2024 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement Copy C for employee's record Control number Dept. Corp. Employer use only 005079 LOS2/SER 006035

Employer's name, address, and ZIP code SERVICENOW INC 2225 LAWSON LANE SANTA CLARA CA 95054

Batch #03441

e/f Employee's name, address, and ZIP code

COLBY A BLAKEMAN 1388 KETTNER BLVD **UNIT 701**

SAN DIEGO CA 92101 Employer's FED ID number Employee's SSA number 20-2056195 XXX-XX-9424 ages, tips, other comp Federal income tax withheld 846581.61 191118.75 Social security wages Social security tax withheld 168600.00 10453.20 Medicare wages and tips 6 Medicare tax withheld 867991.21 18597.79 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 535.68 23000.00 12b 14 Other 12c DD <u>8349.96</u> 2500 00 CAVPDI 1590 40 FSPDD 13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. 249-5938 9 CA 846581.61

Wages, tips, other comp 846581.61 191118.75 Social security wages 168600.00 Social security tax withheld 10453.20 Medicare tax withheld 18597.79 Medicare wages and tips 867991.21

18 Local wages, tips, etc.

Employer use only

836

20 Locality name

Employer's name, address, and ZIP code

82157.53

17 State income tax

19 Local income tax

Control number

005079 LOS2/SER

SERVICENOW INC 2225 LAWSON LANE SANTA CLARA CA 95054

006035

b	Employer's FED ID number 20-2056195	a Employee's SSA number XXX-XX-9424			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			benefits
11	Nonqualified plans	12a S	ee ir C	structio	ns for box 12 535.68
14	2500.00 CAVPDI	12b	D	2	3000.00
		12c [DD		8349.96
532284.33 RSU 1590.40 ESPDD		12d	Ī		
				Ret. plan	3rd party sick pay
		1 710			

e/f Employee's name, address and ZIP code

COLBY A BLAKEMAN 1388 KETTNER BLVD **UNIT 701** SAN DIEGO CA 92101

	Employer's state 249-5938 9	ID no.	16 S	tate wages, tips, etc. 846581.61
17 State	income tax		18 L	ocal wages, tips, etc.
	82157.5	53		
19 Loca	l income tax		20 L	ocality name
	Federal	Fili	na	Copy

Wage and Statement Copy B to be filed with employee's Federal Income Tax Retur This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	CA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	869 ,981 .93	869 ,981 .93	869 ,981 .93	869,981.93
Plus GTL (C-Box 12)	535 . 68	535 .68	535 .68	535 .68
Less Misc. Non Taxable Comp.	N/A	1,590.40	1,590.40	N/A
Less 401(k) (D-Box 12)	23,000.00	N/A	N/A	23,000.00
Less Other Cafe 125	936.00	936.00	936.00	936 .00
Wages Over Limit	N/A	699,391.21	N/A	N/A
Reported W-2 Wages	846,581.61	168,600.00	867,991.21	846,581.61

2. Employee Name and Address.

COLBY A BLAKEMAN 1388 KETTNER BLVD UNIT 701 SAN DIEGO CA 92101

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1 Wages, tips, other comp. 846581.61		2 Federal income tax withheld 191118.75			
3 Social security wages 168600.00			4 Social security tax withheld 10453.20		
5	Medicare wages an 8679	6 Medica	are tax withl	neld 3597.79	
d	Control number	Dept.	Corp.	Employer	use only
00	5079 LOS2/SER	006035		Α	836

c Employer's name, address, and ZIP code

SERVICENOW INC 2225 LAWSON LANE SANTA CLARA CA 95054

b	Employer's FED ID number 20-2056195	a Employee's SSA number XXX-XX-9424		
7	Social security tips	8 Allocated tips		
9		10 Dependent care benefits		
11	Nonqualified plans	12a C 535.68		
14	Other	^{12b} D 23000.00		
	2500.00 CAVPDI 532284.33 RSU	12c DD 8349.96		
		12d		
1590.40 ESPDD		13 Stat emp. Ret. plan 3rd party sick pay		

e/f Employee's name, address and ZIP code

COLBY A BLAKEMAN 1388 KETTNER BLVD **UNIT 701** SAN DIEGO CA 92101

15 State Employer's state ID no. 249-5938 9	16 State wages, tips, etc. 846581.61
17 State income tax	18 Local wages, tips, etc.
82157.53	
10. Local income tay	20 Locality name

CA.State Reference

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax

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1	Wages, tips, other comp. 846581.61			2 Federal income tax withheld 191118.75			
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3	Social security wages 168600.00			4 Social security tax withheld 10453.20			thheld 53.20
5	Medicare wages and tips 867991.21			Medica	re tax with		1 97.79
d	Control number	Dept.		Corp.	Employ	er u	se only
005079 LOS2/SER 006035				Α		836	

С Employer's name, address, and ZIP code **SERVICENOW INC** 2225 LAWSON LANE

SANTA CLARA CA 95054

Employer's FED ID number 20-2056195 a Employee's SSA number XXX-XX-9424 Social security tips Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a C 535.68 12b 14 Other ם 23000.00 12c DD 8349.96 2500.00 CAVPDI 12d

13 Stat emp

Ret. plan 3rd party sick pa

1590 40 ESPDD e/f Employee's name, address and ZIP code

COLBY A BLAKEMAN 1388 KETTNER BLVD **UNIT 701** SAN DIEGO CA 92101

CA State	Employer's state ID no. 249-5938 9	16 State wages, tips, etc. 846581.61
17 State	income tax	18 Local wages, tips, etc.
	82157.53	
19 Local	income tax	20 Locality name

CA.State Filing Copy

Wage and Statement Copy 2 to be filed with employee's State Income Tax