

2022

Wage and Tax Statement

W-2

Important: Attach this schedule to the back of your original or amended Form 540, Form 540 2EZ, or Form 540NR.**Caution:** If this schedule is filled out, **do not** send your federal Form(s) W-2 to the Franchise Tax Board. If your federal Form(s) W-2 are from multiple states, **attach** copies showing California tax withheld to this schedule. If this schedule is blank, attach your federal Form(s) W-2 to the lower front of your tax return. **DO NOT ATTACH PAYMENT TO THIS SCHEDULE.**

*Employee's social security number, name, and address must be the same as the information on federal Form(s) W-2.

W-2 Information

a. Employee's social security number *

☐ []

c. Employer's name

☐ UNITED STATES SENATE

b. Employer identification number (EIN)

☐ []

Employer's address

☐ []

City

☐ WASHINGTON

State

☐ DC

ZIP code

☐ 20510

e. Employee's first name *

☐ KAMALA

Initial *

☐ D

Last name *

☐ HARRIS

Suffix *

☐ []

f. Employee's address *

☐ []

City *

☐ []

State *

☐ []

ZIP code *

☐ []

Wages, tips, other compensation

1. ☐ 219,171

Social security tax withheld

4. ☐ 9,114

Allocated tips (not included in box 1)

8. ☐ []

Federal income tax withheld

2. ☐ 36,261

Medicare tax withheld

6. ☐ 3,626

Dependent care benefits

10. ☐ []

Social security wages

3. ☐ 147,000

Social security tips

7. ☐ []

Nonqualified plans

11. ☐ []

12. Codes and amounts

Code

Amount

12a. ☐ D ☐ 11,755

Code

Amount

12c. ☐ [] ☐ []

Code

Amount

12b. ☐ DD ☐ 6,366

Code

Amount

12d. ☐ [] ☐ []

13. Check the appropriate box for: Statutory employee, Retirement plan, or Third-party sick pay

☐ Statutory employee☒ Retirement plan☐ Third-party sick pay

14. SDI, VPDI, or CA SDI (from federal Form W-2, box 14 or 19)

Type

☐ []

Amount

☐ []

16. State wages, tips, etc.

☐ 219,171

15. State and employer's state ID number

State

☐ CA

Employer's state ID number

☐ []

17. State income tax

☐ 15,269Franchise Tax Board Privacy
Notice on CollectionOur privacy notice can be found in annual tax booklets or online. Go to ftb.ca.gov/privacy to learn about our privacy policy statement, or go to ftb.ca.gov/forms and search for 1131 to locate FTB 1131 EN-SP, Franchise Tax Board Privacy Notice on Collection - Aviso de Privacidad del Franchise Tax Board sobre la Recaudación. To request this notice by mail, call 800.338.0505 and enter form code 948 when instructed.