

Form W-2 Wage and Tax Statement 2024

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number 9240909322			Employer identification number EIN 13-5160382		Copy B, To Be Filed With Employee's FEDERAL Tax Return					
Employer's name, address and ZIP code THE BANK OF NEW YORK MELLON 500 Ross Street Pittsburgh, PA 15262			Employee's social security number XXX-XX-3676		1 Wages, tips, other compensation 92631.84		2 Federal income tax withheld 16462.44			
			7 Social security tips		3 Social security wages 100057.10		4 Social security tax withheld 6203.54			
			8 Allocated tips		5 Medicare wages and tips 100057.10		6 Medicare tax withheld 1450.83			
Employee's first name and init Last name Sandeep B Yenjane Mavens Viaan Alfa B 804 Katraj-Saswad bypass Handewadi Chowk , Handewadi Pune, India					10 Dependent care benefits		11 Nonqualified plans			
					12a C 57.60		13 Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other PA_SUL_EE 71.34 PA LST 38.88	
					12b D 7425.26					
					12c DD 13058.28					
			Employee's address and ZIP code			12d W 200.00				
15 State	Employer's state ID number	16 State wages, tips etc.	17 State income tax	18 Local wages, tips etc.	19 Local income tax	20 Locality name				
PA	10964724	99999.50	3069.96	99999.50	1000.02	70				

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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OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number 9240909322			Employer identification number EIN 13-5160382		Copy C, For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B)					
Employer's name, address and ZIP code THE BANK OF NEW YORK MELLON 500 Ross Street Pittsburgh, PA 15262			Employee's social security number XXX-XX-3676		1 Wages, tips, other compensation 92631.84		2 Federal income tax withheld 16462.44			
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					12b D 7425.26					
					12c DD 13058.28					
			Employee's address and ZIP code			12d W 200.00				
15 State	Employer's state ID number	16 State wages, tips etc.	17 State income tax	18 Local wages, tips etc.	19 Local income tax	20 Locality name				
PA	10964724	99999.50	3069.96	99999.50	1000.02	70				

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OMB No. 1545-0008

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Employer's name, address and ZIP code THE BANK OF NEW YORK MELLON 500 Ross Street Pittsburgh, PA 15262			Employee's social security number XXX-XX-3676		1 Wages, tips, other compensation 92631.84		2 Federal income tax withheld 16462.44			
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					12b D 7425.26					
					12c DD 13058.28					
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OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number 9240909322			Employer identification number EIN 13-5160382		Copy 2, To Be Filed With Employee's State, City, or Local Income Tax Return					
Employer's name, address and ZIP code THE BANK OF NEW YORK MELLON 500 Ross Street Pittsburgh, PA 15262			Employee's social security number XXX-XX-3676		1 Wages, tips, other compensation 92631.84		2 Federal income tax withheld 16462.44			
			7 Social security tips		3 Social security wages 100057.10		4 Social security tax withheld 6203.54			
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					12a C 57.60		13 Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other PA_SUL_EE 71.34 PA LST 38.88	
					12b D 7425.26					
					12c DD 13058.28					
			Employee's address and ZIP code			12d W 200.00				
15 State	Employer's state ID number	16 State wages, tips etc.	17 State income tax	18 Local wages, tips etc.	19 Local income tax	20 Locality name				
PA	10964724	99999.50	3069.96	99999.50	1000.02	70				

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Copy B—To Be Filed With Employee's FEDERAL Tax Return.			OMB No. 1545-0008		
a Employee's soc. sec. no. XXX-XX-8259		1 Wages, tips, other comp. 133097.79	2 Federal income tax withheld 14409.98		
b Employer ID number (EIN) 20-8636067		3 Social security wages 142800.00	4 Social security tax withheld 8853.60		
		5 Medicare wages and tips 145231.11	6 Medicare tax withheld 2105.85		
c Employer's name, address, and ZIP code Fidelity Technology Group, LLC 245 Summer Street Boston, MA 02210					
d Control number					
e Employee's name, address, and ZIP code Sharath Chandra Adupa 1373 Channing Park Circle Cary, NC 27519					
7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12 D 12133.32	
13 Statutory employee		14 Other		12b Code W 7000.00	
Retirement plan X				12c Code DD 22486.20	
Third-party sick pay				12d Code	
NC	600655579	133097.79	6541.00		
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form W-2 Wage and Tax Statement 2021 Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service.

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return			OMB No. 1545-0008		
a Employee's soc. sec. no. XXX-XX-8259		1 Wages, tips, other comp. 133097.79	2 Federal income tax withheld 14409.98		
b Employer ID number (EIN) 20-8636067		3 Social security wages 142800.00	4 Social security tax withheld 8853.60		
		5 Medicare wages and tips 145231.11	6 Medicare tax withheld 2105.85		
c Employer's name, address, and ZIP code Fidelity Technology Group, LLC 245 Summer Street Boston, MA 02210					
d Control number					
e Employee's name, address, and ZIP code Sharath Chandra Adupa 1373 Channing Park Circle Cary, NC 27519					
7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code D 12133.32	
13 Statutory employee		14 Other		12b Code W 7000.00	
Retirement plan X				12c Code DD 22486.20	
Third-party sick pay				12d Code	
NC	600655579	133097.79	6541.00		
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form W-2 Wage and Tax Statement 2021 Dept. of the Treasury - IRS

Copy C—For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)			OMB No. 1545-0008		
a Employee's soc. sec. no. XXX-XX-8259		1 Wages, tips, other comp. 133097.79	2 Federal income tax withheld 14409.98		
b Employer ID number (EIN) 20-8636067		3 Social security wages 142800.00	4 Social security tax withheld 8853.60		
		5 Medicare wages and tips 145231.11	6 Medicare tax withheld 2105.85		
c Employer's name, address, and ZIP code Fidelity Technology Group, LLC 245 Summer Street Boston, MA 02210					
d Control number					
e Employee's name, address, and ZIP code Sharath Chandra Adupa 1373 Channing Park Circle Cary, NC 27519					
7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12 D 12133.32	
13 Statutory employee		14 Other		12b Code W 7000.00	
Retirement plan X				12c Code DD 22486.20	
Third-party sick pay				12d Code	
NC	600655579	133097.79	6541.00		
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form W-2 Wage and Tax Statement 2021 Dept. of the Treasury - IRS
This information is being furnished to the IRS. 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.

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return			OMB No. 1545-0008		
a Employee's soc. sec. no. XXX-XX-8259		1 Wages, tips, other comp. 133097.79	2 Federal income tax withheld 14409.98		
b Employer ID number (EIN) 20-8636067		3 Social security wages 142800.00	4 Social security tax withheld 8853.60		
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c Employer's name, address, and ZIP code Fidelity Technology Group, LLC 245 Summer Street Boston, MA 02210					
d Control number					
e Employee's name, address, and ZIP code Sharath Chandra Adupa 1373 Channing Park Circle Cary, NC 27519					
7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code D 12133.32	
13 Statutory employee		14 Other		12b Code W 7000.00	
Retirement plan X				12c Code DD 22486.20	
Third-party sick pay				12d Code	
NC	600655579	133097.79	6541.00		
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form W-2 Wage and Tax Statement 2021 Dept. of the Treasury - IRS
BW24UP NTF 2584428 **1 BW24UP**

2022 W-2 and EARNINGS SUMMARY

Employee Reference Copy		Wage and Tax Statement		2022	
Copy C for employee's records.		OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only		
00008J3427 W11		IB01	Z	2586	
c Employer's name, address, and ZIP code					
INTERNATIONAL BUSINESS MACHINES CORPORATION 1701 NORTH ST BLDG 256-1 ENDICOTT, NY 13760					
e/f Employee's name, address, and ZIP code					
VANISRI ANILKUMAR 301 MINOR AVE N UNIT 605 SEATTLE, WA 98109					
b Employer's FED ID number	a Employee's SSA number				
13-0871985	XXX-XX-5669				
1 Wages, tips, other comp.	2 Federal income tax withheld				
61740.74	11482.34				
3 Social security wages	4 Social security tax withheld				
68008.54	4216.53				
5 Medicare wages and tips	6 Medicare tax withheld				
68008.54	986.12				
7 Social security tips	8 Allocated tips				
9	10 Dependent care benefits				
11 Nonqualified plans	12a See instructions for box 12				
	C 132.40				
14 Other	12b D 6267.80				
95.59 FLI DI P.P.# SX-18308 169.15 UI/HC/WD	12c DD 2947.05				
	12d				
	13 Stat emp Ret. plan 3rd party sick pay				
	X				
15 State	Employer's state ID no.		16 State wages, tips, etc.		
	TOTAL STATE				
17 State income tax	1543.65		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 for 2022 plus any additional 2022 compensation or adjustment received after the 12/21/22 payroll close.

For other tax and payroll information, visit the Payroll Services Web Site at <https://w3.ibm.com/hr/web/us/payroll> on the IBM Intranet.

VANISRI ANILKUMAR
301 MINOR AVE N
UNIT 605
SEATTLE, WA 98109

Social Security Number: XXX-XX-5669

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1 Wages, tips, other comp.	2 Federal income tax withheld		
61740.74	11482.34		
3 Social security wages	4 Social security tax withheld		
68008.54	4216.53		
5 Medicare wages and tips	6 Medicare tax withheld		
68008.54	986.12		
d Control number	Dept.	Corp.	Employer use only
00008J3427 W11		IB01	Z 2586
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 1701 NORTH ST BLDG 256-1 ENDICOTT, NY 13760			
b Employer's FED ID number	a Employee's SSA number		
13-0871985	XXX-XX-5669		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	C 132.40		
14 Other	12b D 6267.80		
95.59 FLI DI P.P.# SX-18308 169.15 UI/HC/WD	12c DD 2947.05		
	12d		
	13 Stat emp Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
VANISRI ANILKUMAR 301 MINOR AVE N UNIT 605 SEATTLE, WA 98109			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
	TOTAL STATE		
17 State income tax	1543.65	18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
Federal Filing Copy			
W-2 Wage and Tax Statement 2022			
Copy B to be filed with employee's Federal Income Tax Return.			

1 Wages, tips, other comp.	2 Federal income tax withheld		
61740.74	11482.34		
3 Social security wages	4 Social security tax withheld		
68008.54	4216.53		
5 Medicare wages and tips	6 Medicare tax withheld		
68008.54	986.12		
d Control number	Dept.	Corp.	Employer use only
00008J3427 W11		IB01	Z 2586
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 1701 NORTH ST BLDG 256-1 ENDICOTT, NY 13760			
b Employer's FED ID number	a Employee's SSA number		
13-0871985	XXX-XX-5669		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	C 132.40		
14 Other	12b D 6267.80		
95.59 FLI DI P.P.# SX-18308 169.15 UI/HC/WD	12c DD 2947.05		
	12d		
	13 Stat emp Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
VANISRI ANILKUMAR 301 MINOR AVE N UNIT 605 SEATTLE, WA 98109			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
NJ	130-871-985/000	62012.87	
17 State income tax	1202.38	18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ. State Reference Copy			
W-2 Wage and Tax Statement 2022			
Copy 2 to be filed with employee's State Income Tax Return.			

1 Wages, tips, other comp.	2 Federal income tax withheld		
61740.74	11482.34		
3 Social security wages	4 Social security tax withheld		
68008.54	4216.53		
5 Medicare wages and tips	6 Medicare tax withheld		
68008.54	986.12		
d Control number	Dept.	Corp.	Employer use only
00008J3427 W11		IB01	Z 2586
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 1701 NORTH ST BLDG 256-1 ENDICOTT, NY 13760			
b Employer's FED ID number	a Employee's SSA number		
13-0871985	XXX-XX-5669		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	C 132.40		
14 Other	12b D 6267.80		
95.59 FLI DI P.P.# SX-18308 169.15 UI/HC/WD	12c DD 2947.05		
	12d		
	13 Stat emp Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
VANISRI ANILKUMAR 301 MINOR AVE N UNIT 605 SEATTLE, WA 98109			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
NJ	130-871-985/000	62012.87	
17 State income tax	1202.38	18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ. State Filing Copy			
W-2 Wage and Tax Statement 2022			
Copy 2 to be filed with employee's State Income Tax Return.			

2022 W-2 and EARNINGS SUMMARY

NY. State Reference Copy			
W-2		2022	
Wage and Tax Statement			
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only
00008J3427 W11		IB01	Z 2587
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 1701 NORTH ST BLDG 256-1 ENDICOTT, NY 13760			
e/f Employee's name, address, and ZIP code			
VANISRI ANILKUMAR 301 MINOR AVE N UNIT 605 SEATTLE, WA 98109			
b Employer's FED ID number	a Employee's SSA number		
13-0871985	XXX-XX-5669		
1 Wages, tips, other comp.	2 Federal income tax withheld		
61740.74	11482.34		
3 Social security wages	4 Social security tax withheld		
68008.54	4216.53		
5 Medicare wages and tips	6 Medicare tax withheld		
68008.54	986.12		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	C 132.40		
14 Other	12b D 6267.80		
95.59 FLI DI P.P.# SX-18308 169.15 UI/HC/WD	12c DD 2947.05		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
		X	
15 State	Employer's state ID no.	16 State wages, tips, etc.	
NY	130871985 9	61740.74	
17 State income tax	18 Local wages, tips, etc.		
341.27			
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 for 2022 plus any additional 2022 compensation or adjustment received after the 12/21/22 payroll close.

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VANISRI ANILKUMAR
301 MINOR AVE N
UNIT 605
SEATTLE, WA 98109

Social Security Number: XXX-XX-5669

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5 Medicare wages and tips	6 Medicare tax withheld		
68008.54	986.12		
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00008J3427 W11		IB01	Z 2587
c Employer's name, address, and ZIP code			
INTERNATIONAL BUSINESS MACHINES CORPORATION 1701 NORTH ST BLDG 256-1 ENDICOTT, NY 13760			
b Employer's FED ID number			
13-0871985			
a Employee's SSA number			
XXX-XX-5669			
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	C 132.40		
14 Other	12b D 6267.80		
95.59 FLI DI P.P.# SX-18308 169.15 UI/HC/WD	12c DD 2947.05		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
		X	
e/f Employee's name, address and ZIP code			
VANISRI ANILKUMAR 301 MINOR AVE N UNIT 605 SEATTLE, WA 98109			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
NY	130871985 9	61740.74	
17 State income tax	18 Local wages, tips, etc.		
341.27			
19 Local income tax	20 Locality name		
NY. State Filing Copy			
W-2		2022	
Wage and Tax Statement			
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008			

008-004680-W2-30115-CGA-1 of 2

Capgemini America, Inc.
PO Box 17004
Augusta, GA 30903

Social Security No.:
XXX-XX-6648

Year To Date Earnings

Regular - Semi Mo.	122562.08
Retro Pay	874.74
Vacation Paid Not Taken	2596.02
Cost of Wage Allowance	1878.50
Variable Compensation Award	1076.00
Start Bonus - New Hire	10000.00
Group Term Life > \$50000	165.65

Year To Date Deductions

Pretax Medical Deduction	5493.60
Vision Plan	180.00
Pretax Dental Plan	435.60
CGA AD&D Insurance	61.95
Mercer Voluntary Deductions	214.20
401(k) Contribution	8906.17
Group Term Life>\$50000 Offset	165.65

a Employee's social security number XXX-XX-6648	d Control number 008529 WY/2S7	7 Social security tips	1 Wages, tips, other compensation 124137.62	2 Federal income tax withheld 15632.63	
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903		8 Allocated tips	3 Social security wages 133043.79	4 Social security tax withheld 8248.71	
		9	5 Medicare wages and tips 133043.79	6 Medicare tax withheld 1929.13	
		10 Dependent care benefits	12a See instructions for box 12 C 165.65	12b D 8906.17	
b Employer identification number (EIN) 22-2575929	e Employee's first name and initial Last name Suff. HAWAGIR S ANERAYE 460 CARMICHAEL CIR CANTON, GA 30115	11 Nonqualified plans	12c DD 19013.24	12d	
13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other			
f Employee's address and ZIP code					
15 State Employer's State ID No GA 2061024 CX	16 State wages, tips, etc. 78544.40	17 State income tax 4289.19	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Employee's
Copy

Copy C - For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)
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.

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

State
Filing Copy

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-6648	d Control number 008529 WY/2S7	7 Social security tips	1 Wages, tips, other compensation 124137.62	2 Federal income tax withheld 15632.63	
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903		8 Allocated tips	3 Social security wages 133043.79	4 Social security tax withheld 8248.71	
		9	5 Medicare wages and tips 133043.79	6 Medicare tax withheld 1929.13	
		10 Dependent care benefits	12a See instructions for box 12 C 165.65	12b D 8906.17	
b Employer identification number (EIN) 22-2575929	e Employee's first name and initial Last name Suff. HAWAGIR S ANERAYE 460 CARMICHAEL CIR CANTON, GA 30115	11 Nonqualified plans	12c DD 19013.24	12d	
13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other			
f Employee's address and ZIP code					
15 State Employer's State ID No GA 2061024 CX	16 State wages, tips, etc. 78544.40	17 State income tax 4289.19	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Federal
Filing Copy

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-6648	d Control number 008529 WY/2S7	7 Social security tips	1 Wages, tips, other compensation 124137.62	2 Federal income tax withheld 15632.63	
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903		8 Allocated tips	3 Social security wages 133043.79	4 Social security tax withheld 8248.71	
		9	5 Medicare wages and tips 133043.79	6 Medicare tax withheld 1929.13	
		10 Dependent care benefits	12a See instructions for box 12 C 165.65	12b D 8906.17	
b Employer identification number (EIN) 22-2575929	e Employee's first name and initial Last name Suff. HAWAGIR S ANERAYE 460 CARMICHAEL CIR CANTON, GA 30115	11 Nonqualified plans	12c DD 19013.24	12d	
13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other			
f Employee's address and ZIP code					
15 State Employer's State ID No GA 2061024 CX	16 State wages, tips, etc. 78544.40	17 State income tax 4289.19	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Year To Date Earnings

Year To Date Deductions

008-004680-W2-30115-CGA-2 of 2

Capgemini America, Inc.
PO Box 17004
Augusta, GA 30903

Social Security No.:
XXX-XX-6648

a Employee's social security number XXX-XX-6648		d Control number 008529 WY/2S7		7 Social security tips	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903				8 Allocated tips	3 Social security wages	4 Social security tax withheld
				9	5 Medicare wages and tips	6 Medicare tax withheld
				10 Dependent care benefits	12a See instructions for box 12	
b Employer identification number (EIN) 22-2575929				11 Nonqualified plans	12c	12d
e Employee's first name and initial Last name Suff. HAWAGIR S ANERAYE 460 CARMICHAEL CIR CANTON, GA 30115				13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
				14 Other		
f Employee's address and ZIP code						
15 State Employer's State ID No OH 52-019567 8	16 State wages, tips, etc. 45593.22	17 State income tax 1468.42	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Employee's
Copy

Copy C - For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)
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.

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

State
Filing Copy

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-6648		d Control number 008529 WY/2S7		7 Social security tips	1 Wages, tips, other compensation 124137.62	2 Federal income tax withheld 15632.63
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903				8 Allocated tips	3 Social security wages 133043.79	4 Social security tax withheld 8248.71
				9	5 Medicare wages and tips 133043.79	6 Medicare tax withheld 1929.13
				10 Dependent care benefits	12a See instructions for box 12	
b Employer identification number (EIN) 22-2575929				11 Nonqualified plans	12c	12d
e Employee's first name and initial Last name Suff. HAWAGIR S ANERAYE 460 CARMICHAEL CIR CANTON, GA 30115				13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
				14 Other		
f Employee's address and ZIP code						
15 State Employer's State ID No OH 52-019567 8	16 State wages, tips, etc. 45593.22	17 State income tax 1468.42	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Federal
Filing Copy

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-6648		d Control number 008529 WY/2S7		7 Social security tips	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903				8 Allocated tips	3 Social security wages	4 Social security tax withheld
				9	5 Medicare wages and tips	6 Medicare tax withheld
				10 Dependent care benefits	12a See instructions for box 12	
b Employer identification number (EIN) 22-2575929				11 Nonqualified plans	12c	12d
e Employee's first name and initial Last name Suff. HAWAGIR S ANERAYE 460 CARMICHAEL CIR CANTON, GA 30115				13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
				14 Other		
f Employee's address and ZIP code						
15 State Employer's State ID No OH 52-019567 8	16 State wages, tips, etc. 45593.22	17 State income tax 1468.42	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2022

Copy C, for employee's records

c Employer's name, address, and ZIP code DOTCOM TEAM LLC 325 WOOD RD STE 103 BRAINTREE MA 02184			d Control number 0940-Y411ZE72 000000845 - PAYROL		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation	2 Federal income tax withheld
			86-0973809		283-93-5919		193268.00	20568.64
			13 Statutory employee	Retirement plan	Third-party sick pay		3 Social security wages	4 Social security tax withheld
e Employee's name, address, and ZIP code ANOOP ANAND 482 APPLE DR EXTON PA 19341			12 See instructions for box 12		14 Other PASUI 116.01		5 Medicare wages and tips	6 Medicare tax withheld
							193268.00	2802.39
							7 Social Security Tips	8 Allocated Tips
							10 Dependent care benefits	11 Nonqualified plans
15 State PA	Employer's state ID number 93191363	16 State wages, tips, etc. 193268.00	17 State income tax 5933.27		18 Local wages, tips, etc.		19 Local income tax	20 Locality name

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.

Form W-2 Wage and Tax Statement 2022

Copy B, to be filed with employee's FEDERAL tax return

c Employer's name, address, and ZIP code DOTCOM TEAM LLC 325 WOOD RD STE 103 BRAINTREE MA 02184			d Control number 0940-Y411ZE72 000000845 - PAYROL		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation	2 Federal income tax withheld
			86-0973809		283-93-5919		193268.00	20568.64
			13 Statutory employee	Retirement plan	Third-party sick pay		3 Social security wages	4 Social security tax withheld
e Employee's name, address, and ZIP code ANOOP ANAND 482 APPLE DR EXTON PA 19341			12 See instructions for box 12		14 Other PASUI 116.01		5 Medicare wages and tips	6 Medicare tax withheld
							193268.00	2802.39
							7 Social Security Tips	8 Allocated Tips
							10 Dependent care benefits	11 Nonqualified plans
15 State PA	Employer's state ID number 93191363	16 State wages, tips, etc. 193268.00	17 State income tax 5933.27		18 Local wages, tips, etc.		19 Local income tax	20 Locality name

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.

Form W-2 Wage and Tax Statement 2022

Copy 2, to be filed with employee's tax return for PA

c Employer's name, address, and ZIP code DOTCOM TEAM LLC 325 WOOD RD STE 103 BRAINTREE MA 02184			d Control number 0940-Y411ZE72 000000845 - PAYROL		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation	2 Federal income tax withheld
			86-0973809		283-93-5919		193268.00	20568.64
			13 Statutory employee	Retirement plan	Third-party sick pay		3 Social security wages	4 Social security tax withheld
e Employee's name, address, and ZIP code ANOOP ANAND 482 APPLE DR EXTON PA 19341			12 See instructions for box 12		14 Other PASUI 116.01		5 Medicare wages and tips	6 Medicare tax withheld
							193268.00	2802.39
							7 Social Security Tips	8 Allocated Tips
							10 Dependent care benefits	11 Nonqualified plans
15 State PA	Employer's state ID number 93191363	16 State wages, tips, etc. 193268.00	17 State income tax 5933.27		18 Local wages, tips, etc.		19 Local income tax	20 Locality name

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.

Form W-2 Wage and Tax Statement 2022

c Employer's name, address, and ZIP code			d Control number		Void	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
			b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation	2 Federal income tax withheld
							3 Social security wages	4 Social security tax withheld
			13 Statutory employee	Retirement plan	Third-party sick pay			
e Employee's name, address, and ZIP code			12 See instructions for box 12		14 Other		5 Medicare wages and tips	6 Medicare tax withheld
							7 Social Security Tips	8 Allocated Tips
							10 Dependent care benefits	11 Nonqualified plans
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name

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.

Future developments. For the latest information about developments related to Form W-2, such as legislation enacted after it was published, go to www.irs.gov/FormW2.

Notice to Employee

Do you have to file? Refer to the Form 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 tax credit (EITC). You may be able to take the EITC for 2024 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 for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EITC if your investment income is more than the specified amount for 2024 or if income is earned for services provided while you were an inmate at a penal institution. For 2024 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596. **Any EITC 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 1-800-772-1213. You also may visit the SSA 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 2024 and more than \$10,453.20 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 \$6,129.90 in Tier 2 RRTA tax was withheld, you also may 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 tax return.

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 boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137 with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security 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, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$23,000 (\$16,000 if you only have SIMPLE plans; \$26,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$23,000. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2024, your employer may have allowed an additional deferral of up to \$7,500 (\$3,500 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you 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 pension 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. If no year is shown, the contributions are for the current year.

A - Uncollected social security or RRTA 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 social security wage base), and 5)

D - Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E - Elective deferrals under a section 403(b) salary reduction agreement

F - Elective deferrals under a section 408(k)(6) salary reduction SEP

G - Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H - Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J - Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

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

L - Substantiated employee business expense reimbursements (nontaxable)

M - Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N - Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

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

Q - Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

R - Employer contributions to your Archer MSA. Report on Form 8853.

S - Employee salary reduction contributions under a section 408(p) SIMPLE plan

T - Adoption benefits (not included in box 1). Complete form 8839 to figure any taxable and nontaxable amounts.

V - Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525 for reporting requirements.

W - Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889.

Y - Deferrals under a section 409A nonqualified deferred compensation plan

Z - Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA - Designated Roth contributions under a section 401(k) plan

BB - Designated Roth contributions under a section 403(b) plan

DD - Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE - Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF - Permitted benefits under a qualified small employer health reimbursement 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.

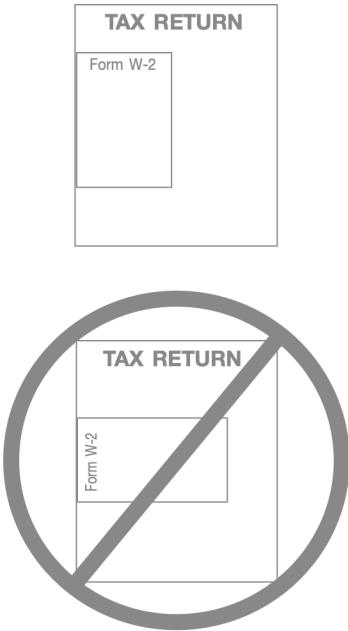
II - Medicaid waiver payments excluded from gross income under Notice 2014-7.

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. 590-A.

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

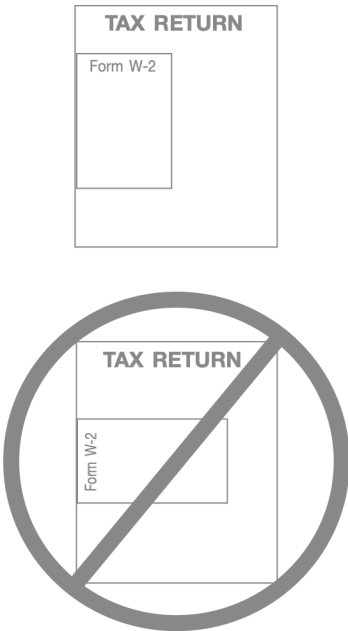
Note. Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

In order for the information on this form to be effectively keypunched, it must be read upright. Therefore, attach this W-2 to your state, city, or local tax return as follows:



NOTE: THIS W-2 IS ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE, AND LOCAL/CITY INCOME TAX RETURNS.

In order for the information on this form to be effectively keypunched, it must be read upright. Therefore, attach this W-2 to your state, city, or local tax return as follows:



NOTE: THIS W-2 IS ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE, AND LOCAL/CITY INCOME TAX RETURNS.

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR 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 2021 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 for 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 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit www.irs.gov/efrc. 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 SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

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 Social Security Administration (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 2021 and more than \$8,853.60 in social security and/or Tier 1 railroad retirement (RTTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$5,203.80 in Tier 2 RTTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax. (See also Instructions for Employee.)

Instructions for Employee
(See also Notice to Employee.)

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 tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR 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 on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the

actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security 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, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7,000.

Instructions for Employee
(continued)

Box 12 (continued)

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k) (11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you 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 Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension 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. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RTTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

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)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement.

F—Elective deferrals under a section 408(k)(6) salary reduction SEP.

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan.

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the

Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RTTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

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

Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

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, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan.

Z—Income under a nonqualified deferred compensation plan that

fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement.

GG—Income from qualified equity grants under section 83(b).

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 amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RTTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RTTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing 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.

Instructions for Employee

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 tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. 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 on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security 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, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you 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 pension 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. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA 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)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

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

Q—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

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, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement 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 amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing 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.

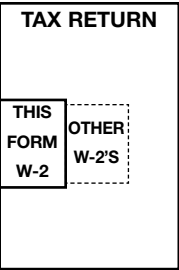
Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

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.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



Notice to Employee

Do you have to file? Refer to the Form 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 2022 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 for 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 2022 or if income is earned for services provided while you were an inmate at a penal institution. For 2022 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, Social Security and Other Information for Members of the Clergy and Religious Workers.

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 2022 and more than \$9,114 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 \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you do not 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 2022 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 for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You cannot take the EIC if your investment income is more than the specified amount for 2022 or if income is earned for services provided while you were an inmate at a penal institution. For 2022 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 are not subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

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 are not 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 1-800-772-1213. You may also visit the SSA at www.socialsecurity.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 2022 and more than \$9,114 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 \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

Instructions for Employee

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 tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. 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 on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box should not be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security 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, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you 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 pension 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. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA 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).

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

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

Q—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1) to your health savings account. Report on Form 8889, Qualified Adoption Expenses, to figure any (taxable and nontaxable amounts).

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, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

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AA—Designated Roth contributions under a section 401(k) plan

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DD—Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

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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 amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

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Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing 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.

IF NEEDED, PLEASE MAKE A COPY OF YOUR STATE OR FEDERAL FILING COPY FOR USE WITH YOUR CITY OR LOCAL TAX FILING

Notice to Employee

Do you have to file? Refer to the Form 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.

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Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.

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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.

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Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

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However, if you were at least age 50 in 2022, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you 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.

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E—Elective deferrals under a section 403(b) salary reduction agreement

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

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 2022 and more than \$9,114 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 \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See Form 1040 instructions for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

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

Q—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

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, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan

Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan

BB—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement 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 amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing 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.