Copy B-To Be Filed With Federal Tax Return.		41-0852411 OMB No. 1545-0008				
a Employee's soc. sec. no.	1 Wages, tips, other comp. 49272.82		2	Federal income tax withheld		
XXX-XX-1779	3 Social security wages		4030.70 4 Social security tax withheld			
b Employer ID number (EIN)	49272.82		3054.91			
` ,	5 Med	dicare wages and tips	6	Medicare tax withheld		
20-5637217		49272.82		714.46		
c Employer's name, address, and ZIP code						
MAA KRUPA HOSPITALITY, LLC						
426 N MAIN (435)259-4468						
MOAB	UT			84532		
d Control number						
e Employee's name, address, and ZIP code Suff.						
KIRAN R. MALE 524 CLIFFVIEW DRIVE						
MOAB UT				84532		
7 Social security tips	8 Allocated tips		9			
10 Dependent care benefits		11 Nonqualified plans		2a Code		
13 Statutory employee 14 Other			12	2b Code		
Retirement plan	stirement plan			12c Code		
Third-party sick pay			12d Code			
UT 12469016004WT	TH 49272.82			2338.67		
15 State Employer's state ID num		nber 16 State wages, tips, etc.		17 State income tax		
18 Local wages, tips, etc.		19 Local income tax) Locality name		

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasury -- IRS This information is being furnished to the Internal Revenue Service.

Copy C-For EMPLOYEE'S RECORDS (See 41-0852411 Notice to Employee on the back of Copy B. OMB No. 1545-0008 a Employee's soc. sec. no. 1 Wages, tips, other comp. 49272.82 2 Federal income tax withheld 4030.70 XXX-XX-1779 3 Social security wages 4 Social security tax withheld 49272.82 3054.91 b Employer ID number (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 20-5637217 49272.82 714.46 c Employer's name, address, and ZIP code MAA KRUPA HOSPITALITY, LLC 426 N MAIN (435)259-4468 **MOAB** UT 84532 d Control number 10 e Employee's name, address, and ZIP code Suff. KIRAN R 524 CLIFFVIEW DRIVE MOAB 84532 UT 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 11 Nonqualified plans 12a Code 12b Code 13 Statutory employee 14 Other Retirement plan 12c Code Third-party sick pay 12d Code 12469016004WTH 49272.82 2338.67 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 19 Local income tax 20 Locality name 18 Local wages, tips, etc.

City, or Local Incom	41-0852411 OMB No. 1545-0008				
a Employee's soc. sec. n		Vages, tips, other comp. 49272.82	2 Federal income tax withheld 4030.70		
XXX-XX-1779	3 5	Social security wages	4 Social security tax withheld		
b Employer ID number (E		49272.82	3054.91		
b Employer ib number (E		Medicare wages and tips	6 Medicare tax withheld		
20-5637217		49272.82	714.46		
c Employer's name, addr	ess, and Z	IP code			
MAA KRUPA H 426 N MAIN (4:					
MOAB		UT	84532		
d Control number	10				
e Employee's name, address, and ZIP code Suff.					
KIRAN R. 524 CLIFFVIEV	V DRIV	MALE E			
MOAB		UT	84532		
7 Social security tips		Allocated tips	9		
10 Dependent care benefits 11		Nonqualified plans	12a Code		
13 Statutory employee 1	14 Other		12b Code		
Retirement plan			12c Code		
Third-party sick pay			12d Code		
UT 1246901600	4WTH	49272.82	2338.67		
15 State Employer's state ID number 16 State wages, tip			17 State income tax		
18 Local wages, tips, etc.		Local income tax	20 Locality name		

2023

Dept. of the Treasury -- IRS

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return. 41-0852411 OMB No. 1545-0008 a Employee's soc. sec. no. 2 Federal income tax withheld 4030.70 1 Wages, tips, XXX-XX-1779 3 Social security wages 4 Social security tax withheld 49272.82 b Employer ID number (EIN) 3054.91 5 Medicare wages and tips 6 Medicare tax withheld 20-5637217 49272.82 714.46 c Employer's name, address, and ZIP code MAA KRUPA HOSPITALITY, LLC 426 N MAIN (435)259-4468 UT 84532 MOAB d Control number e Employee's name, address, and ZIP code Suff. KIRAN R MALE 524 CLIFFVIEW DRIVE 84532 MOAB UT 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a Code 12b Code 13 Statutory employee 14 Other Retirement plan 12c Code Third-party sick pay 12d Code 12469016004WTH 49272.82 2338.67 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 19 Local income tax 20 Locality name 18 Local wages, tips, etc.

Form W-2 Wage and Tax Statement

Form W-2 Wage and Tax Statement

DAA

2023

Dept. of the Treasury -- IRS

Notice to Employee

Do you have to file? Refer to the Forrm 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 or 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 writtle you were an inmate at a penal institution. For 2023 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596, Earned Income Credit. 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 with \$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, y may also be able to claim a refund on Form 843. See the Instructions for Form 843.

(See also Instructions for Employee on the back of Copy C.)

Instructions for Employee

(See also Notice to Employee on the back of Copy B.)
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

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

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 life Form 4137. Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated by amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of the psy our cereived, eport that amount even if it is more security and Medicare tax owed on tips you didn't report to your expressive and the properties of the properties of

eage 62 by the end of the calendar year, you're imployer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Socurity 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. Er, 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 of Deferrals under code H

Deferrais under code of all filmined to \$22,000. Social Institute 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 allowed an additional deferral of up to \$7,500 (\$3,300 for section 40f(b)(11) and 406(b) SIMPLE plans). This additional deferral amount 40f(b)(11) and 406(b) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code 6, the limit on elective deferrals. For code 6, the limit on elective deferrals for or more 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 persion 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. A-Uncollected social security or RRT1 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).

Delictive deferrate to a section 4016 (cash or deferred arrangement. Also includes deferrate under a SIMPLE reterment account that is part of a section 4016), arrangement ander a section 4030 (salary reduction agreement.

E-Elactive deferrate under a section 4030) (salary reduction SEP G-Elactive deferrate) and employee contributions (policity) contributions (policity) contributions (policity).

E-Elactive deferrates and employee contributions (policity) considerive deferrate) to a section 457(f) deferred comprensation plan.

Helicitive deferrates to a section 507(f) (1618)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J-Nontrascable six pay (information only), not included in box 1, 3, or 5)

K-20% excise tax on excess golden parachule payments. See the Form 1040 instructions.

L-Substantiated employee business expense reinflusrements (nontrasable) M-Uncollected social security or RRTA tax on taxable cost of grouberm tile

Institution and institution of the control of the c

insurance over \$50,000 (former employees only). See the Form 1940 instructions.

N-Uncollected Medicare tax on taxable cost of group-term file insurance over \$50,000 (former employees only). See the Form 1940 instructions.

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

CN-Intracable contrait pay. See the Form 1940 instructions for details on reporting this amount.

P-Evolutable in the See of the See

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

(up to the social security wage base), and 5). See +ub. 525 for reporting requirements. Wi-Employer contributions (including amounts the employee elected to contribute using a section 125 (caleteria) ban) to your health savings account. The contribution of the properties of the section 400A nonqualified deferred compensation plan that fails to satisfy section 400A. This amount is also included in box 1. It is subject to an additional 20% to the plan that the section 4016 (it is plan to the section 400A. This amount is also included in box 1. It is subject to an additional 20% to the plan that the section 4016 (it is plan to the section 400A). The section 400A of the section 400

arrangement
GG-Income from qualified equity grants under section 83(i)
HH-Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13, If the "Retirement plan" box is checked, special limits may apply to the

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. 690-A. Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform puryments, health insurance premiums deducted, nontaxable income, educational assistance pryments or amenter of the dergle's parsonage allowance and utilities. Raimost employers use this box to report railorat retirement (RRTA) compensation. Ther I tax. Ter 2 tax. Medicare tax. Include tips reported by the employee to the employer in raimoad retirement (RRTA) compensation. Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing vour income tax entum. However, to high order to reconstitution of the control of the control

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.