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| 4444 | | For Official Use Only ▶ OMB No. 1545-0008 | |
| a Employer's name, address, and ZIP code Auto Store, LLC 201 N Front Street Camden NJ 08102 | | c Tax year/Form corrected 2022 / W-2 | d Employee's correct SSN 035-65-3789 |
| | | e Corrected SSN and/or name (Check this box and complete boxes f and/or g if incorrect on form previously filed.) <input type="checkbox"/> | |
| | | Complete boxes f and/or g only if incorrect on form previously filed ▶ | |
| b Employer's Federal EIN 61-1752262 | | f Employee's previously reported SSN | |
| g Employee's previously reported name | | h Employee's first name and initial Jay B | Last name Meshram |
| | | Suff. 1150 North American Street 301 Philadelphia PA 19123 USA | |
| Note: Only complete money fields that are being corrected (exception: for corrections involving MQGE, see the Instructions for Forms W-2c and W-3c, boxes 5 and 6). | | i Employee's address and ZIP code | |
| Previously reported | | Correct information | |
| 1 Wages, tips, other compensation | 1 Wages, tips, other compensation | 2 Federal income tax withheld | 2 Federal income tax withheld |
| 3 Social security wages | 3 Social security wages | 4 Social security tax withheld | 4 Social security tax withheld |
| 5 Medicare wages and tips | 5 Medicare wages and tips | 6 Medicare tax withheld | 6 Medicare tax withheld |
| 7 Social security tips | 7 Social security tips | 8 Allocated tips | 8 Allocated tips |
| 9 | 9 | 10 Dependent care benefits | 10 Dependent care benefits |
| 11 Nonqualified plans | 11 Nonqualified plans | 12a See instructions for box 12 | 12a See instructions for box 12 |
| 13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/> | 13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/> | 12b | 12b |
| 14 Other (see instructions) | 14 Other (see instructions) | 12c | 12c |
| | | 12d | 12d |
| State Correction Information | | | |
| Previously reported | | Correct information | |
| 15 State PA | 15 State PA | 15 State | 15 State |
| Employer's state ID number 20102254 611752262 | | Employer's state ID number 20102254 611752262 | |
| 16 State wages, tips, etc. 19356.74 | 16 State wages, tips, etc. 75237.89 | 16 State wages, tips, etc. | 16 State wages, tips, etc. |
| 17 State income tax | 17 State income tax | 17 State income tax | 17 State income tax |
| Locality Correction Information | | | |
| Previously reported | | Correct information | |
| 18 Local wages, tips, etc. | 18 Local wages, tips, etc. | 18 Local wages, tips, etc. | 18 Local wages, tips, etc. |
| 19 Local income tax | 19 Local income tax | 19 Local income tax | 19 Local income tax |
| 20 Locality name | 20 Locality name | 20 Locality name | 20 Locality name |