2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Dept. Employer · use only 0000038370 VLW WUX0 C S 9926 c Employer's name, address, and ZIP code **CHARLES SCHWAB & CO INC** 3000 SCHWAB WAY WESTLAKE, TX 76262

e/f Employee's name, address, and ZIP code SRINATH BOMMA 2341 PACK IRON PASS LEANDER, TX 78641

b Employer's FED ID number 94-1737782	r a Employee's SSA number XXX-XX-5750
1 Wages, tips, other comp.	2 Federal income tax withheld
130511.16	10733.46
3 Social security wages	4 Social security tax withheld
130511.16	8091.69
5 Medicare wages and tips 130511.16	6 Medicare tax withheld 1892.41
7 Social security tips	8 Allocated tips
Q	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 91.20
14 Other	12b W 1000.00
	12c AA 10643.28
	12d DD 24691.20
	13 Stat emp. Ret, plan 3rd party sick pa
15 State Employer's state ID r	o. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.

This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that you may also find helpful. The following reflects your final pay stub, plus any adjustments made by your employer GROSS PAY 137,207.16

8,091.69 SOCIAL SECURITY TAX WITHHELD BOX 04 OF W-2 MEDICARE TAX FED. INCOME 10,733.46 1,892.41 WITHHELD TAX WITHHELD BOX 06 OF W-2 BOX 02 OF W-2 STATE INCOME TAX 0.00 SUI/SDI 0.00 BOX 14 OF W-2 BOX 17 OF W-2 LOCAL INCOME TAX 0.00

> To change your employee W-4 profile information file a new W-4 with your payroll department

> > Social Security Number: XXX-XX-5750

SRINATH BOMMA 2341 PACK IRON PASS LEANDER, TX 78641

BOX 19 OF W-2



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▼

PAGE 1 OF 1

Wages, tips, other comp. 130511.16		2 Federa	l income tax withheld 10733.46	
3 Social security wages - 130511.16		4 Social security tax withheld 8091.69		
Medicare wages and tips 130511.16		6 Medica	re tax withheld 1892.41	
d Control number 0000038370 VLW	Dept.	Corp.	Employer use only C S 9926	

c Employer's name, address, and ZIP code **CHARLES SCHWAB & CO INC** 3000 SCHWAB WAY WESTLAKE, TX 76262

b Employer's FED ID numb 94-1737782	per a Employee's SSA number XXX-XX-5750
7 Social security tips	8 Allocated tips
c	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 91.20
14 Other	^{12b} W 1000.00
	12c AA 10643.28
	12d DD 24691.20
January 1975 Bu	13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code

SRINATH BOMMA 2341 PACK IRON PASS LEANDER, TX 78641

15	State	Employer's state ID no.	16	State wages, tips, etc.
17	State	I income tax	18	Local wages, tips, etc.
19	Local	income tax	20	Locality name

Federal Filing Copy

Wage and Tax Statement

Copy B to be filed with employee's Federal Income Tax Return.

omp. .16	2 Federal income tax withheld 10733.46			
.16	4 Social security tax withheld 8091.69			
Medicare wages and tips 130511.16		re tax withheld 1892.41		
Dept.	Corp.	Employer use only		
	.16 es .16 tips .16	.16 s		

CHARLES SCHWAB & CO INC 3000 SCHWAB WAY WESTLAKE, TX 76262

b	Employer's FED ID number 94-1737782	a Employ	yee's SSA number XXX-XX-5750
7 5	ocial security tips	8 Allocat	ted tips
9		10 Deper	ndent care benefits
11	Nonqualified plans	12a C	91.20
14	Other	12bW	1000.00
		12c AA	10643.28
		12dDD	24691.20
		13 Stat emp	Ret. plan 3rd party sick pay

SRINATH BOMMA

2341 PACK IRON PASS LEANDER, TX 78641

15 State	Employer's state ID n	0. 16	State wages, tips, etc.
17 State	income tax	18	Local wages, tips, etc.
19 Loca	I income tax	20	Locality name

State Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other c		2 Federa	I income tax withheld 10733.46
3	Social security wage		4 Social	security tax withheld 8091.69
5	Medicare wages and 130511	tips .16	6 Medica	re tax withheld 1892.41
d	Control number	Dept.	Corp.	Employer use only
	0000038370 VLW		WUX0	C S 9926
С	Employer's name, a	address,	and ZIP co	ode

CHARLES SCHWAB & CO INC 3000 SCHWAB WAY WESTLAKE, TX 76262

b	Employer's FED ID number 94-1737782	a Emplo	yee's SS XXX-X	X-5750
7	Social security tips	8 Alloca		
9		10 Depe	ndent ca	re benefits
11	Nonqualified plans	12a C		91.20
14	Other	12bW	0.00	1000.00
		12c AA	Mark I	10643.28
		12d DD		24691.20
		13 Stat em	Ret. plan	3rd party sick p

e/f Employee's name, address and ZIP code

SRINATH BOMMA 2341 PACK IRON PASS LEANDER, TX 78641

15 State	Employer's state ID no.	16	State wages, tips, etc.
17 State	income tax	18	Local wages, tips, etc.
19 Local	income tax	20	Locality name

City or Local Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax