150 CLERMONT AVE

APPLICATION FOR RENTAL

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

The undersigned hereby makes application to rent an Apartment at **150 CLERMONT AVE**.

APPLICANT INFORMATION				
LAST NAME Kelley	**FIRST NAME** Emma	**M.I.** Rosz	**SSN** ***-**-****	**DRIVER'S LICENSE #**
BIRTH DATE 1/16/1999	**PHONE #1** (978) 806-6474	**ALTERNATE PHONE**	**EMAIL** emma@emmakelley.com	
CURRENT ADDRESS				
STREET ADDRESS 143 Graystone Terrace			**CITY** San Francisco	
STATE CA	**ZIP** 94114	**DATE IN** 5/17/2025	**DATE OUT** current	**MONTHLY RENT** $2,400.00 / Mo.
LANDLORD NAME Jikun Zhy			**LANDLORD PHONE** (585) 755-8756	
PREVIOUS ADDRESS				
STREET ADDRESS 544 Jersey Street			**CITY** San Francisco	
STATE CA	**ZIP** 94114	**DATE IN** 3/16/2024	**DATE OUT** 5/17/2025	**MONTHLY RENT** $2,450.00 / Mo.
LANDLORD NAME Tim Mullins			**LANDLORD PHONE** (415) 596-9533	

EMPLOYMENT & INCOME INFORMATION			
OCCUPATION Engineer	**EMPLOYER/COMPANY** Apple		**SALARY** $320,000.00/Yr.
SUPERVISOR Cannot Provide At This Time	**SUPERVISOR PHONE**	**START DATE**	**END DATE** current
EMPLOYER ADDRESS One Apple Park Way	**CITY** Cupertino	**STATE** CA	**ZIP** 95014
OCCUPATION Engineer	**EMPLOYER/COMPANY** Radical Ai		**SALARY** $200,000.00/Yr.
SUPERVISOR Dave Veisz	**SUPERVISOR PHONE**	**START DATE**	**END DATE** current
EMPLOYER ADDRESS 63 Flushing Ave	**CITY** Brooklyn	**STATE** NY	**ZIP** 11205

BACKGROUND INFORMATION
Have you ever filed for bankruptcy? NO
Have you ever willfully or intentionally refused to pay rent when due? NO
Have you ever been evicted from a tenancy or left owing money? If yes, please provide Property Name, City, State, and Landlord Name. NO

ADDITIONAL INFORMATION					
AQUARIUM? NO	**WATERBED?** NO	**BOAT?** NO	**MOTORHOME?** NO	**MOTORCYCLE?** NO	**OTHER?** NO

OTHER INFORMATION

HOW DID YOU HEAR ABOUT THIS PROPERTY?	
Streeteasy.com	
UNIT APPLYING FOR:	**PLEASE INCLUDE ANY OTHER INFORMATION YOU BELIEVE WOULD HELP TO EVALUATE THIS APPLICATION**
3L	I will be leaving my current job (Apple, San Francisco) in the next few weeks and starting at Radical Ai based in the Brooklyn Navy Yard on April 20th. I cannot currently provide supervisor contact at Apple due to the nature of my departure. I can and will provide proof of employment and W-2 details from my 5+ year tenure at Apple via email. Thank you!

I hereby warrant that all statements set forth above are true.

I understand that a consumer report and/or an investigative consumer report may be requested in connection with my prospective or continuing housing or guarantor application with **150 CLERMONT AVE** through RP On-Site LLC (On-Site). I understand that these reports may include information concerning my character, employment and income verification, general reputation, personal characteristics, public records information, criminal records information, education, qualifications, motor vehicle record, mode of living, credit and indebtedness information, and any other information which may reflect upon my potential for tenancy or guarantor status gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information.

I understand that **150 CLERMONT AVE** may require income and employment verification in connection with my application. I further understand that income and employment verification require access to my employment, income, and payroll related information. I authorize and consent to the access to, use, and release of such information by On-Site, Trans Union LLC, and other applicable credit bureaus for the purpose of providing the verification services in relation to my application and during the course of any ongoing lease obligation arising from such application.

I understand that if an investigative consumer report is requested about me, I have the right to make a written request to **150 CLERMONT AVE**, within a reasonable period of time, for complete and accurate disclosure of the nature and scope of the investigation requested.

I consent to the delivery of all notices or disclosures required by law via any medium so chosen by **150 CLERMONT AVE** or On-Site, including but not limited to email or other electronic transmission. I understand that all notices shall be deemed received upon being sent.

By submitting this application, I certify that I have read and fully understand the disclosures and my rights detailed above and authorize On-Site to obtain, for the purpose of determining my eligibility for initial or continued tenancy or guarantor status, a consumer report and/or investigative consumer report and to disclose all information obtained by On-Site to **150 CLERMONT AVE**, its affiliates, and assigns now and in the future. I also certify that I have read and fully understand my rights under the FCRA available at https://www.on-site.com/resources/consent/fcraDisclosuresConsent.pdf.

I understand that, upon written request, I will be informed whether or not a consumer report or an investigative consumer report was requested and, if such a report was requested, informed of the name and address of the credit reporting agency that furnished the report. With regard to "investigative consumer reports", I further understand that when I receive the name and address of the consumer reporting agency, I may request a copy of such report by contacting such agency. I acknowledge that I have received and read Article 23-A of the New York Correction Law (https://www.on-site.com/resources/consent/correctionLawArticle23a.pdf)

APPLICATION FOR EMMA ROSZ KELLEY SUBMITTED ONLINE on March 23, 2026

Signed by Emma Rosz Kelley
Mon Mar 23 2026 02:17:02 PM EDT
Key: 2380A311; IP Address: 10.33.14.4

Emma Rosz Kelley *(Applicant)* *Date*

The following charge(s) will appear on your card statement as *"150 CLERMONT AVE"*

Application Fee for Emma Rosz Kelley - Charge Details			
Name on Card	**Account Number**	**Reference Number**	**Authorized**
Raphael Linder Steiner	XXXXXXXXXXXX5387	16528804	$20.00
This card has been authorized for the amount above and will be charged when the application is processed.			

Commission On Human Rights

NYC Fair Chance Housing Notice: Criminal Records

As of January 1, 2025, in NYC, it is illegal for most housing providers to discriminate on the basis of a conviction history in rentals or sales, including co-ops and condos.

The protections of the NYC Fair Chance Housing Law apply to current tenants as well as applicants.

It is a violation of the Law for covered housing providers to:	
Make statements about criminal background checks or criminal records or express limitations on this basis in ads and applications	Treat applicants or tenants differently because of a conviction history except as allowed by the Fair Chance Housing Law.

Covered housing providers **may NEVER** change the terms of a sale or lease because of a conviction history. Covered housing providers **may** revoke a housing offer or decline to renew a lease **ONLY** based on limited kinds of convictions and **ONLY** when they follow the requirements of the Fair Chance Housing Law.

The NYC Fair Chance Housing Law does not require housing providers to run criminal background checks. Any housing provider can accept a renter or buyer without following the steps below. The steps below are only for covered housing providers that choose to run a background check.

If a Covered Housing Provider Chooses to Run a Criminal Background Check: You Have Rights.

Covered housing providers **must first** consider your general housing eligibility (ability to meet lease terms) AND make a conditional offer of housing. **Only after** this conditional offer is it lawful for a covered housing provider to run a criminal background check.

Before conducting a criminal background check, covered housing providers must:

- Make you a conditional offer of housing AND
- Give you a copy of this notice explaining your rights

Housing providers are also responsible for compliance with laws governing the collection and use of personal information, such as Federal and State Fair Credit Reporting Acts.

Conditional Offer of Housing

A conditional offer of housing is a **written lease, rental agreement, or agreement for a sale** that conditionally commits a unit(s) to a renter or buyer and can only be revoked in limited circumstances. Next a covered housing provider chooses either:

NOT to conduct a criminal background check	TO conduct a criminal background check
At this time, the housing provider can either finalize the offer or revoke it for a lawful, non-discriminatory purpose that is unrelated to conviction history.	It is illegal for the housing provider to seek or review your conviction history before you have a conditional offer.

CONTACT 22 Reade Street, New York, NY 10007 212-416-0197 www.nyc.gov/HumanRights

Criminal Background Check

If a covered housing provider chooses to run a criminal background check after making you a conditional offer, they may only consider **very limited** categories of convictions:

- convictions that require registration on a sex offense registry at the time of the background check
- felony convictions from the last 5 years, except those below
- misdemeanor convictions from the last 3 years, except those below

The 3 or 5 years are measured from the **actual date of release OR the sentencing date** (if the sentence does not include jail or prison time), regardless of probation or parole status.

A covered housing provider can **NEVER** consider arrests or pending cases, or:

- convictions that were sealed, expunged, are under an executive pardon or certificate of relief from disabilities, or legally nullified or vacated
- convictions for violations, which are non-criminal offenses such as disorderly conduct
- convictions under federal law or another state's law for conduct related to reproductive or gender affirming care that is lawful in New York State
- convictions under federal law or another state's law for cannabis possession that does not constitute a felony in New York State
- Adjournments in Contemplation of Dismissal (ACDs)
- adjudications as a youthful offender or for juvenile delinquency
- terminations in favor of an individual, including but not limited to, acquittals, reversals upon appeal, and exonerations)
- Dispositions of criminal matters under federal law or another state's law that are comparable to those listed here.

It is illegal for a covered housing provider to consider information in these categories. In addition, tenant screening companies may be held liable under federal fair housing laws for discriminatory decisions by housing providers.

Right to Provide Support for Your Application

After considering only reviewable convictions, a covered housing provider that wants to revoke a housing offer must **FOLLOW THE FAIR CHANCE HOUSING PROCESS** while holding a unit open. They must:

1. Give you a copy of all criminal history information they received and/or reviewed
2. Allow you 5 business days to respond by:
   - pointing out errors in the conviction history
   - identifying any information that should not have been considered (any information outside the lawfully reviewable convictions)
   - sharing information on your background, personal and professional references, and/or any information that supports your application.

You are not required to provide information to support your application at this stage. A housing provider must complete an individualized assessment even if you do not provide supporting information.

Right to an Individualized Assessment of Your Application

A covered housing provider must conduct an individualized assessment of the reviewable convictions, together with any other information that you have timely submitted.

A covered housing provider CANNOT revoke a conditional offer of housing after running a criminal background check except in two **limited circumstances:**	
After conducting an individualized assessment if they show in writing BOTH: • a legitimate business interest AND • how the legitimate business interest is linked to your individual history.	If they show *new information, unrelated to criminal history,* that impacts your qualifications for tenancy and that they did not know at the time of your conditional offer.

Legitimate Business Interest

A covered housing provider's legitimate business interest must be specific and objective. Compliance with a particular lease term is a permissible legitimate business interest. Purely discriminatory motives, stigma, stereotypes, or assumptions never constitute a legitimate business interest.

A covered housing provider that shows a legitimate business interest must also **explain** the link between that interest and your particular individual history in light of the individual information you shared to justify a decision to revoke your conditional offer of housing. **The existence of a conviction alone never creates that link.**

The following are not legitimate business interests and do not establish a sufficient link to justify a housing provider's decision to revoke an offer:

- "I don't want a hot spot for law enforcement"
- "The applicant seems likely to commit another crime and I want tenant safety"
- "This is a family building"
- "We don't want bad guys hanging around"
- "My tenants don't want criminals"
- "My insurance rates will go up"
- "This will impact my property value"

Revoking a Conditional Offer of Housing

Before a covered housing provider can revoke a conditional offer because of your criminal history, the housing provider **MUST** take the following steps:

1. Do an individualized assessment of your reviewable convictions **AND** the information you provided
2. Give you copies of all documents that it received and/or reviewed
3. Give you a written statement that explains:
   - the decision to revoke based on your conviction history **AND** the link to a legitimate business interest
   - how your individual information and circumstances were taken into account

Exemptions for Housing Providers

- Housing provider-occupied properties with 2 or fewer rooms or units are not covered by the NYC Fair Chance Housing Law.
- State or federally funded housing providers, including public housing authorities that are required or authorized to take specific actions related to criminal history **CAN** take such specific actions without violating the NYC Fair Chance Housing Law.

For additional information about tenants' and buyers' rights & housing providers' responsibilities under the NYC Fair Chance Housing Law, and to see this notice in multiple languages, visit NYC.gov/FairChanceHousing.

REMINDER: All New Yorkers have a right to be free from retaliation in housing. It is illegal for housing providers in NYC to punish you or treat you negatively for telling them about your rights or for reporting discrimination or harassment.

CONTACT 22 Reade Street, New York, NY 10007 212-416-0197 www.nyc.gov/HumanRights

California Required Notices

This report does not guarantee the accuracy or truthfulness of the information as to the subject of the investigation, but only that it is accurately copied from public records, and information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of the report.

An investigative consumer reporting agency shall provide a consumer seeking to obtain a copy of a report or making a request to review a file, a written notice in simple, plain English and Spanish setting forth the terms and conditions of his or her right to receive all disclosures, as provided in CA Civil Code Section 1786.26.

This report was prepared using software provided by RP On-Site LLC, which can be contacted at: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Avisos obligatorios en el estado de California

El presente informe no garantiza la exactitud ni la veracidad de la información con respecto al tema de investigación, sino únicamente que es una copia exacta de los registros públicos y es posible que la información generada como consecuencia del robo de identidad, incluidos los registros de antecedentes delictivos, se haya asociado por error con el consumidor objeto del presente informe.

Una agencia de investigación de verificación de crédito proporcionará al consumidor que desee obtener una copia de un informe o que solicite la revisión de un archivo un aviso por escrito en inglés y español, escrito en un lenguaje simple y claro, que establezca los términos y condiciones de su derecho a recibir todas las divulgaciones conforme a la Sección 1786.26 del Código Civil de California.

Este informe se preparo con el software proporcionado pro RP On-Site LLC, que puede contractarse en: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Rental Report for Emma Rosz Kelley

The property's screening criteria result	
APPROVE	This application meets your requirements based on your Property's Screening Criteria. On-Site makes no independent assessment of an applicant's qualifications.

Score for Emma Rosz Kelley: 828

	Importance	Result
AI Score	Pass/Fail	
No Credit	Pass/Conditional	
Total annual income to rent ratio exceeds 30.0	Pass/Fail	
May have been through a bankruptcy	Pass/Fail	
No rental collections	Pass/Fail	

Rental Report for Emma Rosz Kelley, 3/24/2026 for 3I at 150 CLERMONT AVE

Credit Quick Summary	
Total annual income (reported by Applicant)	$520,000.00
Total combined annual income to rent ratio	118.18 (based on rent of $5,500.00)
Total number of accounts	4
Accounts with no late payments	3 (0 unpaid past due)
Accounts paid 30-59 days past due	1 (0 unpaid past due)
Accounts paid 60-89 days past due	0 (0 unpaid past due)
Accounts paid more than 90 days past due	0 (0 unpaid past due)
Total outstanding balance	$4,393.00 ($0.00 past due)
Outstanding revolving debt	$4,393.00 (18% of limit) ($0.00 past due)
Outstanding loan balance	$0.00 ($0.00 past due)
Bankruptcies, foreclosures, and legal items	0
Collection total balance (includes past due)	$0.00
Rental History records found	0

Identity	From Application	From Equifax
Name:	Emma Rosz Kelley	EMMA ROSZ KELLEY
SSN:	***-**-****	***-**-****
Birth Date:	1/**/1999	1/**/1999

Addresses	From Application	From Equifax
	143 Graystone Terrace San Francisco, CA 94114 - US	143 GRAYSTONE TER. SAN FRANCISCO, CA 94114 (Applicant) Reported 3/2026 544 JERSEY ST. 2 SAN FRANCISCO, CA 94114 (Applicant) Reported 6/2025 1167 GUERRERO ST. SAN FRANCISCO, CA 94110 (Applicant) Reported 7/2024 46 BIRCH RD. ANDOVER, MA 01810 (Applicant) Reported 6/2024 1527 FLORIDA ST. SAN FRANCISCO, CA 94110 (Applicant) Reported 7/2023 19700 VALLCO PKWY CUPERTINO, CA 95014 (Applicant) Reported 8/2020

Employment	From Application	From Equifax
Applicant:	Engineer Apple $320,000.00/Yr. Engineer Radical Ai $200,000.00/Yr. Total annual Income: $520,000.00	

Restricted Person Search

Requested For	Requested	Returned
Emma Rosz Kelley	3/24/2026	3/24/2026

Results
No Records Found

Risk Models

From RealPage

Risk Model Name	Score	Score Factors
RealPage AI Score (Applicant)	828	Tradeline scoring Debt-to-income ratio Credit Score Rental Payment History

Description
RealPage AI Score uses machine-learning and data patterns in credit score, debt/liability types, trade lines, rental payment history, and renter behavior to achieve reduced bad debt. The RealPage AI Score range is between 1 and 1000 (the higher the score, the less risky the consumer).

From Equifax

Risk Model Name	Score	Score Factors
Credit Score (Applicant)	779	Lack of sufficient credit history on bankcard or revolving accounts You have either very few loans or too many loans with recent delinquencies Lack of sufficient relevant first mortgage account information The date that you opened your oldest account is too recent

Description
This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).

Credit Accounts

From Equifax

Account Name
JPMCB CARD SERVICES (Applicant)

Opened	Last Active	30-59	60-89	90+	Past Due	Balance
5/2021	2/2026					$4,228.00

Monthly Payment	High Credit	Type	Comments
$42.00	$8,710.00	REVOLVING	Rate/Status 1: Pays account as agreed

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3/26		1/26		11/25		9/25		7/25		5/25		3/25		1/25		11/24		9/24		7/24		5/24	

Account Name
APPLE CARD - GS BANK (Applicant)

Opened	Last Active	30-59	60-89	90+	Past Due	Balance
1/2020	1/2026					$165.00

Monthly Payment	High Credit	Type	Comments
$25.00	$6,453.00	REVOLVING	Rate/Status 1: Pays account as agreed

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2/26		12/25		10/25		8/25		6/25		4/25		2/25		12/24		10/24		8/24		6/24		4/24	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
CITICARDS CBNA (Applicant)	11/2017	12/2020	1	0	0		$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$8,184.00	REVOLVING	ACCOUNT CLOSED DUE TO INACTIVITY Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5/24		3/24		1/24		11/23		9/23		7/23		5/23		3/23		1/23		11/22		9/22		7/22	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ELAN FINANCIAL SERVI (Applicant)	8/2017	11/2020					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$992.00	REVOLVING	ACCOUNT CLOSED DUE TO INACTIVITY Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5/24		3/24		1/24		11/23		9/23		7/23		5/23		3/23		1/23		11/22		9/22		7/22	

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to** www.consumerfinance.gov/learnmore **or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

  CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

  You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

  As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

  A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

A Summary of Your Additional Rights in New York

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer credit reporting agency from releasing information in your credit report without your express authorization. A security freeze must be requested in writing by certified or overnight mail. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent.

To place a security freeze on your credit report, you must contact each of these credit reporting agencies:

Equifax Security Freeze
P.O. Box 105788
Atlanta, GA 30348
(800) 685-1111
https://www.freeze.equifax.com

Experian Security Freeze
P.O. Box 9554
Allen, TX 75013
(888) 397-3742
https://www.experian.com/freeze/center.html

TransUnion LLC
P.O. Box 2000
Chester, PA 19022-2000
(888) 909-8872
www.transunion.com/personal-credit/credit-disputes/credit-freezes.page

However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit mortgage, government services or payments, insurance, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. When you place a security freeze on your credit report, you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or authorize the release of your credit report to a specific party or for a period of time after the freeze is in place. To provide that authorization you must contact the consumer credit reporting agency and provide all of the following:

1. The personal identification number or password;
2. Proper identification to verify your identity;
3. The proper information regarding the party or parties who are to receive the credit report or the period of time for which the report shall be available to users of the credit report; and
4. Payment of any applicable fee.

A consumer reporting agency must authorize the release of your credit report no later than three business days after receiving the above information.

A security freeze does not apply to circumstances in which you have an existing account relationship and a copy of your report is requested by your existing creditor or its agents or affiliates for certain types of account review, collection, fraud control or similar activities.

If you are actively seeking credit, you should understand that the procedures involved in lifting a security freeze may slow your application for credit. You should plan ahead and lift a freeze, either completely if you are shopping around, or specifically for a certain creditor, before applying for new credit.

Additional rights under your state's law, which are also in the federal Fair Credit Reporting Act, are explained in the enclosed Summary of Your Rights under the Fair Credit Reporting Act.

CALIFORNIA
USA

DRIVER LICENSE

4d DLN [redacted] 4b EXP 01/16/2029

3 DOB 01/16/1999

1 KELLEY
2 EMMA ROSZ
8 143 GRAYSTONE TERRACE
SAN FRANCISCO, CA 94114

9 CLASS C
9a END NONE
12 REST NONE

DONOR

4a ISS 12/29/2025
5 DD 01/09/2025503GN/AAFD/29

15 SEX F
16 HGT 5'-09"
17 WGT 135 lb
18 EYES BLU
19 HAIR BLN

03/23/2026

Re: Employment Verification for Emma Kelley

This letter is to verify that Emma Kelley has been employed by Apple Inc. since 07/26/2021. Emma Kelley currently holds the position of System Product Design Eng ICT4 with the following details:

Employment type: Standard

Standard weekly hours: 40

Work location: San Jose, California, United States

Employee works from home location: No

If you have any questions, please contact Apple's People Support at 800-473-7411 / 408-974-7411.

Sincerely,

Sabrina Peltier
People Operations Representative

Apple
12545 Riata Vista Circle
Austin, TX 78727

Telephone 512 674 2000
www.apple.com

February 22, 2026

Emma Kelley
emma@emmakelley.com

Dear Emma:

Radical AI, Inc. (the "Company") is pleased to offer you employment on the terms and conditions described below.

1. **Position**. Your title will be Technical Program Manager, and you will report to the Company's Head of Automation, Dave Veisz. This is a full-time (exempt) position. The Company reserves the right to change your job title, reporting relationship, and duties from time to time.

2. **Cash Compensation**. Your base salary will be $200,000 (payable in accordance with the Company's standard payroll schedule, which is semi-monthly, with installments payable on the 15th and the last day of the month unless those dates fall on a weekend or holiday, in which case the preceding business day). This salary will be subject to adjustment pursuant to the Company's employee compensation policies in effect from time to time. This position is an exempt position, which means you are paid for the job and not by the hour. Accordingly, you will not receive overtime pay. Your salary is intended to compensate you for all hours worked.

Attached to this offer letter as **Exhibit B** is a Wage Notice that provides additional information regarding the Company and your rate(s) of pay, as required by law.

3. **Employee Benefits**. As a full-time employee of the Company, you will be eligible to participate in a number of Company-sponsored benefits that the Company may make available to you from time to time. The Company reserves the right to modify or terminate these benefits from time to time. A summary of available benefits is enclosed with this letter as **Exhibit C**.

4. **Stock Options**. Subject to the approval of the Company's Board of Directors or its Compensation Committee, you will be granted an option to purchase 240,858 shares of the Company's Common Stock (the "Option") under the Company's applicable equity plan (the "Plan"). The exercise price per share of the Option will be determined by the Board of Directors or the Compensation Committee when the Option is granted. The Option will be subject to the terms and conditions of the Plan and the applicable Stock Option Agreement. As will be more fully described in the Stock Option Agreement, 25% of the shares subject to the Option will vest if you remain in continuous service with the Company for 12 months after the applicable vesting commencement date, and the balance will vest in equal monthly installments over the next 36 months of your continuous service.

5. **Relocation Reimbursement.** To support your relocation to New York, we will reimburse you for household and family moving expenses up to $5,000. Expenses will be reimbursed based upon submission of actual receipts and be subject to any applicable tax withholding. In the event your employment with the Company voluntarily terminates prior to the first anniversary of your start date, you agree to refund a prorated portion of the relocation support provided to the Company.

6. **Employee Proprietary Information and Inventions Agreement**. Like all Company employees, you will be required, as a condition of your employment with the Company, to sign the Company's standard Employee Proprietary Information and Inventions Agreement (the "PIIA"), which is attached to this letter as **Exhibit A**. The PIIA requires, among other things, the assignment of patent rights to any invention made during your employment.

7. **Employment Relationship.** The Company is an at-will employer. At-will means that an employee may resign at any time with or without advance notice to the Company and with or without cause. Likewise, the Company may terminate an employee at any time with or without advance notice and with or without cause. Any contrary representations that may have been made to you are superseded by this letter agreement. This is the full and complete agreement between you and the Company on this term. Although your job duties, title, compensation and benefits, as well as the Company's personnel policies and procedures, may change from time to time, the "at will" nature of your employment may only be changed in an express written agreement signed by you and the Chief Executive Officer of the Company.

8. **Restrictions on Employment.** While you render services to the Company, you will not engage in any other employment, consulting or other business activity (whether full-time or part-time) that would create a conflict of interest with the Company. By signing this offer letter, you represent and warrant that you are not party to any agreement or subject to any policy that would prevent or restrict you from engaging in activities competitive with the activities of your former employer or from directly or indirectly soliciting any employee, client or customer to leave the employ of, or transfer its business away from, your former employer, or if you are subject to such an agreement or policy, you have complied and will comply with it, and your employment with the Company does not violate any such agreement or policy. You further confirm that you will not remove or take any documents or proprietary data or materials of any kind, electronic or otherwise, with you from your current or former employer to the Company without written authorization from your current or former employer. If you have any questions about the ownership of particular documents or other information, discuss such questions with your former employer before removing or copying the documents or information.

9. **Tax Matters.** All forms of compensation referred to in this letter agreement are subject to reduction to reflect applicable withholding and payroll taxes and other deductions required by law. You are encouraged to obtain your own tax advice regarding your compensation from the Company. You agree that the Company does not have a duty to design its compensation policies in a manner that minimizes your tax liabilities, and you will not make any claim against the Company or its Board of Directors related to tax liabilities arising from your compensation.

10. **Interpretation, Amendment and Enforcement**. This letter agreement and the attached exhibits supersede and replace any prior agreements, representations or understandings (whether written, oral, implied or otherwise) between you and the Company and constitute the complete agreement between you and the Company regarding the subject matter set forth herein. This letter agreement may not be amended or modified, except by an express written agreement signed by both you and a duly authorized officer of the Company. If any provision of this letter agreement is determined to be invalid or unenforceable, in whole or in part, this determination shall not affect any other provision of this letter agreement and the provision in question shall be modified so as to be rendered enforceable in a manner consistent with the intent of the parties insofar as possible under applicable law. This letter

agreement may be delivered and executed via electronic mail (including pdf or any electronic signature complying with the U.S. federal ESIGN Act of 2000, Uniform Electronic Transactions Act or other applicable law) or other transmission method and when so delivered and executed shall be deemed to have been duly and validly delivered and executed and be valid and effective for all purposes.

* * * * *

We hope that you will accept our offer to join the Company. You may indicate your agreement with these terms and accept this offer by signing and dating both the enclosed duplicate original of this letter agreement and the enclosed Employee Proprietary Information and Inventions Agreement and returning them to me. This offer, if not accepted, will expire at the close of business on February 23, 2026. Your employment with the Company is contingent upon your providing legal proof of your identity and authorization to work in the United States, as required by law, upon the verification of the information in your employment application materials, including references, upon successful completion of a background investigation, consistent with applicable federal, state, and local law, and upon your starting work with the Company by April 20, 2026.

Very truly yours,

RADICAL AI, INC.

Signed by:

By: Joseph F. Krause

170E04FB0C3D403...

Name: Joseph F. Krause
Title: CEO & Co-Founder

I have read and accept this employment offer:

Signed by:

3FA45E2B527249D...

Signature of Employee

Dated: 2026-02-23 | 12:17 AM EST

Attachments

Exhibit A: Employee Proprietary Information and Inventions Agreement
Exhibit B: Wage Notice
Exhibit C: Benefits Plan

EMP #
10184457
Cost Center: 564935

EARNINGS STATEMENT

Period Beginning: 02-21-2026
Period Ending: 03-06-2026
Check Date: 03-13-2026
Pers. No 10184457
Apple ID: 617445

Emma R Kelley
143 Graystone Terrace
San Francisco CA 94114

Earnings	Rate	Hours/Units	Amount	Year-To-Date
Vacation Pay				1,503.19
Salary			7,515.96	43,592.57
Gross Pay			7,515.96	45,095.76
Tax Deductions: Federal				
Withholding Tax			1,125.36-	6,752.16-
EE Social Security Tax			455.36-	2,732.18-
EE Medicare Tax			106.50-	638.98-
Tax Deductions: California				
Withholding Tax			498.41-	3,067.18-
EE Voluntary Disabilit			97.00-	591.74-
Additional Deductions				
*Health Insurance			40.07-	240.42-
*Dental Insurance			12.95-	77.70-
*Vision			1.53-	9.18-
*Health Savings Account			125.92-	755.52-
*Trad 401(k) Contribution	12.08		907.93-	5,447.58-
Stock Purchase (ESPP)				3,758.00-
401k After-tax	5.00		375.80-	2,254.80-
Total Net Pay			3,769.13	18,770.32

Other Benefits and Information	This Period	Year-to-Date
ESPP Rollover		0.12
HSA Apple Contri		750.00
EE GTLI Taxable	9.09	54.54
401(k) Apple Mat	450.96	2,593.02

Quota Summary	Used	Earned	Balance
Vacation	0.00	137.46	137.46
Sick	0.00	240.00	240.00

Payment Method	Amount
Direct Deposit	1,000.00
Direct Deposit	2,769.13

Fed taxable wages-Current 6,436.65
Fed taxable wages-YTD 38,619.90

*Excluded from Federal Taxable Wages

Apple Inc.
One Apple Park Way
Cupertino CA 95014
Phone 800-473-7411

Check Date:03-13-2026

THIS IS NOT A CHECK

Deposited to the account of:	Payment Type	Account No.	Bank/Check No.		Amount
	Bank transfer	XXXXX	322271627	USD	1,000.00
	Bank transfer	XXXXX736	031101334	USD	2,769.13

NON - NEGOTIABLE

EMP #
10184457
Cost Center: 564935

E A R N I N G S   S T A T E M E N T

Period Beginning: 02-07-2026
Period Ending: 02-20-2026
Check Date: 02-27-2026
Pers. No 10184457
Apple ID: 617445

Emma R Kelley
143 Graystone Terrace
San Francisco CA 94114

Earnings	Rate	Hours/Units	Amount	Year-To-Date
Vacation Pay				1,503.19
Salary			7,515.96	36,076.61
Gross Pay			7,515.96	37,579.80
Tax Deductions: Federal				
Withholding Tax			1,125.36-	5,626.80-
EE Social Security Tax			455.36-	2,276.82-
EE Medicare Tax			106.49-	532.48-
Tax Deductions: California				
Withholding Tax			498.41-	2,568.77-
EE Voluntary Disabilit			97.00-	494.74-
Additional Deductions				
*Health Insurance			40.07-	200.35-
*Dental Insurance			12.95-	64.75-
*Vision			1.53-	7.65-
*Health Savings Account			125.92-	629.60-
*Trad 401(k) Contribution		12.08	907.93-	4,539.65-
Stock Purchase (ESPP)		10.00	751.60-	3,758.00-
401k After-tax		5.00	375.80-	1,879.00-
Total Net Pay			3,017.54	15,001.19

Other Benefits and Information	This Period	Year-to-Date
ESPP Rollover	0.12	0.12
HSA Apple Contri		750.00
ESPP Period 1	751.72	
EE GTLI Taxable	9.09	45.45
401(k) Apple Mat	450.96	2,142.06

Quota Summary	Used	Earned	Balance
Vacation	0.00	132.23	132.23
Sick	0.00	240.00	240.00

Payment Method	Amount
Direct Deposit	1,000.00
Direct Deposit	2,017.54

Fed taxable wages-Current 6,436.65
Fed taxable wages-YTD 32,183.25

*Excluded from Federal Taxable Wages

Apple Inc.
One Apple Park Way
Cupertino CA 95014
Phone 800-473-7411

Check Date:02-27-2026

T H I S   I S   N O T   A   C H E C K

Deposited to the account of:	Payment Type	Account No.	Bank/Check No.		Amount
	Bank transfer	XXXXX	322271627	USD	1,000.00
	Bank transfer	XXXXX736	031101334	USD	2,017.54

N O N - N E G O T I A B L E

Primary Account Holder	Address	Account Number
Emma Kelley	143 graystone terrace	410013303748
Member since Feb 26, 2021		Monthly Statement Period
	SAN FRANCISCO, CA 94114	Feb 1, 2026 - Feb 28, 2026

SoFi

Checking Account - 3748

Current Balance	Current Interest Rate[1]	Monthly Interest Paid[1]
$1,751.76 as of Feb 28, 2026	0.50%	$0.12
Beginning Balance	**Annual Percentage Yield Earned[1]**	**Year-to-date Interest Paid[1]**
$446.05 as of Feb 1, 2026	0.52%	$0.34

Current balances include the amount of interest paid.

Transaction Details

Balances below are the total funds resulting from the transaction(s) posted on that day.

Checking Account - 3748

DATE	TYPE	DESCRIPTION	AMOUNT	BALANCE
Feb 28, 2026	Interest Earned	Interest earned Transaction ID: 1288-1	$0.12	$1,751.76
Feb 27, 2026	Deposit	VENMO CASHOUT Transaction ID: 1286-75313001	$824.00	$1,751.64
Feb 26, 2026	Direct Deposit	APPLE INC. 1327484736 Transaction ID: 1284-20448001	$127.97	$927.64
Feb 26, 2026	Direct Payment	APPLECARD GSBANK PAYMENT Transaction ID: 1283-74888001	-$247.07	$799.67
Feb 25, 2026	Deposit	From Savings - 9736 Transaction ID: 1281-12797002	$1,000.00	$1,046.74
Feb 23, 2026	Direct Payment	VENMO PAYMENT Transaction ID: 1280-254597001	-$35.50	$46.74

Contact Information

Website
www.sofi.com

Mailing Address
SoFi Bank, N.A.
2750 East Cottonwood Parkway #300
Cottonwood Heights, Utah 84121

Contact Us
(855) 456-SOFI (7634)

[1] Interest accrues daily at the funds rate as described in your SoFi Bank Deposit Account Agreement (the "Customer Agreement") and is paid on the last day of the Statement Period. The Annual Percentage Yield Earned, as shown on your statement, may reflect account adjustments from previous statement periods.

[2] Interest accrues at the same rate on all funds in your SoFi savings accounts, including funds allocated to SoFi Vaults. References to "interest" in connection with any SoFi Vault reflect the portion of the interest earned on your SoFi savings account in the preceding month which is allocated to the applicable SoFi Vault. The amount of interest allocated to each SoFi Vault is equal to the proportion of the balance in each SoFi Vault bears to your total SoFi savings account balance.

Checking Account - 3748

Feb 17, 2026	Direct Deposit	APPLE INC. 1326943836 Transaction ID: 1278-32799001	$82.24	$82.24
Feb 5, 2026	Overdraft	From Savings - 9736 Transaction ID: 1277-9137001	$230.00	$0.00
Feb 5, 2026	Direct Payment	CHASE CREDIT CRD EPAY Transaction ID: 1276-9137001	-$230.00	-$230.00
Feb 2, 2026	Overdraft	From Savings - 9736 Transaction ID: 1274-515291001	$454.95	$0.00
Feb 2, 2026	Direct Payment	VENMO PAYMENT Transaction ID: 1273-515291001	-$2,400.00	-$454.95
Feb 2, 2026	Direct Payment	VENMO PAYMENT Transaction ID: 1272-294702001	-$77.00	$1,945.05
Feb 2, 2026	Direct Payment	CHASE CREDIT CRD EPAY Transaction ID: 1271-294701001	-$234.00	$2,022.05
Feb 2, 2026	Direct Payment	VENMO PAYMENT Transaction ID: 1270-127465001	-$190.00	$2,256.05
Feb 1, 2026	Deposit	From Savings - 9736 Transaction ID: 1267-214014002	$1,500.00	$2,446.05
Feb 1, 2026	Deposit	From Savings - 9736 Transaction ID: 1266-23635002	$500.00	$946.05

Primary Account Holder	Address	Account Number
Emma Kelley	143 graystone terrace	310004389736
Member since Feb 26, 2021		Monthly Statement Period
	SAN FRANCISCO, CA 94114	Feb 1, 2026 - Feb 28, 2026

Savings Account - 9736

Current Balance
$66,487.84
as of Feb 28, 2026

Current Interest Rate[1]
3.25%

Monthly Interest Paid[1]
$141.56

Beginning Balance
$56,988.47
as of Feb 1, 2026

Annual Percentage Yield Earned[1]
3.30%

Year-to-date Interest Paid[1]
$295.01

Current balances include the amount of interest paid.

Transaction Details

Balances below are the total funds resulting from the transaction(s) posted on that day.

Savings Account - 9736

DATE	TYPE	DESCRIPTION	AMOUNT	BALANCE
Feb 28, 2026	Interest Earned	Interest earned Transaction ID: 376-1	$105.20	$51,626.48
Feb 26, 2026	Deposit	MSPBNA ACH TRNSFR Transaction ID: 375-199764001	$9,007.70	$51,521.28
Feb 25, 2026	Withdrawal	To Car Vault Transaction ID: 374-172231001	-$201.75	$42,513.58
Feb 25, 2026	Direct Deposit	APPLE INC. PAYROLL Transaction ID: 373-3275001	$2,017.54	$42,715.33
Feb 25, 2026	Withdrawal	To Checking - 3748 Transaction ID: 372-12797001	-$1,000.00	$40,697.79
Feb 11, 2026	Withdrawal	To Car Vault Transaction ID: 371-153397001	-$201.75	$41,697.79

Contact Information

Website
www.sofi.com

Mailing Address
SoFi Bank, N.A.
2750 East Cottonwood Parkway #300
Cottonwood Heights, Utah 84121

Contact Us
(855) 456-SOFI (7634)

[1] Interest accrues daily at the funds rate as described in your SoFi Bank Deposit Account Agreement (the "Customer Agreement") and is paid on the last day of the Statement Period. The Annual Percentage Yield Earned, as shown on your statement, may reflect account adjustments from previous statement periods.

[2] Interest accrues at the same rate on all funds in your SoFi savings accounts, including funds allocated to SoFi Vaults. References to "interest" in connection with any SoFi Vault reflect the portion of the interest earned on your SoFi savings account in the preceding month which is allocated to the applicable SoFi Vault. The amount of interest allocated to each SoFi Vault is equal to the proportion of the balance in each SoFi Vault bears to your total SoFi savings account balance.

Savings Account - 9736

Feb 11, 2026	Direct Deposit	APPLE INC. PAYROLL Transaction ID: 370-2886001	$2,017.52	$41,899.54
Feb 5, 2026	Overdraft	To Checking - 3748 Transaction ID: 369-9137001	-$230.00	$39,882.02
Feb 2, 2026	Overdraft	To Checking - 3748 Transaction ID: 368-515291001	-$454.95	$40,112.02
Feb 1, 2026	Withdrawal	To Checking - 3748 Transaction ID: 367-214014001	-$1,500.00	$40,566.97
Feb 1, 2026	Withdrawal	To Checking - 3748 Transaction ID: 366-23635001	-$500.00	$42,066.97

Car Vault

DATE	TYPE	DESCRIPTION	AMOUNT	BALANCE
Feb 28, 2026	Interest Earned	Interest earned Transaction ID: 104-1	$36.36	$14,861.36
Feb 25, 2026	Deposit	From savings balance Transaction ID: 103-172231002	$201.75	$14,825.00
Feb 11, 2026	Deposit	From savings balance Transaction ID: 102-153397002	$201.75	$14,623.25

2025 W-2 and EARNINGS SUMMARY

Employee Reference Copy

W-2 Wage and Tax Statement **2025**

Copy C for employee's records. OMB No. 1545-0029

d Control number	Dept.	Corp.	Employer use only
10184457 TRA		Y010	3996

c Employer's name, address, and ZIP code
APPLE INC
1 APPLE PARK WAY MS 580-CSA
CUPERTINO, CA 95014

e/f Employee's name, address, and ZIP code
EMMA R KELLEY
143 GRAYSTONE TERRACE
SAN FRANCISCO, CA 94114

b Employer's FED ID number 94-2404110	a Employee's SSA number XXX-XX-0816
1 Wages, tips, other comp. 329342.24	2 Federal income tax withheld 65179.25
3 Social security wages 176100.00	4 Social security tax withheld 10918.20
5 Medicare wages and tips 347489.50	6 Medicare tax withheld 6366.00
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 235.57
14 Other 3000.00 CA VPDI; 2039.37 ESPPDD; 3313.37 ESPPQD; 135946.08 RSU	12b D 23500.00
	12c W 4149.76
	12d DD 9860.52
	13 Stat emp: ; Ret. plan: X; 3rd party sick pay:

15 State	Employer's state ID no.	16 State wages, tips, etc.
CA	251-5456 8	333492.00

17 State income tax 29488.48	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement, plus any additional compensation or adjustments received after the payroll close.

Your gross pay may not match your box 1 totals due to adjustments made for GTL, 401(k), cafeteria plans, etc...

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

EMMA R KELLEY
143 GRAYSTONE TERRACE
SAN FRANCISCO, CA 94114

Social Security Number: XXX-XX-0816

1 Wages, tips, other comp. 329342.24	2 Federal income tax withheld 65179.25
3 Social security wages 176100.00	4 Social security tax withheld 10918.20
5 Medicare wages and tips 347489.50	6 Medicare tax withheld 6366.00

d Control number	Dept.	Corp.	Employer use only
10184457 TRA		Y010	3996

c Employer's name, address, and ZIP code
APPLE INC
1 APPLE PARK WAY MS 580-CSA
CUPERTINO, CA 95014

b Employer's FED ID number 94-2404110	a Employee's SSA number XXX-XX-0816
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 235.57
14 Other 3000.00 CA VPDI; 2039.37 ESPPDD; 3313.37 ESPPQD; 135946.08 RSU	12b D 23500.00
	12c W 4149.76
	12d DD 9860.52
	13 Stat emp: ; Ret. plan: X; 3rd party sick pay:

e/f Employee's name, address and ZIP code
EMMA R KELLEY
143 GRAYSTONE TERRACE
SAN FRANCISCO, CA 94114

15 State	Employer's state ID no.	16 State wages, tips, etc.
CA	251-5456 8	333492.00

17 State income tax 29488.48	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

Federal Filing Copy

W-2 Wage and Tax Statement **2025** OMB No. 1545-0029

Copy B to be filed with employee's Federal Income Tax Return.

CA. State Filing Copy

W-2 Wage and Tax Statement **2025** OMB No. 1545-0029

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

City or Local Filing Copy

W-2 Wage and Tax Statement **2025** OMB No. 1545-0029

Copy 2 to be filed with employee's City or Local Income Tax Return.

Form **8879**

(Rev. January 2021)

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization

► **ERO must obtain and retain completed Form 8879.**

► **Go to *www.irs.gov/Form8879* for the latest information.**

OMB No. 1545-0074

Submission Identification Number (SID) ►

Taxpayer's name	Social security number
EMMA KELLEY	022-82-0816
Spouse's name	Spouse's social security number

Part I **Tax Return Information – Tax Year Ending December 31,** 2024 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	286,852.
2	Total tax	2	61,295.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	45,156.
4	Amount you want refunded to you	4	
5	Amount you owe	5	16,312.

Part II **Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

[X] I authorize Stephen E Gurne, CPA (**ERO firm name**) to enter or generate my PIN 15225 (**Enter five digits, but don't enter all zeros**) as my signature on the income tax return (original or amended) I am now authorizing.

[ ] I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► EMMA KELLEY Date ► 04/06/2025

Spouse's PIN: check one box only

[ ] I authorize ____________ (**ERO firm name**) to enter or generate my PIN ________ (**Enter five digits, but don't enter all zeros**) as my signature on the income tax return (original or amended) I am now authorizing.

[ ] I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► Date ►

Practitioner PIN Method Returns Only — continue below

Part III **Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 68774975431
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345,** Handbook for Authorized IRS *e-file* Providers of Individual Income Tax Returns.

ERO's signature ► Stephen E Gurne, CPA Stephen E Gurne, CPA Date ► 03/24/2025

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR **2024**

California e-file Signature Authorization for Individuals

FORM **8879**

Your name	Your SSN or ITIN
EMMA KELLEY	022-82-0816
Spouse's/RDP's name	Spouse's/RDP's SSN or ITIN

Part I Tax Return Information (whole dollars only)

1	California adjusted gross income (AGI). See instructions	1	291,001.
2	Amount you owe. See instructions	2	2,584.
3	Refund or no amount due. See instructions	3	

Part II Taxpayer Declaration and Signature Authorization (Be sure you obtain and keep a copy of your return.)

Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2024, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider, including my name, address, and social security number (SSN) or individual tax identification number (ITIN), and the amounts shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If applicable, I authorize an electronic funds withdrawal of the amount on line 2 and/or the estimated tax payments as shown on my return and on form FTB 8455, California e-file Payment Record for Individuals, or a comparable form. If applicable, I declare that direct deposit refund amount on line 3 agrees with the direct deposit authorization stated on my return. If I have filed a joint return, this is an irrevocable appointment of the other spouse/registered domestic partner (RDP) as an agent to authorize an electronic funds withdrawal or direct deposit. I authorize my ERO, transmitter, or intermediate service provider to transmit my complete return to the Franchise Tax Board (FTB). **If the processing of my return or refund is delayed, I authorize the FTB to disclose to my ERO, intermediate service provider, and/or transmitter the reason(s) for the delay or the date when the refund was sent.** If I am filing a balance due return, I understand that if the FTB does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I acknowledge that I have read and consent to the Electronic Funds Withdrawal Consent included on the copy of my electronic income tax return. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

[X] I authorize STEPHEN E GURNE, CPA (**ERO firm name**) to enter my PIN 15225 (**Do not enter all zeros**) as my signature on my 2024 e-filed California individual income tax return.

[ ] I will enter my PIN as my signature on my 2024 e-filed California individual income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▸ EMMA KELLEY Date ▸ 04/06/2025

Spouse's/RDP's PIN: check one box only

[ ] I authorize ______ (**ERO firm name**) to enter my PIN ______ (**Do not enter all zeros**) as my signature on my 2024 e-filed California individual income tax return.

[ ] I will enter my PIN as my signature on my 2024 e-filed California individual income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's/RDP's signature ▸ ______ Date ▸ ______

Practitioner PIN Method Returns Only — continue below

Part III Certification and Authentication — Practitioner PIN Method Only

ERO's Electronic Filer Identification Number (EFIN)/PIN.
Enter your six-digit EFIN followed by your five-digit self-selected PIN. 68774975431 (**Do not enter all zeros**)

I certify that the above numeric entry is my PIN, which is my signature for the 2024 California individual income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and FTB Pub. 1345, 2024 Handbook for Authorized e-file Providers.

ERO's signature ▸ STEPHEN E GURNE, CPA Stephen E Gurne, CPA Date ▸ 03/24/2025

To Whom It May Concern,

I am the landlord of 143 Graystone Terrace, San Francisco, CA 94114. I am confirming that Emma Kelley has lived in my condo since Spring 2025.

She pays rent on time, every month, no issues. The apartment is kept in good condition and communication has always been straightforward.

I also know Emma personally and can vouch that she is responsible and easy to deal with. I am sad to have her move out of my unit to New York City!

I would rent to her again without hesitation. If you need anything further, feel free to contact me.

Jikun (Jacob) Zhu
(585) 755-8756
jikun.zhu@gmail.com