Control number 505500483 Employer's name, address and zip code The Research Foundation for SUNY PO Box 9 35 State Street Albany NY 12201-0009 Employee's first name and init Last Name Suffix Junwei Zhang				Employer identification number 14-1368361 Employee's SSN 728-32-7167 7 Social security tips 8 Allocated tips		COPY B To Be Filed With Employee's FEDERAL Tax Return		
						1 Wages, tips, other compensation 7454.50		2 Federal income tax withheld 1021.38
						3 Social security wages		4 Social security tax withheld
						5 Medicare wages and tips		6 Medicare tax withheld
						10 Dependent care benefits		11 Nonqualified plans
6 Middle Lane Centereach NY 11720				12a DD 404.52				14 Other
				12b 1404.32		13 Statutory Employee		14 Other
				12c		Retirement Plan		
Employee's address and ZIP code				12d		Third-party sick pay		
15 State NY	Employer's State ID number 14-1368361	16 State wages, tips etc. 7454.50	17 S	tate income tax 274.08	18 Local wages,	tips etc.	19 Local income tax	20 Locality name
This information is	s being furnished to the Internal Revenue	Service						
	ge and Tax Statement 2015	OMB No. 1545	-0008					reasury - Internal Revenue Service
Control number 505500483				Employer identification number 14-1368361		COPY C For Employee's Records (Copy B)		s (See Notice to Employee on back of
Employer's name, address and zip code The Research Foundation for SUNY PO Box 9 35 State Street Albany NY 12201-0009				Employee's SSN 728-32-7167		1 Wages, tips, other compensation 7454.50		2 Federal income tax withheld 1021.38
				7 Social security tips		3 Social security wages		4 Social security tax withheld
				8 Allocated tips		5 Medicare wages and tips		6 Medicare tax withheld
Employee's first name and init Last Name Suffix Junwei Zhang				9		10 Dependent care benefits		11 Nonqualified plans
6 Middl				12a DD	1 404.52			14 Other
Centereach NY 11720				12b	1	13 Statutory Employee		
				12c	<u> </u>	Retireme	ent Plan	
Employee's address and ZIP code				12d	l .	Third-par	ty sick pay	
15 State NY	Employer's State ID number 14-1368361	16 State wages, tips etc. 7454.50	17 S	tate income tax 274.08	18 Local wages,	tips etc.	19 Local income tax	20 Locality name
	s being furnished to the Internal Revenue							
Control numb	ge and Tax Statement 2015 per	OMB No. 1545-	0008	Employer identifica	tion number	Copy 1 To 1		internal Revenue Service ee's State, City, or Local Income Tax
505500483 Employer's name, address and zip code The Research Foundation for SUNY PO Box 9 35 State Street Albany NY 12201-0009				14-1368361 Employee's SSN		Return 1 Wages, tips, other compensation		2 Federal income tax withheld
				728-32-7167		7454.50		
				7 Social security tips		2 Cooint con	neity morac	1021.38
					os .	3 Social sect		4 Social security tax withheld
Employee's first name and init Last Name Suffix Junwei Zhang				8 Allocated tips	os .		wages and tips	
		Suffix			os	5 Medicare		4 Social security tax withheld
Junwei 6 Middl	Zhang	Suffix		8 Allocated tips	i 404.52	5 Medicare	wages and tips	4 Social security tax withheld 6 Medicare tax withheld
Junwei 6 Middl	Zhang .e Lane	Suffix		8 Allocated tips		5 Medicare 10 Depende 13 Statutory	wages and tips ent care benefits Employee	Social security tax withheld Medicare tax withheld Nonqualified plans
Junwei 6 Middl	Zhang .e Lane	Suffix		8 Allocated tips 9 12a DD 12b 12c		5 Medicare 10 Depende 13 Statutory Retireme	wages and tips ent care benefits Employee	Social security tax withheld Medicare tax withheld Nonqualified plans
Junwei 6 Middl Centere Employee	Zhang Le Lane Pach NY 11720 's address and ZIP code		17.0	8 Allocated tips 9 12a DD 12b 12c 12d	404.52 	5 Medicare 10 Depende 13 Statutory Retireme Third-par	wages and tips ent care benefits Employee ent Plan ty sick pay	Social security tax withheld Medicare tax withheld In Nonqualified plans In Other
Junwei 6 Middl Centere	Zhang Le Lane Pach NY 11720	Suffix Suffix 16 State wages, tips etc. 7454.50	17 S	8 Allocated tips 9 12a DD 12b 12c		5 Medicare 10 Depende 13 Statutory Retireme Third-par	wages and tips ent care benefits Employee	Social security tax withheld Medicare tax withheld Nonqualified plans
Junwei 6 Middl Centere Employee 15 State NY	zhang le Lane each NY 11720 's address and ZIP code Employer's State ID number 14-1368361	16 State wages, tips etc. 7454.50	17 S	8 Allocated tips 9 12a DD 12b 12c 12d tate income tax	404.52 	5 Medicare 10 Depende 13 Statutory Retireme Third-par	wages and tips ent care benefits Employee ent Plan ty sick pay	Social security tax withheld Medicare tax withheld In Nonqualified plans A Other
Junwei 6 Middl Centere Employee 15 State NY This information is	Zhang Le Lane Lach NY 11720 's address and ZIP code Employer's State ID number 14-1368361 s being furnished to the Internal Revenue	16 State wages, tips etc. 7454.50		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax	404.52 	5 Medicare 10 Depende 13 Statutory Retireme Third-par	wages and tips ent care benefits Employee ent Plan ty sick pay 19 Local income tax	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name
Junwei 6 Middl Centere Employee 15 State NY This information is Form W-2 Wa Control number	Zhang Le Lane each NY 11720 's address and ZIP code Employer's State ID number 14-1368361 s being furnished to the Internal Revenue ge and Tax Statement 2015	16 State wages, tips etc. 7454.50		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification	1 404.52 1 1 1 18 Local wages,	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc.	wages and tips ent care benefits Employee ent Plan ty sick pay 19 Local income tax Department of the Tr	Social security tax withheld Medicare tax withheld In Nonqualified plans In Other
Junwei 6 Middl Centere Employee 15 State NY This information is Form W-2 Wa Control number 505500483 Employer'	Zhang Le Lane Lach NY 11720 I's address and ZIP code Employer's State ID number 14-1368361 Is being furnished to the Internal Revenue ge and Tax Statement 2015 Is name, address and zip code	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN	1 404.52 1 1 1 18 Local wages,	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc. Copy 2 To Be 1 Wages, ti	wages and tips ent care benefits Employee ent Plan ty sick pay 19 Local income tax Department of the Tr	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name easury - Internal Revenue Service tate, City, or Local Income Tax Return 2 Federal income tax withheld
Employee 15 State NY This information is Form W-2 Wa Control number 505500483 Employer' The Res PO Box	Zhang Le Lane Bach NY 11720 's address and ZIP code Employer's State ID number 14-1368361 Is being furnished to the Internal Revenue ge and Tax Statement 2015 St name, address and zip code Bearch Foundation for SU 9	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361	1 404.52	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc.	wages and tips ent care benefits Employee ent Plan ty sick pay 19 Local income tax Department of the Trifited With Employee's S ps, other compensation	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name
Employee 15 State NY This information is Control number 505500483 Employer' The Res PO Box 35 State	Zhang Le Lane each NY 11720 's address and ZIP code Employer's State ID number 14-1368361 s being furnished to the Internal Revenue ge and Tax Statement 2015 's name, address and zip code learch Foundation for SU	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN 728-32-7167	1 404.52	5 Medicare 10 Depende 13 Statutory Retireme Third-partips etc. Copy 2 To Be 1 Wages, tip 7454.50 3 Social sect	wages and tips ent care benefits Employee ent Plan ty sick pay 19 Local income tax Department of the Trifited With Employee's S ps, other compensation	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name 2 Federal income Tax Return 2 Federal income tax withheld 1021.38
Employee 15 State NY This information in Form W-2 Wa Control number 505500483 Employer The Res PO Box 35 Stat Albany Employee	Zhang Le Lane Lach NY 11720 I's address and ZIP code Employer's State ID number 14-1368361 Is being furnished to the Internal Revenue ge and Tax Statement 2015 Is name, address and zip code Le Street NY 12201-0009 I's first name and init Last Name	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN 728-32-7167 7 Social security tip	1 404.52	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc. Copy 2 To Be 1 Wages, ti 7454.50 3 Social sect 5 Medicare	wages and tips ent care benefits Employee ent Plan ty sick pay 19 Local income tax Department of the Tre Filed With Employee's S ps, other compensation urity wages	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name 21 Local Income Service tate, City, or Local Income Tax Return 2 Federal income tax withheld 1021.38 4 Social security tax withheld
Junwei 6 Middl Centere Employee 15 State NY This information is Form W-2 Wa Control number 505500483 Employer The Res PO Box 35 Stat Albany	Zhang Le Lane Lach NY 11720 Saddress and ZIP code Employer's State ID number 14-1368361 Substitute being furnished to the Internal Revenue ge and Tax Statement 2015 Saname, address and zip code Learch Foundation for SU 9 Les Street NY 12201-0009 Safirst name and init Last Name Zhang	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN 728-32-7167 7 Social security tip 8 Allocated tips 9	1 404.52 1 1 18 Local wages, a number	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc. Copy 2 To Be 1 Wages, ti 7454.50 3 Social sect 5 Medicare 10 Depende	wages and tips ent care benefits Employee ent Plan 19 Local income tax Department of the Tr Filed With Employee's S ps, other compensation urity wages wages and tips ent care benefits	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name 2 Federal income Tax Return 2 Federal income tax withheld 1021.38 4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans
Employee 15 State NY This information in the state of t	Zhang Le Lane Lach NY 11720 Saddress and ZIP code Employer's State ID number 14-1368361 Substitute being furnished to the Internal Revenue ge and Tax Statement 2015 Saname, address and zip code Learch Foundation for SU 9 Les Street NY 12201-0009 Safirst name and init Last Name Zhang	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN 728-32-7167 7 Social security tip 8 Allocated tips 9 12a DD	1 404.52	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc. Copy 2 To Be 1 Wages, ti 7454.50 3 Social sect 5 Medicare	wages and tips ent care benefits Employee ent Plan 19 Local income tax Department of the Tr Filed With Employee's S ps, other compensation urity wages wages and tips ent care benefits	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name 2 Locality name 2 Federal income Tax Return 2 Federal income tax withheld 1021.38 4 Social security tax withheld 6 Medicare tax withheld
Employee 15 State NY This information in the state of t	Zhang Le Lane Lach NY 11720 The saddress and ZIP code Employer's State ID number 14-1368361 Substitute of the Internal Revenue ge and Tax Statement 2015 The saddress and zip code Learch Foundation for SU 9 Le Street NY 12201-0009 The saddress and init Last Name Zhang Le Lane	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN 728-32-7167 7 Social security tip 8 Allocated tips 9 12a DD 12b	1 404.52 1 1 18 Local wages, a number	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc. Copy 2 To Be 1 Wages, ti 7454.50 3 Social sect 5 Medicare 10 Depende	wages and tips ent care benefits Employee	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name 2 Federal Income Tax Return 2 Federal income tax withheld 1021.38 4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans
Employee 15 State NY This information is Control number 505500483 Employer The Res PO Box 35 Stat Albany Employee Junwei 6 Middl Centere	Zhang Le Lane Lach NY 11720 Is address and ZIP code Employer's State ID number 14-1368361 Is being furnished to the Internal Revenue ge and Tax Statement 2015 Is name, address and zip code Learch Foundation for SU 9 Le Street NY 12201-0009 Is first name and init Last Name Zhang Le Lane Lach NY 11720	16 State wages, tips etc. 7454.50 Service OMB No. 1545		8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN 728-32-7167 7 Social security tip 8 Allocated tips 9 12a DD	1 404.52 1 1 18 Local wages, a number	5 Medicare 10 Depende 13 Statutory Retireme Third-partips etc. Copy 2 To Be 1 Wages, tip 7454.50 3 Social sect 5 Medicare 10 Depende 13 Statutory Retireme	wages and tips ent care benefits Employee	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name 2 Federal income Tax Return 2 Federal income tax withheld 1021.38 4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans
Employee 15 State NY This information is Control number 505500483 Employer The Res PO Box 35 Stat Albany Employee Junwei 6 Middl Centere	Zhang Le Lane Lach NY 11720 The saddress and ZIP code Employer's State ID number 14-1368361 Substitute of the Internal Revenue ge and Tax Statement 2015 The saddress and zip code Learch Foundation for SU 9 Le Street NY 12201-0009 The saddress and init Last Name Zhang Le Lane	16 State wages, tips etc. 7454.50 Service OMB No. 1545	-0008	8 Allocated tips 9 12a DD 12b 12c 12d tate income tax 274.08 Employer identification 14-1368361 Employee's SSN 728-32-7167 7 Social security tip 8 Allocated tips 9 12a DD 12b 12c	1 404.52 1 1 18 Local wages, a number	5 Medicare 10 Depende 13 Statutory Retireme Third-par tips etc. Copy 2 To Be 1 Wages, ti 7454.50 3 Social sect 5 Medicare 10 Depende 13 Statutory Retireme Third-par	wages and tips ent care benefits Employee	4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans 14 Other 20 Locality name 20 Locality name 2 Federal income Tax Return 2 Federal income tax withheld 1021.38 4 Social security tax withheld 6 Medicare tax withheld 11 Nonqualified plans

Department of the Treasury - Internal Revenue Service

Form W-2 Wage and Tax Statement 2015

This information is being furnished to the Internal Revenue Service

OMB No. 1545-0008

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 2015 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 2015 or if income is earned for services provided while you were an inmate at a penal institution. For 2015 income limits and more information, visit www.irs.gov/eitc. Also see 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.

Clergy and religious workers. If you are not subject to social security and Medicare taxes, see Publication 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 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 also may 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 2015 and more than \$7,347 in social security and/or Tier I railroad retirement (RRTA) 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 \$4,321.80 in Tier II RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 or Form 1040A instructions and Publication 505, Tax Withholding and Estimated Tax.

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 boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your 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 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. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. 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 \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

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)

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 \$18,000 (\$12,500 if you only have SIMPLE plans; \$21,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$18,000. Deferrals under code H are limited to \$7,000. However, if you were at least age 50 in 2015, your employer may have allowed an additional deferral of up to \$6,000 (\$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 "Wages, Salaries, Tips, etc." line instructions for Form 1040.

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. See "Other Taxes" in the Form 1040 instructions.
- B Uncollected Medicare tax on tips. Include this tax on Form 1040. See "Other Taxes" in 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 "Adjusted Gross Income" in 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 "Other Taxes" in 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 "Other Taxes" in the Form 1040 instructions.
- N Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.
- P Excludable moving expense reimbursements paid directly to employee (not included in boxes 1, 3, or 5)
- Q Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A 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 (not included in box 1)
- T Adoption benefits (not included in box 1). Complete form 8839, Qualified Adoption Expenses, to compute 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 and instructions for Schedule D (Form 1040) 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 "Other Taxes" in 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.
- 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, 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 RRTA compensation, Tier I tax, Tier 2 tax, Medicare tax and Additional Medicare Tax.
- **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.