2023 W-2 and EARNINGS SUMMARY

		Employee	e Re	fere	ence		Сору		
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d		ol number	Dept.		Corp.		mployer		
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С		oyer's name,							
	AGE 3543	T LOCKE NT FOR:F SIMPSON IP HILL,	OOT L	OC Y	KER RD	СО	RP		
	e/f Employee's name, address, and ZIP code SAI GOWTHAM CHERUKURI 67 GLEN OAKS COURT OLD BRIDGE, NJ 08857								
b		yer's FED ID 13-198840	04	а	Empl		SSA i		
1	Wage	s, tips, other o 1042	comp. 87.83	2	Feder	al inc	ome ta: 1 5 3	x withl 392.8	
3	Socia	l security wag 1067	jes 08.00	4	Socia	l secu	rity tax	withh 15.9	
5	Medic	are wages an 1067	d tips 08.00	6	Medic	are ta	x withl	held 547.2	7
7	Social	security tips		8	Alloca	ated ti	ps		
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14	Other	21.00 FLI 148.76 UI/F	IC/WD	12 12					
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15	State	Employer's	state ID no	16	State	wage	s, tips,	etc.	
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17	State	income tax 51	92.61	18	Local	wage	s, tips,	etc.	
19	Local	income tax		20	Local	ity na	me		
				-					
1	Wage	s, tips, other o	comp. 87.83	2	Feder	al inc	ome ta	x withl 392.8	

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

y adjustments made b	y your employer.		
GROSS PAY	104,287.83	SOCIAL SECURITY	6,615.90
		TAX WITHHELD	
		BOX 04 OF W-2	
FED. INCOME	15,392.80	MEDICARE TAX	1,547.27
TAX WITHHELD		WITHHELD	
BOX 02 OF W-2		BOX 06 OF W-2	
STATE INCOME TAX	5,192.61	SUI/SDI	148.76
BOX 17 OF W-2		BOX 14 OF W-2	
LOCAL INCOME TAX BOX 19 OF W-2	0.00		

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

SAI GOWTHAM CHERUKURI 67 GLEN OAKS COURT

Social Security Number: XXX-XX-5729

OLD BRIDGE, NJ 08857

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PAGE 01 OF 02

1 Wages, tips, other comp. 104287.83	2 Federal income tax withheld 15392.80	1 Wages, tips, other comp. 104287.83	2 Federal income tax withheld 15392.80			
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld			
106708.00	6615.90	106708.00	6615.90			
5 Medicare wages and tips 106708.00	6 Medicare tax withheld 1547.27	5 Medicare wages and tips 106708.00	6 Medicare tax withheld 1547.27			
d Control number Dept. 0000004023 UCA ITCR10	Corp. Employer use only	d Control number Dept. 0000004023 UCA ITCR10	Corp. Employer use only			
0000004023 OCA ITCR10	CXCW A 53886		CXCW A 53886			
c Employer's name, address,		c Employer's name, address, and ZIP code				
FOOT LOCKER RET, AGENT FOR:FOOT L 3543 SIMPSON FERF CAMP HILL, PA 17	OCKER CORP	FOOT LOCKER RETA AGENT FOR:FOOT LO 3543 SIMPSON FERR CAMP HILL, PA 170	OCKER CORP Y RD			
b Employer's FED ID number 13-1988404	a Employee's SSA number XXX-XX-5729	b Employer's FED ID number 13-1988404	a Employee's SSA number XXX-XX-5729			
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits	9	10 Dependent care benefits			
11 Nonqualified plans	11 Nonqualified plans 12a See instructions for box 12 D 2420.17		12a D 2420.17			
14 Other 21.00 FLI	12b	14 Other 21.00 FLI	12b			
148.76 UI/HC/WD	12c	148.76 UI/HC/WD	12c			
	12d		12d			
13 Stat emp. Ret. plan 3rd party sick pay			13 Stat emp. Ret. plan 3rd party sick pa			
e/f Employee's name, address a		e/f Employee's name, address ar				
SAI GOWTHAM CHE 67 GLEN OAKS COU OLD BRIDGE, NJ 0		SAI GOWTHAM CHEF 67 GLEN OAKS COU OLD BRIDGE, NJ 0	RT			
15 State Employer's state ID no. 16 State wages, tips, etc. TOTAL STATE		15 State Employer's state ID no. 222-223-346/000	.16 State wages, tips, etc. 104287.83			
17 State income tax 5192.61		17 State income tax 1867.51	18 Local wages, tips, etc.			
19 Local income tax 20 Locality name		19 Local income tax	20 Locality name			
Federal Filing	Сору	NJ. State Refe	erence Copy			
W-2 Wage a Statemer Copy B to be filed with employee's Fed	OMB No. 1545-0008 I	W-2 Wage a Statem	and Tax 2023			

1 Wages, tips, oth 10	2 Federal income tax withheld 15392.80					
3 Social security	4 Social	4 Social security tax withheld 6615.90				
5 Medicare wage 10	6 Medicare tax withheld 1547.27					
d Control number 0000004023 UCA	Corp.	Employ A	er use only 53886			
c Employer's nar	ne, address, a	nd ZIP cod	e			
CAMP HILL, PA 17011-6406						
b Employer's FEI 13-198		a Employ	/ee's SSA XXX-X	X-5729		
7 Social security	tips	8 Allocat	ed tips			
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			X	3rd party sick pa		
e/f Employee's name, address and ZIP code SAI GOWTHAM CHERUKURI 67 GLEN OAKS COURT OLD BRIDGE, NJ 08857						
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SAI GOWTH 67 GLEN O OLD BRIDG	AM CHER AKS COUR E, NJ 08 r's state ID no	UKURI RT 3857	vages, tip	s, etc. 4287.83		

20 Locality name

Copy

Wage and Tax Statement

19 Local income tax

NJ. State Filing

Copy 2 to be filed with employee's State Income Tax Retu

NY. State Reference Copy Wage and Tax Statement Control number Corp. Employer use only ITCR10 CXCW 0000004023 UCA 53887 c Employer's name, address, and ZIP code FOOT LOCKER RETAIL INC AGENT FOR:FOOT LOCKER CORP 3543 SIMPSON FERRY RD CAMP HILL, PA 17011-6406 e/f Employee's name, address, and ZIP code SAI GOWTHAM CHERUKURI **67 GLEN OAKS COURT** OLD BRIDGE, NJ 08857 Employer's FED ID number 13-1988404 a Employee's SSA number XXX-XX-5729 Wages, tips, other comp Federal income tax withheld 104287.83 15392.80 Social security wages Social security tax withheld 106708.00 6615.90 Medicare wages and tips 6 Medicare tax withheld 106708.00 1547.27 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 D | 2420.17 12b 21.00 FLI 148.76 UI/HC/WD 14 Other 12d 13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. NY 131988404 104287.83 18 Local wages, tips, etc. 3325.10

1 Wages, tips, other comp. 104287.83			2 Federal income tax withheld 15392.80		
3 Social security wages 106708.00			4 Social security tax withheld 6615.90		
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d 00	Control number 00004023 UCA	Dept. ITCR10	CXCW	Employer A	use only 53887

20 Locality name

c Employer's name, address, and ZIP code FOOT LOCKER RETAIL INC

19 Local income tax

FOOT LOCKER RETAIL INC AGENT FOR:FOOT LOCKER CORP 3543 SIMPSON FERRY RD CAMP HILL, PA 17011-6406

b	Employer's FED ID number 13-1988404	a Employee's SSA number XXX-XX-5729		
7	Social security tips	8 Allocated tips		
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		12d		
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e/f Employee's name, address and ZIP code

SAI GOWTHAM CHERUKURI 67 GLEN OAKS COURT OLD BRIDGE, NJ 08857

15	State NY	Employ 1319	yer's state 88404	e ID no. 9	16 State wages, tips, etc. 104287.83		
17	17 State income tax 3325.10				18 Local wages, tips, etc.		
19	Local	income	tax		20 Locality name		
		NY	State	Filing	ı Copy		

NY. State Filing Cop

W-2 Wage and Tax 2023
Statement OMB No. 1545-0
Copy 2 to be filed with employee's State Income Tax Return.

2023 W-2 and EARNINGS SUMMARY

SAI GOWTHAM CHERUKURI 67 GLEN OAKS COURT OLD BRIDGE, NJ 08857 Social Security Number: XXX-XX-5729

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Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959. See the Form 1040 instructions to determine if you are required to complete Form 8959

Box 6. This amount includes the 1.45% Medicare tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages 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 adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$22,500 (\$15,500 if you only have SIMPLE plans; \$25,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$22,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2023, your employer may have allowed an additional deferral of up to \$7,500 (\$3,500 for section 401(k) (11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year 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.

C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E-Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

 $K{=}20\%$ excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of groupterm life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

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

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

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

R—Employer contributions to your Archer MSA. Report on Form 8853.

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

T—Adoption benefits (not included in box 1). Complete Form 8839 to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (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 (cafeteria) plan) to your health savings account. Report on Form 8889.

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA-Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) 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 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A.

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

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

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2023 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2023 or if income is earned for services provided while you were an inmate at a penal institution.

For 2023 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

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

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for 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 \$9,932.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,821.20 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

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Department of the Treasury - Internal Revenue Service

Department of the Treasury - Internal Revenue Service