2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement OMB No. 1545-0008 Copy C for employee's records. Control number Dept. Employer use only 0000008635 TLC FIELD M40 ACS 12357 c Employer's name, address, and ZIP code REGENERON PHARMACEUTICALS INC 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591 RETURN POSTAGE GUARANTEED

e/f Employee's name, address, and ZIP code MAHESH R VADYALA 712 TOULOUSE CT CARY, NC 27519

b	Emplo	yer's FED ID number 13-3444607	a	Em	plo		ee's SSA number XXX-XX-8213
1	Wages	tips, other comp.	2 Federal income tax withheld				
	172643.67		20374.33				
3	Social security wages		4 Social security tax withheld				
	160200.00		9932.40				
5	Medicare wages and tips		6	Me	dic	ar	e tax withheld
	193963.33		2812.47				
7	7 Social security tips		8 Allocated tips				ed tips
9			10	D	ере	n	dent care benefits
11	11 Nonqualified plans		12a	Se	e i	ns	tructions for box 12 321.62
14	Other		12b	Ď			21319.66
	1	22.35 FLI 58.29 UI/HC/WD	12c	W			1915.00
	75	94.11 RSA	12d				27769.56
			135	tat	emį	p.	Ret, plan 3rd party sick pay
15	State	Employer's state ID no TOTAL STATE	. 16	S	tate	v	vages, tips, etc.
17	' State	7717.14	18	L	oca	ıl v	wages, tips, etc.
19	Local	income tax	20	L	oca	lit	y name

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 198,702.09 SOCIAL SECURITY 9,932.40 TAX WITHHELD BOX 04 OF W-2 MEDICARE TAX FED. INCOME 20,374.33 2,812.47 TAX WITHHELD WITHHELD BOX 02 OF W-2 BOX 06 OF W-2 STATE INCOME TAX SUI/SDI 7.717.14 158.29 BOX 17 OF W-2 LOCAL INCOME TAX BOX 19 OF W-2 BOX 14 OF W-2 0.00

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

Social Security Number: XXX-XX-8213 MAHESH R VADYALA 712 TOULOUSE CT

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CARY, NC 27519

PAGE 1 OF 2

1 Wages, tips, other of 172643		2 Federa	al income tax withheld 20374.33
Social security wages 160200.00		4 Social	security tax withheld 9932.40
Medicare wages and tips 193963.33		6 Medica	are tax withheld 2812.47
d Control number	Dept.	Corp.	Employer use only
0000008635 TLC FIELD		M40	A C S 12357
c Employer's name,	address,	and ZIP co	ode

REGENERON PHARMACEUTICALS INC 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591

RETURN POSTAGE GUARANTEED

Employer's FED ID number 13-3444607		a Employee's SSA number XXX-XX-8213			
7 Social security tips		8 Allocated tips			
9 11 11 11 11 11 11 11		10 Depe	ndent ca	re benefits	
11 Nonqualified pla	36343400000	C	nstructio	ns for box 12 321.62	
14 Other 22.35 FLI		12b D		21319.66	
158.29 UI/H		12c W	di estantico	1915.00	
7594.11 RS/	4	12d DD		27769.56	
		13 Stat emp	Ret plan	3rd party sick pay	

712 TOULOUSE CT CARY, NC 27519

15	State	Employer's state ID no. TOTAL STATE	16	State wages, tips, etc.
	********	7717.14	18	Local wages, tips, etc.
19	Local	income tax	20	Locality name

Federal Filing Copy Wage and Tax Statement

OMB No. 1545-Copy B to be filed with employee's Federal Income Tax Return

1 Wages, tips, other comp. 172643.67		2 Federa	al income tax withheld 20374.33
3 Social security wages 160200.00		4 Social	security tax withheld 9932.40
Medicare wages and tips 193963.33		6 Medica	are tax withheld 2812.47
d Control number	Dept.	Corp.	Employer use only
0000008635 TLC	FIELD	M40	A C S 12357
c Employer's name	addroce	and 7ID c	ode

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REGENERON PHARMACEUTICALS INC 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591 RETURN POSTAGE GUARANTEED

b Employer's FED ID number 13-3444607	a Employee's SSA number XXX-XX-8213			
7 Social security tips	B Allocate	d tips		
	10 Depen	dent care benefits		
11 Nonqualified plans	12a C	321.62		
14 Other 22,35 FLI	^{12b} D	21319.66		
158.29 UI/HC/WD	12cW	1915.00		
7594.11 RSA	12dDD	27769.56		
	13 Stat emp.	Ret. plan 3rd party sick pay		

MAHESH R VADYALA 712 TOULOUSE CT CARY, NC 27519

	Employer's state ID no. 133-444-607/000	16	State wages, tips, etc. 34431.61
	Income tax 2022.60	18	Local wages, tips, etc.
19 Local	income tax	20	Locality name

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

d	Control number	Dept.	Corp.	Employer use only A C S 12357
5	Medicare wages and 193963		6 Medica	ere tax withheld 2812.47
	Social security wag 160200	0.00	4 Social	security tax withheld 9932.40
hier i	Wages, tips, other of 172643	3.67	2 Federa	l income tax withheld 20374.33

c Employer's name, address, and ZIP code REGENERON PHARMACEUTICALS INC 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591 RETURN POSTAGE GUARANTEED

	b Employer's FED ID number 13-3444607	a Employ	ee's SSA number XXX-XX-8213
	7 Social security tips	8 Allocate	ed tips
171111	9	10 Depen	dent care benefits
1	11 Nonqualified plans	12a	
		C	321.62
	14 Other 22,35 FLI	^{12b} D	21319.66
	158.29 UI/HC/WD	12c W	1915.00
	7594.11 RSA	12d DD	27769.56
		13 Stat emp.	Ret, plan 3rd party sick pay
1	e/f Employee's name, address	and ZIP co	ode

MAHESH R VADYALA 712 TOULOUSE CT CARY, NC 27519

15 	State NJ	Employer's state ID no. 133-444-607/000 Income tax	16	State wages, tips, etc. 34431.61
17	State	Income tax 2022.60	18	Local wages, tips, etc.
19	Local	income tax	20	Locality name

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

NC. State Reference Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return. Control number | Dept. | Corp. | Employer use only Employer use only 0000008635 TLC FIELD M40 ACS 12358

c Employer's name, address, and ZIP code REGENERON PHARMACEUTICALS INC 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591

RETURN POSTAGE GUARANTEED

e/f Employee's name, address, and ZIP code MAHESH R VADYALA 712 TOULOUSE CT CARY, NC 27519

b Employer's FED ID number 13-3444607	a Employe's SSA number XXX-XX-8213		
1 Wages, tips, other comp.	2 Federal income tax withheld		
172643.67	20374.33		
3 Social security wages	4 Social securily tax withheld		
160200.00	9932.40		
5 Medicare wages and tips	6 Medicar ta withheld		
193963.33	2812.47		
7 Social security tips	8 Allocated ups		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12 C 321,62		
14 Other 22,35 FLI	12b D 21319.66		
158.29 UI/HC/WD	12c W 1915.00		
7594.11 RSA	12d DD I 27769.56		
	13 Stat emp. Ret. plan 3rd party sick pay		
15 State Employer's state ID no	. 16 State wages, tips, etc.		
NC 600814456	172643.67		
17 State income tax 5694.54	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

1 Wages, tips, other comp. 172643.67			2 Federa	al income tax withheld 20374.33
	clai security wag 16020	0.00	4 Social security tax withheld 9932.40	
5 Me	5 Medicare wages and tips 193963.33		6 Medicare tax withheld 2812.47	are tax withheld
	Control number Dept. 0000008635 TLC FIELD		Corp.	Employer use only A C S 12358

REGENERON PHARMACEUTICALS INC 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591

RETURN POSTAGE GUARANTEED

b Employer's FED ID numbe 13-3444607	r a Emplo	a Employee's SSA number XXX-XX-8213		
7 Social security tips		8 Allocated tips		
9	10 Depe	ndent care benefits		
11 Nonqualified plans	12a See ii	12a See instructions for box 12		
	C	321.62		
Other 22.35 FLI	^{12b} D	21319.66		
158.29 UI/HC/WD 7594.11 RSA	12c W	1915.00		
7594.11 R5A	12d DD	27769.56		
	13 Stat emp	Ret. plan 3rd party sick pay		

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

712 TOULOUSE CT **CARY, NC 27519**

16 State wages, tips, etc. 172643.67
18 Local wages, tips, etc.
20 Locality name

NC. State Filing Copy

Wage and Tax Statement

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

2023 W-2 and EARNINGS SUMMARY

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7	adjustments made h	y your employer.		scas, pras
	GROSS PAY	198,702.09	SOCIAL SECURITY TAX WITHHELD	9,932.40
	FED. INCOME		BOX 04 OF W-2	
	TAX WITHHELD	20,374.33	MEDICARE TAX	2,812.47
	BOX 02 OF W-2		WITHHELD	
	DOR 02 OF W-Z		BOX 06 OF W-2	
	STATE INCOME TAX	7,717.14	SUI/SDI	158.29
	BOX 17 OF W-2		BOX 14 OF W-2	130.29
	LOCAL INCOME TAX	0.00	DON 14 OF W 2	
	BOX 19 OF W-2			

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

Social Security Number: XXX-XX-8213

MAHESH R VADYALA 712 TOULOUSE CT **CARY, NC 27519**

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