2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement Corp. Employer use only 01481827 WFV WGJ0 230431 Employer's name, address, and ZIP code STARBUCKS COFFEE COMPANY PO BOX 34442 MS S-TAX SEATTLE, WA 98124 e/f Employee's name, address, and ZIP code CHRISTINE MOYER 1210 KIRKLAND AVE KIRKLAND, WA 98033 Employer's FED ID number 91-1325671 a Employee's SSA number XXX-XX-4660 ages, tips, other comp Federal income tax withheld 226778.46 69290.22 Social security wages Social security tax withheld 160200.00 9932.40 Medicare wages and tips 6 Medicare tax withheld 2<u>46609.54</u> 3995.32 Social security tips 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 C | 1282.12 12b D | 18677.28 12c W | 1153.80 12d AA| 3822.72 11 Nonqualified plans 16314.68 RSU GAIN 157.64 WA WRK CMP 14 Other 13 Stat emp Ret. plan 3rd party sick par 15 State Employer's state ID no. 16 State wages, tips, etc.

18 Local wages, tips, etc.

Federal income tax withheld

Social security tax withheld 9932.40

69290.22

20 Locality name

17 State income tax

19 Local income tax

226778.46

Social security wages 160200.00

Federal

Filing

Statement

Wage and Tax

Copy

CHRISTINE MOYER 1210 KIRKLAND AVE KIRKLAND, WA 98033

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Wages, tips, other comp

Social security wages 160200.00

Medicare wages and tips 246609.54

d Control number

226778.46

Dept.

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Wages, tips, other comp

Social security wages 160200.00

226778.46

2 Federal income tax withheld

Social security tax withheld 9932.40

6 Medicare tax withheld 3995.32

Corp. Employer use only

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Medicare wages and tips 246609.54	6 Medicare tax withheld 3995.32			
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b Employer's FED ID number 91-1325671	a Employee's SSA number XXX-XX-4660			
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11 Nonqualified plans	12a See instructions for box 12 C 1282.12			
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	^{12c} W 1153.80			
	^{12d} AA 3822.72			
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e/f Employee's name, address CHRISTINE MOYER 1210 KIRKLAND AV KIRKLAND, WA 98	E			
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CHRISTINE MOYER 1210 KIRKLAND AVE KIRKLAND, WA 98033						
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19	Local	income tax		20 Local	ity name	
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W-2 Wage and Tax 2023 Statement OMB No. 1545-0008 Copy 2 to be filed with employee's State Income Tax Return.						

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6 Medicare tax withheld 3995.32		
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15 State Employer's state ID no. 16 State wages, tips, etc.

18 Local wages, tips, etc.

Copy

20 Locality name

Filing

Wage and Tax

Statement

17 State income tax

19 Local income tax

City or Local

Copy 2 to be filed with employee's City or Local

Social Security Number: XXX-XX-4660

2 Federal income tax withheld

4 Social security tax withheld 9932.40

69290.22