040 instructions.

Note: If a year follows code 0 through H, S, Y, AA, BB, or EE, you made a make up pension contribution for a prior yearfsi when you were in military service. To figure whether you made excess defenses, consider these amounts for the veer 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. See the Form 1040 instructions.

Form 1040 instructions.

C—Tazable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 6).

D—Elschie deferrals to a section 4016) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 4016) arrangement. E-Elschie deferrals under a section 40301 salary reduction agreement.

F—Elschie deferrals under a section 40301 salary reduction agreement.

F—Elschie deferrals under a section 408016 salary reduction set.

P—Elective desirates unare a secritor receiptor sealery recurrent SEC.

—Elective desirates and employer contributions (including nonelective deterrals) to a section 457/b) deferred compensation plan.

—Elective deferreds to a section 591(±)(18)(1) tax-exempt organization plan. See the Form 1040 instructions for how to declare.

J—Nontexable sick pay (information only, not included in box 1, 3, or 5)
K—20% excise tax on excess golden parachute payments. See the Form 1840 instructions.

K—20% excise tax on excess goiden personate psyments, see the norm town instructions.

L—Substantisted employee business expense minibursements (nontraxable) M—Uncollocated social security or RETA tax on traxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

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

P—Excitation moving expense simibursements paid clicetly to a member of the U.S. Armod Foreas (not included in box 1, 3, or 5).

O—Nontaxable combat pay See the Form 1040 instructions for details on reporting this amount.

R-Employer contributions to your Archer MSA. Report on Form 6853.

All & Blow and

64998.				5127.47	
1 Wages, tips, other comp	_	Federal	incor	me tax withheld	
64998.	. •			4029.92	
3 Social security wages 64998.		Socials	ecui	rity tax withheld	
5 Medicare wages and tip		Madiaa		942.48	
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Upper Marlboro	MD 2	20772			
7 Social security tips	8	Allocate	ed tip	os	
	10	Depend	ent o	care benefits	
	1				
11 Nonqualified plans		2a			
As Otto bary Debessed Third	157	2b			
13 Statutory Retirement Third-par employee plan sick pay		2c	_		
<u></u>		2d			
		Employee's social security no. XXX-XX-4375			
		Employer ID number (EIN) 46-4277270			
		Control 000847004375007			
SANTOSH R SAMALA 2701 Keystone lane, Apt # 101 Vienna VA 22180					
15 St. Employer's state IO number	,	wages, tips	etc	17 State income tax	
VA 30-464277270F-001		4998.		2991.90	
8 Local wages, tips, etc. 19 L		ocal income tax		20 Locality name	
Wage and Tax Statement Form					
Copy 2 W-2					
To Be Filed With Employee's State, City, or Local Income Tax Return					
DMB No. 1545-0008 Department of the Treasury - Internal Revenue Service					

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

included in tox 1)

T—Adoption benefits (pot included in box 1). Complete Form 8830 to figure any taxable and nonlazable amounts.

T—Adoption benefits (not included in box 1). Complete Form 8830 to figure any taxable and nonlazable amounts.

V—Income from exercise of nonestatutory stock optionis) (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 (attalestrapilary) to your health savings account. Report on Form 8880.

Y—Deterrals under a section 400A nonqualified deferred compensation plan

T—Income much as a nonqualified the faired commansation plan in the figis to selfative section.

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 4A. This amount is also included in box 1. It is subject to an additional 20% (ax plus interest. See the Form 1040 instructions

interest. See the Form 1049 instructions
AA—Designated Roth contributions under a section 401(k) plan
BB—Designated Roth contributions under a section 403(k) plan
DD—Cost of employer-sponsored health coverage. The amount reported with code
DD is not taxable.
EE—Designated Roth contributions under a governmental section 437(k) plan. This
amount does not apply to contributions under a lax-exempt organization section 457(b)
plan.

Permitted benefits under a qualified small employer health reimbursement

FF—Parmitted benefits under a quelified small employer health reimbursement arrangement arrangement.

GG—Income from qualified equity grants under section 83(ii) elections as of the close of the calendar year flower of the Allendar Section 83(ii) elections as of the close of the calendar year flower.

HM—Aggregate deserrats under section 83(ii) elections as of the close of the calendar year flower.

Box 13, If the "flationarity plan" box is chacked, spocal limits may apply to the amount of tractitional IRA contributed plants of the calendar plan

Notice to Employee

NOTICE to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file at tax return. Even if you don't have to file at tax return, pyen may be eligible for a redund if low 2 shows an amount or fryou are neighble for any low present in the result of the reduction of the credit and the reduction of the credit and present of the section of the credit and present of the section of the credit are desired in some and family size. Workers without children could qualify for a smaller of the credit are added in a credital memory. The amount of the credit is best of the credit are added in the section of the credit are added in a credital memory and security for a smaller of the credit is a credit and any qualifying children must have valid social security must person security of the credit section of the credit section in the section of the credit

Clergy and religious workers. If you aren't subject to social security and Medicare taxes see Pub 517

Ciergy and religious workers. If you reach subject to social socurity and Medicare taxes, see Pub. 517.

Corrections. If your name. SSN. or adclass is incorrect, correct Copies B. C., and 2 and set your employer to correct your employers made on the six the employer to file Form W-2c. Corrected Wage and Tax Statement, with the SSA to correct any name, SSN. or morely amount error reported to the SSA on Form W-2. Be sure to get your copies of or morely amount error reported to the SSA on Form W-2. Be sure to get your copies of control of the source of the source of the sons as shown on your social social years of the source of the sons as shown on your social social years of you should ask for a new east the angles sons as shown on your social social years of you should ask for a new east the angles of the SSA women for the social years of your social social years of 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 than \$9,902.4 do in social security and/or Tier 1 relitional enterment (FiFTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1940 instructions if you had more than one railcoad employer and more than 8x3. See the instructions for Form 8x3.