

Form <b>W-2 Wage and Tax Statement</b> <b>2022</b>		4 Social security tips		1 Wages, tips, other comp. 13309.03		2 Federal income tax withheld 288.58					
c Employer's name, address, and ZIP code BRIGHAM YOUNG UNIVERSITY D-55 ASB PROVO UT 84602		8 Allocated tips		3 Social security wages 3420.46		4 Social security tax withheld 212.07					
		9		5 Medicare wages and tips 3420.46		6 Medicare tax withheld 49.60					
		10 Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12					
e Employee's name, address, and ZIP code BROOKLYN MCCALL WRIGHT 442 N 400 E #12 PROVO UT 84606		13 Statutory employee Retirement plan Third-party sick pay		14 Other		12b					
		b Employer identification number (EIN) 87-0217280				12c					
		a Employee's social security no. 646-52-6229				12d					
15 State Employer's state ID no. UT 11691946-005-WTH		16 State wages, tips, etc. 13309.03		17 State income tax 408.86		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	
Copy B To Be Filed With Employee's FEDERAL Tax Return				This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008				Dept. of the Treasury - IRS Visit the IRS Web Site at <a href="http://www.irs.gov/efile">www.irs.gov/efile</a>			

Form <b>W-2 Wage and Tax Statement</b> <b>2022</b>		7 Social security tips		1 Wages, tips, other comp. 13309.03		2 Federal income tax withheld 288.58									
c Employer's name, address, and ZIP code BRIGHAM YOUNG UNIVERSITY D-55 ASB PROVO UT 84602		8 Allocated tips		3 Social security wages 3420.46		4 Social security tax withheld 212.07									
		9		5 Medicare wages and tips 3420.46		6 Medicare tax withheld 49.60									
		10 Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12									
e Employee's name, address, and ZIP code BROOKLYN MCCALL WRIGHT 442 N 400 E #12 PROVO UT 84606		13 Statutory employee Retirement plan Third-party sick pay		14 Other		12b									
		b Employer identification number (EIN) 87-0217280				12c									
		a Employee's social security no. 646-52-6229				12d									
15 State Employer's state ID no. UT 11691946-005-WTH		16 State wages, tips, etc. 13309.03		17 State income tax 408.86		18 Local wages, tips, etc.		19 Local income tax		20 Locality name					
Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)												OMB No. 1545-0008		Dept. of the Treasury - IRS	

Form <b>W-2 Wage and Tax Statement</b>		<b>2022</b>		7 Social security tips		1 Wages, tips, other comp. 13309.03		2 Federal income tax withheld 288.58			
c Employer's name, address, and ZIP code BRIGHAM YOUNG UNIVERSITY D-55 ASB PROVO UT 84602				8 Allocated tips		3 Social security wages 3420.46		4 Social security tax withheld 212.07			
				9		5 Medicare wages and tips 3420.46		6 Medicare tax withheld 49.60			
				10 Dependent care benefits		11 Nonqualified plans		12a			
				13 Statutory employee Retirement plan Third-party sick pay		14 Other		12b			
e Employee's name, address, and ZIP code BROOKLYN MCCALL WRIGHT 442 N 400 E #12 PROVO UT 84606				b Employer identification number (EIN) 87-0217280				12c			
				a Employee's social security no. 646-52-6229				12d			
15 State Employer's state ID no. UT 11691946-005-WTH		16 State wages, tips, etc. 13309.03		17 State income tax 408.86		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	
Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return						OMB No. 1545-0008			Dept. of the Treasury - IRS		

Form <b>W-2 Wage and Tax Statement</b>		<b>2022</b>		7 Social security tips		1 Wages, tips, other comp. 13309.03		2 Federal income tax withheld 288.58													
c Employer's name, address, and ZIP code BRIGHAM YOUNG UNIVERSITY D-55 ASB PROVO UT 84602				8 Allocated tips		3 Social security wages 3420.46		4 Social security tax withheld 212.07													
				9		5 Medicare wages and tips 3420.46		6 Medicare tax withheld 49.60													
				10 Dependent care benefits		11 Nonqualified plans		12a													
e Employee's name, address, and ZIP code BROOKLYN MCCALL WRIGHT 442 N 400 E #12 PROVO UT 84606				13 Statutory employee Retirement plan Third-party sick pay		14 Other		12b													
				b Employer identification number (EIN) 87-0217280				12c													
				a Employee's social security no. 646-52-6229				12d													
15 State UT		Employer's state ID no. 11691946-005-WTH		16 State wages, tips, etc. 13309.03		17 State income tax 408.86		18 Local wages, tips, etc.		19 Local income tax		20 Locality name									
Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return														L87		OMB No. 1545-0008		5206		Dept. of the Treasury - IRS	