Copy B To Be Filed With Employee's FEDERAL Tax Return				2022	OMB No. 1545-0008	
a Employee soc. sec. no.		ges, tips, other comp. 331.85	2 Federal income tax withheld 55766.53			
796-78-6968 b Employer ID no. (EIN)		ial security wages	4 Social security tax withheld 9114.00			
46-2283648		dicare wages and tips	6 Medicare tax withheld 4505.85			
c Employer's name, address, and ZIP code						
JUSTWORKS EMPLOYMENT GROUP LLC						
P.O. BOX 7119 CHURCH STREET STATION						
NEW YORK, NY	100	08				
d Control number M398219						
e Employee's name, address, and ZIP code						
SANDEEP GOGADI						
50 NEPPERHAN ST 1106						
YONKERS, NY 10701						
7 Social security tips 0.00		8 Allocated tips 0.00				
		1 Nonqualified plans	12a Code See instr. for b DD 5484.		for box 12 34.75	
13 Statutory employee 14 Other NY-PFL 423.71			12b Code			
Retirement plan				12c Code		
Third-party sick pay	Third-party sick pay			12d Code		
AL R00908227 NY 462283648 15 State Employer's State				3695.05 13145.38 17 State income		
18 Local wages, tips, etc. 136077.20		16 State wages, tips, etc. 19 Local income tax 1484.35		20 Locality name YONKERS		

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return				2022	OMB No. 1545-0008
a Employee soc. sec. no.		ges, tips, other comp. 331.85	2 Federal income tax withheld 55766.53		
796-78-6968 b Employer ID no. (EIN)		ial security wages			
46-2283648	5 Med	licare wages and tips	6 Medicare tax withheld 4505.85		
46-2283648     268331.85     4505.85       c Employer's name, address, and ZIP code     2000     2000					
JUSTWORKS EM P.O. BOX 711 NEW YORK, NY	9 CH	URCH STREET S		LION	
d Control number M398219					
e Employee's name, addre	ess, and Z	IP code			
SANDEEP GOGA 50 NEPPERHAN YONKERS, NY	ST				
		8 Allocated tips 0.00			
		1 Nonqualified plans 0.00		2a Code DD 5484.7	
13 Statutory employee	e 14 Other NY-PFL 423.71		1:	2b Code	
Retirement plan			1:	2c Code	
Third-party sick pay			12d Code		
AL R0090822 NY 46228364 15 State Employer's State	48 268331.85			3695.05 13145.38 17 State income	-
18 Local wages, tips, etc. 136077.20		19 Local income tax 1484.35		20 Locality name YONKERS	
Form W-2 Wage and Tax	Statomor	1 2022		Dant of the "	

Form W-2 Wage and Tax Statement 2022 This information is being furnished to the Internal Revenue Service

Dept. of the Treasury - IRS

Form W-2 Wage and Tax Statement 2022

Dept. of the Treasury - IRS

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)				2022	OMB No. 1545-0008
a Employee soc. sec. no.		iges, tips, other comp. 331.85	2 Federal income tax withheld 55766.53		
796-78-6968 b Employer ID no. (EIN)		3 Social security wages 4 Social security tax 147000.00 9114.00			nheld
46-2283648	5 Me	dicare wages and tips 331.85	6 N	ledicare tax withheld	
c Employer's name, address, and ZIP code					
JUSTWORKS EMPLOYMENT GROUP LLC					
P.O. BOX 7119 CHURCH STREET STATION NEW YORK, NY 10008					
d Control number M398219					
e Employee's name, address, and ZIP code					
SANDEEP GOGADI					
50 NEPPERHAN ST 1106					
YONKERS, NY 10701					
7 Social security tips 0.00		8 Allocated tips 0.00			
		11 Nonqualified plans 12a Code 0.00 DD 54		34.75	
	14 Other JY-PFL 423.71			2b Code	
Retirement plan			12c Code		
Third-party sick pay			12d Code		
AL R0090822 NY 46228364 15 State Employer's State 18 Local wages, tips, etc.	8	87755.45 268331.85 16 State wages, tips, etc. 19 Local income tax		3695.05 13145.38 17 State income 20 Locality nam	tax
136077.20		1484.35		YONKERS	

Form W-2 Wage and Tax Statement 2022 Dept. of the Treasury - IRS This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

Copy 2 To Be Filed V City, or Local Incom		2022	OMB No. 1545-0008			
a Employee soc. sec. no.	1 Wages, tips, other comp. 268331.85			2 Federal income tax withheld 55766.53		
796-78-6968	3 Soc	ial security wages	4 S	ocial security tax with	iheld	
b Employer ID no. (EIN)				9114.00 6 Medicare tax withheld		
46-2283648	5 Medicare wages and tips 268331.85			4505.85		
c Employer's name, address, and ZIP code						
JUSTWORKS EME	PLOY	MENT GROUP LL	С			
P.O. BOX 7119	) CH	URCH STREET S	TAT	<b>FION</b>		
NEW YORK, NY	100	08				
d Control number M398219						
e Employee's name, addres	s, and Z	IP code				
SANDEEP GOGADI						
50 NEPPERHAN	ST	1106				
YONKERS, NY 10701						
		8 Allocated tips 0.00				
		11 Nonqualified plans 12a Code DD 54		34.75		
13 Statutory employee 14 Other NY-PFL 423.71			12b Code			
Retirement plan			12c Code			
Third-party sick pay			12d Code			
AL R009082278 87755.45				3695.05		
NY 462283648 15 State Employer's State ID #		268331.85		13145.38		
18 Local wages, tips, etc.		6 State wages, tips, etc. 9 Local income tax		17 State income tax 20 Locality name		
136077.20		1484.35		YONKERS	·	
Form W-2 Wage and Tax St	atemen	l 1t 2022		Dept. of the T	reasury - IRS	

## 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 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 2022 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 speci ed amount for 2022 or if income is earned for services provider while you were an inmate at a penal institution. For 2022 income limits and more information, visit *www.irs.gov/EITC.* 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.

**Employee's social security number (SSN).** For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and Social Security Administration (SSA).

**Clergy and religious workers.** If you aren't subject to social security and Medicare taxes, see Pub. 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 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 *www.SSA.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 2022 and more than \$9,114 in social security and/or Tier 1 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 \$5,350.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a refund on Form 843. See the Instructions for Form 843.

## 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 box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the 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 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 employer's plan limit is also included in box 1.

**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 box 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 \$20,500 (\$14,000 if you only have SIMPLE plans; \$23,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$20,500. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2022, 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 Form 1040 instructions.

**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 or 1040-SR. See the Form 1040 instructions..

 ${\bf B-} Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.$ 

 ${\bf 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 *(continued on next page)* 

## Instructions for Employee

## Box 12 (continued)

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 Form 1040 instructions 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 groupterm life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N- Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

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 Form 1040 instructions 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.

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).

 $\mathbf{Y-} \mathsf{Deferrals}$  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 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.

**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 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.