Federal Box 1 Soc. Sec. Box 3 & 7 Medicare Box 5

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. General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.			Gross Wages Txbl Benefits Group Term Life Adoption Deferred Comp Section 125 Other Pretax/Wag W-2 Wages	7935.0 ge Limit 7935.0	(6137.00) (6	7935.00 (137.00) 1798.00	
a Employee's social security number	b Employer identification number (EIM	I)	d Control number					
208-65-9041 Employer's name, address, and ZIP co	41-1980846		000132196501	1 Wages, tips, other compens	eation	2 Federal income tax with	OMB No. 1	545-0008
DiaSorin Inc	ue			r wages, tips, other compens	7935.00	2 i ederar income tax with		584.25
1951 Northwestern Ave Stillwater MN 55082			3 Social security wages	1798.00	4 Social security tax with		111.48	
			5 Medicare wages and tips	1750.00	6 Medicare tax withheld		111.40	
Employee's first name and initial	Last name	Sut	ff.	7 Social security tips	1798.00	8 Allocated tips		26.07
Manvi R Karuka 916 Eagle Heights Drive				7 Social security tips		o Allocated tips		
Madison WI 53705 USA				9		10 Dependent care benef	its	
				11 Nonqualified plans		12a See instructions for	box 12	
Employee's address and ZIP code				2111 211		Code 12b		
5 State Employer's state D Number	16 State wages, tips, etc. 17 State 7935.00		ncome tax		Third-party sick Pay	Code		
	40.1			L X		12c Code	ı	
18 Local wages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other		12d Code	ī	
orm W-2 Wage and Tax Statement opy C—For EMPLOYEE'S RECORDS			2023		being furnished to t	rtment of the Treasury - the Internal Revenue Service. If y y be imposed on you if this incor	ou are required to fil	le a tax returr
a Employee's social security number 208-65-9041	b Employer identification number (EIN 41-1980846	1)	d Control number 000132196501				OMB No. 1	1545-0008
Employer's name, address, and ZIP co	de			1 Wages, tips, other compens	sation 7935.00	2 Federal income tax with		584.25
DiaSorin Inc 1951 Northwestern Ave		3 Social security wages	7933.00	4 Social security tax with		304.23		
Stillwater MN 55082					1798.00			111.48
				5 Medicare wages and tips	1798.00	6 Medicare tax withheld		26.07
Employee's first name and initial Manvi R	Last name Karuka	Sut	ff.	7 Social security tips		8 Allocated tips		
916 Eagle Heights Drive Madison WI 53705 USA		9		10 Dependent care benef	its			
				11 Nonqualified plans		12a See instructions for	box 12	
Employee's address and ZIP code	de State warmen dinn ato	47 C4=4= i		13 Statutory Retirement	Third-party	Code 12b		
5 State Employer's state D Number	7935.00	17 State II	ncome tax	employee plan	sick Pay	Code 12c		
18 Local wages, tips, etc.	19 Local income tax	20 Localit	ar namo			Code		
io Local wages, tips, etc.	19 Local Ilicolle tax	20 Localit	y name	14 Other		12d Code	1	
orm W-2 Wage and Tax Statement opy B—To Be Filed With Employee's FE	DERAL Tax Return.		2023		Depa	artment of the Treasury	- Internal Reve	nue Servi
a Employee's social security number 208-65-9041	b Employer identification number (EIN 41-1980846	1)	d Control number 000132196501	1			OMB No. 1	1545-0008
Employer's name, address, and ZIP cod	de			1 Wages, tips, other compens		2 Federal income tax with	hheld	
DiaSorin Inc				3 Social security wages	7935.00	4 Social security tax with		584.25
1951 Northwestern Ave Stillwater MN 55082					1798.00			111.48
				5 Medicare wages and tips	1798.00	6 Medicare tax withheld		26.07
Employee's first name and initial Last name Suf Manvi R Karuka 916 Eagle Heights Drive Madison WI 53705 USA			ff.	7 Social security tips	1730.00	8 Allocated tips		20.07
				9		10 Dependent care benef	its	
Employed address and The Co.				11 Nonqualified plans		12a See instructions for	box 12	
Employee's address and ZIP code 15 State Employer's state ID Number	16 State wages, tips, etc.	17 State in	ncome tax	13 Statutory Retirement	Third-party	Code 12b		
VI 036000000254403	7935.00	., State II		employee plan	sick Pay	Code 12c		
18 Local wages, tips, etc.	19 Local income tax	20 Localit	v name	14 Other		Code	1	
			,	17 Julion		12d Code		
					B.:	ortmont of the T	Internal D	0.110
orm M-2 Mago and Tay Statement	•				l len:	artment of the Treasury	 mernal Rever 	TILLE SERVI

				redefal box	1 300.3	cc. box 5 a / Piedice	31C 50N 5			
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. General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.				Gross Wages Txbl Benefits Group Term Life Adoption						
				Deferred Comp	Deferred Comp					
				Section 125 Other Pretax/Wage Limit						
				W-2 Wages						
	nployee's social security num		er (EIN)	d Control number						
_	208-65-9041 ployer's name, address, and	41-1980846 ZIP code		000132196502	1 Wages, tips, other compensation		OMB No. 1545-0008			
	DiaSorin Inc				3 Social security wages		4 Social security tax withh			
1951 Northwestern Ave Stillwater MN 55082										
e Fr	plovee's first name and initia	I Last name	Suf	ff.	5 Medicare wages and tips		6 Medicare tax withheld			
e Employee's first name and initial Last name Suff Manvi R Karuka 916 Eagle Heights Drive Madison WI 53705 USA					7 Social security tips 8 Allocated tips					
					9	10 Dependent care		benefits		
f Em	ployee's address and ZIP coo	de			11 Nonqualified plans		12a See instructions for t	box 12		
15 St	tate Employer's state ID N	umber 16 State wages, tips, etc.		ncome tax	13 Statutory Retirement Third-party employee plan sick Pay		12b Code			
MN	5003365	7935	.00	340.71	X		12c Code	<u>'</u>		
18 L	ocal wages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other		12d Code	<u>'</u> I		
E	W 2 Wass and Took	oment				Donos	rtment of the Treasury—	Internal Revenue Con		
	i W-2 Wage and Tax Stati C—For EMPLOYEE'S RECOR			2023	This information is negligence penalty o	being furnished to the	rtment of the Treasury— he Internal Revenue Service. If yo r be imposed on you if this income	u are required to file a tax retur		
a Employee's social security number b Employer identification number (EIN) 208-65-9041 41-1980846			d Control number 000132196502			OMB No. 1545-000				
c Em	ployer's name, address, and	ZIP code			1 Wages, tips, other compen	sation	2 Federal income tax with			
1	DiaSorin Inc 1951 Northwestern Ave Stillwater MN 55082				3 Social security wages		4 Social security tax withheld			
3	Stillwater Min 55082				5 Medicare wages and tips		6 Medicare tax withheld			
e Employee's first name and initial Last name Suff. Manvi R Karuka 916 Eagle Heights Drive Madison WI 53705				ff.	7 Social security tips		8 Allocated tips			
					9		10 Dependent care benefits			
'	JSA				11 Nonqualified plans		12a See instructions for t	box 12		
	ployee's address and ZIP cod		Lance		3 Statutory Retirement	Third-party	Code 12b	l		
15 St MN	tate Employer's state ID No	umber 16 State wages, tips, etc.		ncome tax 340.71	13 employee plan	sick Pay	Code 12c	l		
18 L	ocal wages, tips, etc.	19 Local income tax	20 Localit	ty name	14 Other		Code 12d			
 			1		Code					
	n W-2 Wage and Tax State B—To Be Filed With Employe		,	2023		Depa	artment of the Treasury -	Internal Revenue Servi		
	nployee's social security num 208-65-9041	ber b Employer identification number 41-1980846	er (EIN)	d Control number 000132196502	***			OMB No. 1545-000		
c Em	ployer's name, address, and	ZIP code			1 Wages, tips, other compen	sation	2 Federal income tax with	held		
DiaSorin Inc 1951 Northwestern Ave Stillwater MN 55082					3 Social security wages 4 Social security tax withheld		eld			
L					5 Medicare wages and tips		6 Medicare tax withheld			
e Employee's first name and initial Last name Suff. Manvi R Karuka					7 Social security tips		8 Allocated tips			
1	916 Eagle Heights Drive Madison WI 53705 JSA	1			9		10 Dependent care benefit	s		
f Em	ployee's address and ZIP coo	de			11 Nonqualified plans		12a See instructions for t	box 12		
15 St	tate Employer's state ID N	umber 16 State wages, tips, etc.		ncome tax	13 Statutory Retirement employee plan	Third-party sick Pay	12b Code	I		
MN	5003365	7935	0.00	340.71	X		12c Code	I		
18 L	ocal wages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other		12d Code	<u> </u>		
					1					