| Copy B - Fo | r Employee's F | ederal Incon | ne Tax Return | | 2022 | OMB No. 1545-0008 | |
|----------------------------------|--|----------------------------------|---|--|---------------------------------------|----------------------|--|
| Employee's soo security numbe | ' ' | | ages, tips, other comp. 48107.03 | | 2 Federal income tax withheld 7064.18 | | |
| 397-35- Employer ID nu | | 3 Social security wages 55348.46 | | 4 Social security tax withheld 3431.59 | | | |
| | | edicare wages ar | nd tips 348.46 | 6 Medicare tax withheld 802.58 | | | |
| MHI Sha 20 Gree Ste 600 | ne, address, and ZIP red Servic nway Plz , TX 77046 | ces Amer | icas Inc | | | | |
| Control number | | | | | | | |
| | Sample Roprings, FI | | | 9 Adva | ance EIC payment | | |
| 10 Dependent care benefits 1 | | 11 Nonqualified | 1 Nonqualified plans | | | | |
| 12a C | | 121.16 | 13 Statutory employee Retirement plan 3rd-party sid | | | rd-party sick pa | |
| D DD | | 241.43 | | | | | |
| 12d W | | 649.88 | | | | | |
| | N/A | 1 | I/A | | N/A | A | |
| 15 State Employer's State ID# | | | 16 State wages, tips, etc. | | 17 State income tax | | |
| 18 Local wages, tips, etc. N/A | | | 19 Local income tax N/A | | 20 Locality name N/A | | |

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

Dept. of the Treasury - IRS

| Copy 2 - For Employee's State Income Tax Return | | | | | | 2022 | OMB No. 1545-0008 | |
|---|--|----------------------------|-------------------------|--|--------------------------------|---------|---------------------------------------|--|
| a Employee's social 1 Wa | | 1 Wage | ages, tips, other comp. | | 2 Federal income tax withheld | | | |
| security number | | | 48107.03 | | | 7064.18 | | |
| 397-35-3585 | | 3 Social security wages | | | 4 Social security tax withheld | | | |
| b Employer ID no | | 55348.46 | | | 3431.59 | | | |
| 81-3608 | 934 | 5 Medicare wages and tips | | | 6 Medicare tax withheld | | | |
| | | 55348.46 | | | 802.58 | | | |
| 20 Gree Ste 600 Houston | red Servenway Pl: | vice z | | icas Inc | | | | |
| d Control numbe 1019712 | 253656 | | | | | | | |
| 11858 W | me, address, an canth Mar Sample Springs, | ntri Roa | pragada d | a | | | | |
| 7 Social security tips | | | 8 Allocated tips | | 9 Advance EIC payment | | | |
| 10 Dependent care benefits | | 11 | 11 Nonqualified plans | | | | | |
| ^{12a} C | 121.16 | | 21.16 | 13 Statutory employee Retirement plan 3rd-party sick p | | | | |
| ^{12b} D | 7241.43 | | | 14 Other | | | | |
| 12c DD | 10600.59 | | | | | | | |
| 12d W | 3649.88 | | | | | | | |
| FL NOT | ' NEEDED | | | 48107.03 | | | · · · · · · · · · · · · · · · · · · · | |
| 15 State Employer's State ID# | | 16 State wages, tips, etc. | | 17 State income tax | | | | |
| 18 Local wages, tips, etc. | | 19 Local income tax | | 20 Locality name | | | | |
| NI / D | | | NI / A | | NT / A | | | |

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

| Copy C - | FOR EMPL | OYE | EE'S REC | CORDS ON | LY | 2022 OMB No. 1545-0008 | 3 | | |
|--|--|-------------|-----------------------|---|-----|--------------------------------------|---|--|--|
| a Employee's so security number | | Wage | s, tips, other c | omp. .07.03 | 2 F | ederal income tax withheld 7064.18 | | | |
| 397-35- b Employer ID n | | | | es 48.46 | 4 S | Social security tax withheld 3431.59 | | | |
| 81-3608 | 3934 5 | Medic | are wages an | d tips 48.46 | 6 M | dicare tax withheld 802.58 | | | |
| MHI Sha 20 Gree Ste 600 | me, address, and zared Servi enway Plz n, TX 7704 | ice | | cas Inc | | | | | |
| d Control number | 253656 | | | | | | | | |
| Shashik 11858 W | me, address, and it anth Mant I Sample I Springs, I | tri: Roa | pragada d | 1 | | | | | |
| 7 Social security tips 8 | | 8 <i>A</i> | 3 Allocated tips | | | 9 Advance EIC payment | | | |
| 10 Dependent care benefits 1 | | 11 | 11 Nonqualified plans | | | | | | |
| ^{12a} C | 121.16 | | 13 Statutory empl | Statutory employee Retirement plan 3rd-party sick pa ${ m X}$ | | | | | |
| 12b D | 7241.43 | | | 14 Other | | | | | |
| 12c DD | 10600.59 | | | | | | | | |
| 12d W | 3649.88 | | | | | | | | |
| FL NOT | NEEDED | | 48107.03 | | | _ | | | |
| 15 State Employer's State ID# 16 State | | | 16 State wag | es, tips, etc. | | 17 State income tax | | | |

19 Local income tax

N/A

Form W-2 Wage and Tax Statement

N/A

18 Local wages, tips, etc.

Dept. of the Treasury - IRS

N/A

20 Locality name