				I		Federal Box 1	Soc. Sec. E	Box 3 & 7	Medicare Box	5	
·			Constant		112077.02						
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				Gross Wages Txbl Benefits		113077.02	1130	77.02	113077.0	J2	
wages to arrive at your W-2 wages.				Group Term Life Adoption		46.04	•	46.04	46.0	04	
of the	letter codes used in b	se forms, including an explandox 12, are available on a	Deferred Comp	(8381.54)							
separa	ate document.		Section 125 Other Pretax/Wag	ge Limit	(1763.84)	(176 (11135	53.84) 59.22)	(1763.84 (111359.22			
				W-2 Wages		102977.68					
				<u> </u>							
	s social security number 1-5032	b Employer identification number (EIN 47-4470095	1)	d Control number 000009203601	. 7				ON	MB No. 1545-000	
c Employer	s name, address, and ZIP co	de			1 Wages, tips	, other compensation		ederal incom	ne tax withheld	14915.62	
nThriv 7950 l Suite 9	_egacy Drive			3 Social security wages			4 Social security tax withheld				
Plano TX 75024					5 Medicare wages and tips			6 Medicare tax withheld			
	's first name and initial na Reddy	Last name Suf Konda Kindi		ff.	7 Social security tips		8 A	8 Allocated tips			
	N FM 620 Road				9		10	10 Dependent care benefits			
Austin TX 78726 USA											
f Employee's address and ZIP code					11 Nonqualified plans			12a See instructions for box 12 Code C		46.04	
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State i	ncome tax	13 Statuto	ory Retirement Third- yee plan sick P		b de D		8381.54	
) X [120	С			
18 Local wa	ges, tips, etc.	19 Local income tax	20 Locali	ty name	14 Other		120			9201.66	
					1		Coc	de DD		9201.66	
	Wage and Tax Statemen EMPLOYEE'S RECORDS	t		2023		This information is being for a specific penalty or other s	urnished to the Int	ternal Revenue	Service. If you are rec	al Revenue Serv quired to file a tax retu ble and you fail to repo	
	s's social security number 1-5032	b Employer identification number (EIN 47-4470095	1)	d Control number 000009203601					01	/IB No. 1545-000	
	s name, address, and ZIP co				1 Wages, tips	, other compensation		ederal incom	ne tax withheld		
nThriv 7950 l	e Legacy Drive				3 Social secu	10297 rity wages		ocial securit	y tax withheld	14915.62	
Suite 9					5 Medicare w	ages and tips	6 N	Medicare tax v	withheld		
e Employee's first name and initial Last name Suff Poojitha Reddy Konda Kindi 9501 N FM 620 Road Apt 12104				ff.	7 Social security tips			8 Allocated tips			
					9			10 Dependent care benefits			
Austin TX 78726 USA					44.11						
f Employee	s address and ZIP code				11 Nonqualifi	ed plans		a Seeinstru de C	ctions for box 12	46.04	
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State i	ncome tax	13 Statuto employ	ory Retirement Third- yee plan sick P		b de D	1	8381.54	
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18 Local wa	ges, tips, etc.	19 Local income tax	20 Locali	ty name	14 Other		120			9201.66	
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	<i>W</i> age and Tax Statemen Be Filed With Employee's FE			2023			Departm	ent of the T	reasury - Intern	al Revenue Serv	
	's social security number 1-5032	b Employer identification number (EIN 47-4470095	1)	d Control number 000009203601	í				OM	MB No. 1545-000	
c Employer'	s name, address, and ZIP co	de			1 Wages, tips	other compensation		ederal incom	ne tax withheld	14915.62	
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Suite 900 Plano TX 75024					5 Medicare wages and tips 6 Medicare tax withheld						
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Poojitha Reddy Konda Kindi 9501 N FM 620 Road											
Apt 12 Austin USA	TX 78726				9		10	Dependent c	are benefits		
	's address and ZIP code			11 Nonqualified plans			a Seeinstru de C	ctions for box 12	46.04		
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18 Local wa	ges, tips, etc.	19 Local income tax	20 Locali	ty name	14 Other		120			9201.66	

Department of the Treasury - Internal Revenue Service