Department of the Treasu	ry - Internal R	evenue Service								
d Control number 1 Wages, tips, other compensation 00231399 18281.16		2 Fe	ederal Income tax withheld 2146.73	d Control number 1 Wages, tips, other compensatio 00231399 18281.1		ips, other compensation 18281.16				
OMB. NO.1545-0008	3 Social se	ecurity wages	4 Sc	pcial security tax withheld	OMB.No.1545-0008	3 Social se		4 Socia	4 Social security tax withheld	
	5 Medicar	e wages and tips	6 Me	edicare tax withheld	This information is being furnished to the Internal Revenue Service	5 Medicare	e wages and tips	6 Medi	care tax withheld	
c Employer's name, address, and ZIP code					c Employer's name, address, and ZIP code					
4	mpany and Dr. 53044		Kohler Company 444 Highland Dr. Kohler WI 53044							
7 Social security tips	8 Allocated tips	9		7 Social security tips		8 Allocated tips	Allocated tips 9			
10 Dependent care benefits		11 Nongualified plans		2a See instructions for box 12	10 Dependent care	D Dependent care benefits 11 Nonqual		12a	See instructions for box 12	
12b		12c	ē	DD 1050.05	12b	12c		DD 1050.05		
		C	Code			Садае		Co d e		
b Employer identification		r (EIN) a Employed 402810	e's soc	cial security number 478-87-7587	b Employer identific		er (EIN) a Employee 402810	e's socia	l security number 478-87-7587	
13 Statutory Retireme employee plan	Party 14 Other		13 Statutory Retirement Third-Party employee plan sick pay							
	- 7									
e Employee's name, a	d ZIP code	This information is being furnished to the Internal	e Employee's name, address, and ZIP code							
CHETAN A KA 1793 LEE WAY		Revenue Service. If you are required to file a tax return, a negligence	CHETAN A KARAN 1793 LEE WAY							
MILPITAS CA S		penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.								
2023	15 State MS	Employer's state ID No. 39-0402810-		16 State wages, tips, etc. 18281.16	2023	15 State MS	Employer's state ID N 39-040281		State wages, tips, etc. 18281.16	
EW-2 Wage and Tax Statement		17 State income tax 749.00		18 Local wages, tips, etc	W-2 Statement		17 State income tax 749.0	9.00 18 Local wages, tips, etc		
EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B).		19 Local income tax		20 Locality name	Copy B-To be Filed With Employee's FEDERAL Tax Return		19 Local income tax 20 Locality name		0 Locality name	
							Departmen	t of the Tr	easuryInternal Revenue Service	
d Control number 1 Wages, tips, other compensation 2 Fe 00231399 18281.16			deral Income tax withheld 2146.73	d Control number 1 Wages, tips, other compensation 2 Federal Income tax withheld 00231399 18281.16 2146.				leral Income tax withheld 2146.73		
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c Employer's name,			c Employer's nam							
Kohler Company 444 Highland Dr. Kohler WI 53044					Kohler Company 444 Highland Dr. Kohler WI 53044					
7 Social security tips		8 Allocated tips 9			7 Social security tips		8 Allocated tips	9	9	
10 Dependent care benefits		11 Nonqualified plans		2a	10 Dependent care benefits		11 Nonqualified plans		la	
12b		12c	e	DD 1050.05 2d	12b		12c	12	DD 1050.05	
C C C C C C C C C C C C C C C C C C C			Code	ist south a second so	b Employer identific	ation numb		Code	-l	
b Employer identification number (EIN) 39-0402810 a Employee's social security number 478-87-7587					b Employer identific			e's soci	al security number 478-87-7587	
13 Statutory Retirement Third-Party employee plan sick pay					13 Statutory Retirement Third-Party employee plan sick pay					
1	1					I				
e Employee's name, a	address. an	d ZIP code			e Employee's name	e. address. a	and ZIP code			
CHETAN A KARAN					CHETAN A KARAN					
1793 LEE WAY					1793 LEE WAY					
MILPITAS CA S			MILPITAS C	A 95035						
~ ~ ~ ~	15 State MS	Employer's state ID N 39-0402810		16 State wages, tips, etc. 18281.16	2023	15 State MS		Employer's state ID No. 39-0402810-1 18281		
E WI_2 Wage and Tax		17 State income tax		18 Local wages, tips, etc	1		17 State income tax		8 Local wages, tips, etc	
© ♥♥■▲ Statement Copy 2-To Be Filed With		749.00			EW-2 Wage and Ta			749.00		
Employee's State, City, or Local Income Tax Return.		19 Local income tax		20 Locality name	Copy 2-To Be Filed With Employee's State, City, o Local Income Tax Return			2	20 Locality name	
		Department of the Treasury-		easuryInternal Revenue Service			Department of the TreasuryInternal Revenue S		reasuryInternal Revenue Service	

Kohler Company 444 Highland Dr.

Kohler WI 53044