## Attention:

- By January 31, 2022, the Employer is responsible for providing the W-2 forms to the Employee and/or notifying the Employee they are available in the online payroll employee portal under "My History".
- The forms must be printed by the Employer or Employee through the online payroll employee portal.
- <u>Using a standard printer, you can print the forms on plain white paper</u>. No special paper or envelopes are required. However, the forms must be legible.
- W-2 forms will NOT be mailed by the payroll service provider.

### General Instructions for W-2 Distribution and Filing

- Copy 1 is for the Employee and is provided for informational purposes only. The Employee should keep this for their records as it is a copy of what has been submitted to the state, city, and local tax agencies (if required).
- Copy B is for the Employee and should be filed by the Employee with the IRS.
- · Copy C is for the Employee and is their copy to keep on file.
- · Copy 2 is for the Employee and should be filed by the Employee with the state, city or local income tax agencies.

Please note, if the Employee worked in multiple states, a W-2 form will be available for each state and the same instructions apply. For any questions or corrections regarding the form, the Employee must reach out to the Employer.

## W-2 Form Instructions

# Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't 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 2021 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 can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit <a href="https://www.irs.gov/EITC">www.irs.gov/EITC</a>. See also 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 aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and 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 aren't 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 800-772-1213. You may also visit the SSA website at <a href="https://www.SSA.gov.Cost of employer-sponsored health coverage">www.SSA.gov.Cost of employer-

## 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 Instructions for Forms 1040 and 1040-SR 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 box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR. 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 with adequate records 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. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. 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 your employer's plan limit is also included in box 1. See Form 2441. **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) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't 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 \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7,000. However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to \$6,500 (\$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 Instructions for Forms 1040 and 1040-SR. 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. -Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. B—Uncollected Medicare tax on tips Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the 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 the Instructions for Forms 1040 and 1040-SR for how to deduct. J—Nontaxable sick pay (information only, not included in box 1, 3, or 5) K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR. 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 the Instructions for Forms 1040 and 1040-SR. N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR. P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR 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 plan (not included in box 1) T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts. V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, 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 the Instructions for Forms 1040 and 1040-SR. 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. FF—Permitted benefits under a qualified small employer health reimbursement arrangement GG—Income from qualified equity grants under section 83(i) HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year. **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-A, Contributions to 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 railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filling 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.

55555	<b>a</b> Employee's social security number 790-63-3764	OMB No. 154	1545-0008				
<b>b</b> Employer identification number (EIN) 68-0535594			1 Waq	ges, tips, other compensation 19790.40	2 Federal income tax withheld 3075.99		
c Employer's name, address, and ZIP code  PVK CORPORATION			<b>3</b> Soc	cial security wages 19790.40	4 Social security tax withheld 1227.00		
44081 PIPELINE PLAZA			<b>5</b> Me	dicare wages and tips 19790.40	6 Medicare tax withheld 286.96		
SUITE 105-5 ASHBURN VA 20147			7 Soc	cial security tips	8 Allocated tips		
d Control number			9		10 Dependent care b	penefits	
e Employee's first name and initial		Suff.	<b>11</b> No	nqualified plans	12a		
PRUDHVI 44081 PIPELINE PLAZA	CHINTAREDDY		13 State emp	loyee plan sick pay	12b		
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ASHBURN VA 20147					12d C d e		
f Employee's address and ZIP coc  15 State Employer's state ID numb  VA 30680535594F001			ne tax 008.89	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
W O w	d Tay Statement		ד כ	Department of	f the Treasury—Internal I	Revenue Service	

Form **W-Z** Wage and Tax Statement

 $C \cap C \cap$ 

Copy 1—For State, City, or Local Tax Department

	a Employee's social security number 790-63-3764	OMB No. 154		Safe, accurate, FAST! Use	Visit the IRS website at www.irs.gov/efile		
b Employer identification number (EIN) 68-0535594			1 Waq	ges, tips, other compensation 19790.40	2 Federal income tax withheld 3075.99		
c Employer's name, address, and ZIP code PVK CORPORATION			<b>3</b> Soc	cial security wages 19790.40	4 Social security tax withheld 1227.00		
44081 PIPELINE PLAZA SUITE 105-5			5 Me	dicare wages and tips 19790.40	6 Medicare tax withheld 286.96		
ASHBURN VA 20147			<b>7</b> Soc	7 Social security tips 8 Allocated tips			
d Control number			9		10 Dependent care benefits		
e Employee's first name and initial			11 Nonqualified plans		12a See instructions for box 12		
44081 PIPELINE PLAZA	CHINTAREDDY		13 Statu	utory Retirement Third-party loyee plan sick pay	12b		
SUITE 315			<b>14</b> Oth	er	12c		
ASHBURN VA 20147					12d		
f Employee's address and ZIP code							
15 State         Employer's state ID numb           VA         30680535594F001	16 State wages, tips, etc. 19790.40		ne tax 008.89	18 Local wages, tips, etc.	19 Local income tax 20 Locality name		

Form **W-2** Wage and Tax Statement



Department of the Treasury-Internal Revenue Service

	a Employee's social security number 790-63-3764	OMB No. 154	5-0008	This information is being furnis are required to file a tax return may be imposed on you if this	shed to the li	nternal Revenu	ue Service. If you ther sanction
b Employer identification number (EIN) 68-0535594				may be imposed on you if this ges, tips, other compensation 19790.40	eral income t		
c Employer's name, address, and ZIP code PVK CORPORATION			<b>3</b> Soc	cial security wages 4 Social security tax withhel 19790.40 1227.			x withheld 1227.00
44081 PIPELINE PLAZA			<b>5</b> Me	5 Medicare wages and tips 19790.40 6 Medicare tax withheld 286			hheld 286.96
SUITE 105-5 ASHBURN VA 20147			<b>7</b> Soc	cial security tips	8 Allocated tips		
d Control number			9	9 10 Dependent care bene			benefits
e Employee's first name and initial Last name Su			<b>11</b> No	11 Nonqualified plans 12a See instructions for box 12			for box 12
PRUDHVI CHINTAREDDY  44081 PIPELINE PLAZA			13 Statutory Retirement Sick pay		12b		
SUITE 315			<b>14</b> Oth	er	12c		
ASHBURN VA 20147					12d		
f Employee's address and ZIP cod		T.= 2		I.a			I
15 State Employer's state ID numb VA 30680535594F001	16 State wages, tips, etc. 19790.40		ne tax 008.89 	18 Local wages, tips, etc.	19 Local in	ncome tax	20 Locality name
Form <b>W-2</b> Wage and Tax Statement			. T	Department of the Treasury—Internal Revenue Service  Safe, accurate,			

a Employee's social security number 790-63-3764 OMB No. 1545-0008 **b** Employer identification number (EIN) 1 Wages, tips, other compensation 2 Federal income tax withheld 68-0535594 19790.40 3075.99 c Employer's name, address, and ZIP code 3 Social security wages 4 Social security tax withheld 19790.40 1227.00 **PVK CORPORATION** 5 Medicare wages and tips 6 Medicare tax withheld 44081 PIPELINE PLAZA 19790.40 286.96 **SUITE 105-5** 7 Social security tips 8 Allocated tips ASHBURN VA 20147 d Control number 9 10 Dependent care benefits e Employee's first name and initial Last name 11 Nonqualified plans 12a CHINTAREDDY **PRUDHVI** 12b 44081 PIPELINE PLAZA 14 Other 12c SUITE 315 12d ASHBURN VA 20147 f Employee's address and ZIP code 16 State wages, tips, etc. 20 Locality name 15 State Employer's state ID number 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 30680535594F001 VA 19790.40 1008.89

FAST! Use

Copy C-For EMPLOYEE'S RECORDS

(See Notice to Employee on the back of Copy B.)