|  |                                   |                  | 7 Social security tips                               | 1 Wages, tips, other con                           | nn.                   | 2 Federal inco                       | me tax withheld  |
|--|-----------------------------------|------------------|--|--|-----------------------|--------------------------------------|--|
| Form W-2 Wage and Tax Statement  | t 2022                            |                  |  | 46   | 582.67                |                                      | 12.83  |
| c Employer's name, address, and ZIP code BRIGHAM YOUNG UNIVERSITY        |                                   | 8 Allocated tips | 3 Social security wages                              | 3 Social security wages 525.70                     |                       | 4 Social security tax withheld 32.59 |  |
| D-55 ASB   |                                   |                  | 9  | 5 Medicare wages and t                             | ips<br>525.70         | 6 Medicare tax                       | x withheld 7.62  |
| PROVO UT 84602   |                                   |                  | 10 Dependent care benefits                           | 11 Nonqualified plans                              | 323.70                | 12a See instru                       | actions for box 12   |
| e Employee's name, address, and ZIP code                                 |                                   |                  | 13 Statutory Retirement Third-par sick pay           | ty 14 Other  |                       | 12b                                  |  |
| EMILY ANN LOGAN  |                                   |                  | <b>b</b> Employer identification number              | (FIN)  |                       | 12c                                  |  |
| 1974 N 160 W APT 177   |                                   |                  | 87-0217280   | (EIIV)   |                       | Code                                 |  |
| PROVO UT 84604-7604  |                                   |                  | a Employee's social security no. 514-17-6289         |  |                       | 12d                                  |  |
| 15 State Employer's state ID no. UT   11691946-005-WTH                   | 16 State wages, tips, etc<br>4682 |                  | 17 State income tax 89.35                            | Local wages, tips, etc.                            | 19 Local inc          | come tax                             | 20 Locality name   |
| Copy B To Be Filed With Employee's FEDERAL 1                             | Tax Return                        | -                | This information is being fumished to                | the Internal Revenue Service.<br>OMB No. 1545-0008 |                       |                                      | of the Treasury - IRS Site at www.irs.gov/efile  |
|  |                                   |                  |  | This information is being furnishe                 | ed to the Internal Re |                                      |  |
|  |                                   |                  | 7 Social security tips                               | negligence penalty or other sand                   |                       |                                      | re required to file a tax return, a<br>e is taxable and you fail to report it<br>me tax withheld |
| Form W-2 Wage and Tax Statement c Employer's name, address, and ZIP code | t 2022                            |                  | 9 Allocated time                                     | 4  | 682.67                | 4 Social acquir                      | 12.83  |
| BRIGHAM YOUNG UNIVERSITY   |                                   |                  | 8 Allocated tips                                     | 3 Social security wages                            | 525.70                | 4 Social Secur                       | ity tax withheld 32.59   |
| D-55 ASB   |                                   |                  | 9  | 5 Medicare wages and t                             | ips<br>525.70         | 6 Medicare tax                       | x withheld 7.62  |
| PROVO UT 84602   |                                   |                  | 10 Dependent care benefits                           | 11 Nonqualified plans                              | 223170                | 12a See instru                       | ections for box 12   |
| e Employee's name, address, and ZIP code                                 |                                   |                  | 13 Statutory Retirement Third-par sick pay           | ty 14 Other  |                       | 12b                                  |  |
| EMILY ANN LOGAN  |                                   |                  | <b>b</b> Employer identification number              | (EIN)  |                       | 12c                                  |  |
| 1974 N 160 W APT 177   |                                   |                  | 87-0217280   |  |                       | Code                                 |  |
| PROVO UT 84604-7604  |                                   |                  | a Employee's social security no. 514-17-6289         |  |                       | 12d                                  |  |
| 15 State Employer's state ID no.   | 16 State wages, tips, etc         |                  | 17 State income tax 18                               | Local wages, tips, etc.                            | 19 Local inc          | come tax                             | 20 Locality name   |
| UT   11691946-005-WTH  |                                   | 2.67             | 89.35  |  |                       |                                      |  |
| Copy C For EMPLOYEE'S RECORDS (See Notice                                | s to Employee on ba               |                  | , py 5.,   | OMB No. 1545-0008                                  |                       | Бери. О                              | f the Treasury - IRS   |
| Form W-2 Wage and Tax Statement  | t 2022                            |                  | 7 Social security tips                               | 1 Wages, tips, other con                           | np.<br>682.67         | 2 Federal inco                       | me tax withheld 12.83  |
| c Employer's name, address, and ZIP code<br>BRIGHAM YOUNG UNIVERSITY     |                                   |                  | 8 Allocated tips                                     | 3 Social security wages                            | 525.70                | 4 Social secur                       | ity tax withheld 32.59   |
| D-55 ASB   |                                   |                  | 9  | 5 Medicare wages and t                             | ips                   | 6 Medicare tax                       | x withheld   |
| PROVO UT 84602   |                                   |                  | 10 Dependent care benefits                           | 11 Nonqualified plans                              | 525.70                | 12a                                  | 7.62   |
| e Employee's name, address, and ZIP code                                 |                                   |                  | 13 Statutory Retirement Third-par sick pay           |  |                       | Cog                                  |  |
| EMILY ANN LOGAN  |                                   |                  |  |  |                       | 12b                                  |  |
| 1974 N 160 W APT 177   |                                   |                  | <b>b</b> Employer identification number $87-0217280$ | (EIN)  |                       | 12c                                  |  |
| PROVO UT 84604-7604  |                                   |                  | a Employee's social security no. 514-17-6289         |  |                       | 12d                                  |  |
|  |                                   |                  | 514-17-0209  |  |                       | e<br>e                               |  |
| 15 State Employer's state ID no. UT   11691946-005-WTH                   | 16 State wages, tips, etc. 468    | c.<br>2.67       | 17 State income tax 89.35                            | Local wages, tips, etc.                            | 19 Local inc          | come tax                             | 20 Locality name   |
| Copy 2 To Be Filed With Employee's State, City,                          | or Local Income Ta                | r Return         | 1  | OMB No. 1545-0008                                  |                       | Dent o                               | of the Treasury - IRS  |
|  |                                   |                  |  |  |                       | 2000.0                               |  |
|  |                                   |                  |  |  |                       |                                      |  |
| Form W-2 Wage and Tax Statemen   | t 2022                            |                  | 7 Social security tips                               | 1 Wages, tips, other con                           | np.<br>682.67         | 2 Federal inco                       | me tax withheld<br>12.83   |
| c Employer's name, address, and ZIP code BRIGHAM YOUNG UNIVERSITY        |                                   |                  | 8 Allocated tips                                     | 3 Social security wages                            | 525.70                | 4 Social secur                       | ity tax withheld 32.59   |
| D-55 ASB   |                                   |                  | 9  | 5 Medicare wages and t                             | ips                   | 6 Medicare tax                       | x withheld   |
| PROVO UT 84602   |                                   |                  | 10 Dependent care benefits                           | 11 Nonqualified plans                              | 525.70                | 12a                                  | 7.62   |
| - Familia no la companya del trasse and 720                              |                                   |                  |  |  |                       | Coge                                 |  |
| e Employee's name, address, and ZIP code                                 |                                   |                  | 13 Statutory employee Plan Third-pair sick pay       | 14 Other   |                       | 12b                                  |  |
| EMILY ANN LOGAN<br>1974 N 160 W APT 177                                  |                                   |                  | <b>b</b> Employer identification number $87-0217280$ | (EIN)  |                       | 12c                                  |  |
| PROVO UT 84604-7604  |                                   |                  | a Employee's social security no.                     |  |                       | 12d                                  |  |
|  |                                   |                  | 514-17-6289  |  |                       | de                                   |  |
| 15 State Employer's state ID no. UT   11691946-005-WTH                   | 16 State wages, tips, etc         | 2.67             | 17 State income tax 89.35                            | Local wages, tips, etc.                            | 19 Local inc          | come tax                             | 20 Locality name   |
| Copy 2 To Be Filed With Employee's State, City,                          |                                   |                  |  | OMB No. 1545-0008                                  | 5206                  | Dont -                               | f the Treasury - IRS   |
| oop, a to be then with ampleyee a state, olly,                           | o. Local Income 18                | · c.url          | LU/  | C.VID 110. 1040-0000                               | 3200                  | Dehr. 0                              | o irodoury * ino   |