

<p>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 wages to arrive at your W-2 wages.</p> <p>General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.</p>	Gross Wages	15288.00	15288.00	15288.00
	Txbl Benefits			
	Group Term Life			
	Adoption			
	Deferred Comp			
	Section 125			
Other Pretax/Wage Limit		(15288.00)	(15288.00)	
W-2 Wages	15288.00			

a Employee's social security number 135-79-4238		b Employer identification number (EIN) 34-1116600		d Control number 000057781201		OMB No. 1545-0008	
c Employer's name, address, and ZIP code Aclara Technologies LLC 77 West Port Plaza Suite 500 St. Louis MO 63146				1 Wages, tips, other compensation 15288.00		2 Federal income tax withheld 821.24	
				3 Social security wages		4 Social security tax withheld	
				5 Medicare wages and tips		6 Medicare tax withheld	
e Employee's first name and initial Pandul Kumar		Last name Pabbathi		Suff.		7 Social security tips	
1700 E 13TH ST CLEVELAND OH 44114 USA						8 Allocated tips	
f Employee's address and ZIP code				9		10 Dependent care benefits	
				11 Nonqualified plans		12a See instructions for box 12 Code	
15 State OH	Employer's state ID Number 51-291010 0	16 State wages, tips, etc. 15288.00	17 State income tax 286.78	13 Statutory employee plan <input type="checkbox"/>		12b Code	
				Retirement <input checked="" type="checkbox"/>		12c Code	
				Third-party sick Pay <input type="checkbox"/>		12d Code	
18 Local wages, tips, etc. 15288.00		19 Local income tax 305.76		20 Locality name NRes - SolonCityW/H		14 Other	

Form W-2 Wage and Tax Statement
Copy C—For EMPLOYEE'S RECORDS

2023

Department of the Treasury—Internal Revenue Service

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.

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				Retirement <input checked="" type="checkbox"/>		12c Code	
				Third-party sick Pay <input type="checkbox"/>		12d Code	
18 Local wages, tips, etc. 15288.00		19 Local income tax 305.76		20 Locality name NRes - SolonCityW/H		14 Other	

Form W-2 Wage and Tax Statement
Copy B—To Be Filed With Employee's FEDERAL Tax Return.

2023

Department of the Treasury - Internal Revenue Service

a Employee's social security number 135-79-4238		b Employer identification number (EIN) 34-1116600		d Control number 000057781201		OMB No. 1545-0008	
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				Retirement <input checked="" type="checkbox"/>		12c Code	
				Third-party sick Pay <input type="checkbox"/>		12d Code	
18 Local wages, tips, etc. 15288.00		19 Local income tax 305.76		20 Locality name NRes - SolonCityW/H		14 Other	

Form W-2 Wage and Tax Statement
Copy 2—To Be Filed With Employee's State, City, or local Income Tax Return

2023

Department of the Treasury - Internal Revenue Service

