Employee   Reference   Copy Statement   Copy OMB No. 1545-0008     Copy C for employee's records.   Dept.   Corp.   Employer use only A   269     d Control number   Dept.   Corp.   Employer use only A   269     c Employer's name, address, and ZIP code   NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317   Batch #02459     e/f Employee's name, address, and ZIP code   RAJANI YERRA   13525   BARTRAM PARK BOULEVARD     UNIT 220   JACKSONVILLE FL 32258   b   Employer's FED ID number 23-2920053   2   Federal income tax withheld     1 Wages, tips, other comp.   a   Employee's SSA number XXX-XX-6493   13442.166     3 Social security wages   4   Social security tax withheld     104915.25   6   Medicare tax withheld     104915.25   6   Medicare tax withheld     104915.25   10   1521.27     7   Social security tips   8   Allocated tips     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 C 71.52     14   Other   12b DI 19470.000     12c DDI 15869.52   12d 1					
W-2   Wage and Tax Statement   20222 OMB No. 1545-0008     Copy C for employee's records.   Corp.   Employer use only A   269     04960   PITT/XC4   000521   Corp.   Employer use only A   269     c   Employer's name, address, and ZIP code   NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317   Batch #02459     e/f   Employee's name, address, and ZIP code   RAJANI YERRA 13525 BARTRAM PARK BOULEVARD UNIT 220     JACKSONVILLE   FL 32258     b   Employer's FED ID number 23-2920053   a   Employee's SSA number XXX-XX-6493     1   Wages, tips, other comp. 3   2   Federal income tax withheld 104915.25   6504.75     5   Medicare wages and tips 104915.25   6   Medicare tax withheld   1521.27     7   Social security tips   8   Allocated tips   1521.27     7   Social security tips   8   Allocated tips   12     11   Nonqualified plans   12a See instructions for box 12 Cl   71.52 T14 Other   13   13   13     15   State   Employer's state ID no. 16   16   18 Local wages, tips, etc.   17	Employee Ref	erence Copy			
V-Z   Statement   Zure     Copy C for employee's records.   Dept.   Corp.   Employer use only     104960   PITT/XC4   000521   A   269     c   Employer's name, address, and ZIP code   NESS USA INC   1000 TOWN CENTER WAY#210     0000   TOWN CENTER WAY#210   CANONSBURG PA 15317   Batch #02459     e/f   Employee's name, address, and ZIP code   RAJANI YERRA     13525   BARTRAM PARK BOULEVARD   UNIT 220     JACKSONVILLE   FL 32258   Employer's FED ID number   a     b   Employer's FED ID number   a   Employee's SSA number     23-2920053   2   YXX-XX-6493   13442.16     3   Social security wages   4   Social security tax withheld     104915.25   6   6504.75   6     5   Medicare wages and tips   6   Medicare tax withheld     104915.25   1521.27   7   Social security tips   8   Allocated tips     9   10   Dependent care benefits   11   12a See instructions for box 12   7     14   Other   12b   19470.00		ind Tax			
Copy C for employee's records.   OMB No. 1545-0008     d Control number   Dept.   Corp.   Employer use only     104960   PITT/XC4   000521   A   269     c   Employer's name, address, and ZIP code   NESS USA INC   1000 TOWN CENTER WAY#210     1000 TOWN CENTER WAY#210   CANONSBURG PA 15317   Batch #02459     e/f Employee's name, address, and ZIP code   RAJANI YERRA     13525   BARTRAM PARK BOULEVARD   UNIT 220     JACKSONVILLE   FL 32258     b Employer's FED ID number   a Employee's SSA number     23-2920053   2 Federal income tax withheld     104915.25   13442.16     3 Social security wages   4 Social security tax withheld     104915.25   6 Medicare tax withheld     104915.25   1521.27     7 Social security tips   8 Allocated tips     9   10 Dependent care benefits     11 Nonqualified plans   12a See instructions for box 12     12 C DDi   15869.52     12 A temp Ret.plan Brd party sick parts     13 State mployer's state ID no.   16 State wages, tips, etc.     FL   18 Local wages, tips, etc.	VV = Z				
d   Control number 104960   Dept. 000521   Corp. 000521   Employer use only A   269     c   Employer's name, address, and ZIP code NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317   Batch #02459     e/f   Employee's name, address, and ZIP code   Batch #02459     e/f   Employee's name, address, and ZIP code     RAJANI YERRA   13525   BARTRAM PARK BOULEVARD     10NIT 220   JACKSONVILLE FL 32258     b   Employer's FED ID number 23-2920053   a     1   Wages, tips, other comp. 85445.25   13442.16     3   Social security wages 104915.25   4   Social security tax withheld 104915.25     5   Medicare wages and tips 104915.25   6   Medicare tax withheld 15     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 C 1   71.52 12d 1     14   Other   12b D   19470.00 12c DDI   15869.52 12d 1     15   State Employer's state ID no. 16   16 State wages, tips, etc.     17   State income tax   18 Local wages, tips, etc.		OMB No. 1545-0008			
c   Employer's name, address, and ZIP code     NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317     Batch #02459     e/f Employee's name, address, and ZIP code     RAJANI YERRA     13525 BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b   Employer's FED ID number 23-2920053     1   Wages, tips, other comp.     2   Federal income tax withheld 104915.25     3   Social security wages 104915.25     5   Medicare wages and tips 104915.25     6   Medicare tax withheld 104915.25     7   Social security tips     8   Allocated tips     10   Dependent care benefits     11   Nonqualified plans     12a See instructions for box 12 C 1     13   Stat employer's state ID no. 16 State wages, tips, etc.     14   Other     15   State income tax     17   State income tax		Corp. Employer use only			
NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317     Batch #02459     e/f Employee's name, address, and ZIP code     RAJANI YERRA 13525 BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b Employer's FED ID number 23-2920053     1 Wages, tips, other comp.     2 Federal income tax withheld 104915.25     3 Social security wages 104915.25     5 Medicare wages and tips 104915.25     6 Medicare tax withheld 104915.25     7 Social security tips     8 Allocated tips     9     11 Nonqualified plans     12a See instructions for box 12 C 1 71.52     12b D1 19470.00 12c DD1 15869.52     13 State employer's state ID no. 16 State wages, tips, etc.     15 State   Employer's state ID no. 16 State wages, tips, etc.	104960 PITT/XC4 000521	A 269			
NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317     Batch #02459     e/f Employee's name, address, and ZIP code     RAJANI YERRA 13525 BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b Employer's FED ID number 23-2920053     1 Wages, tips, other comp.     2 Federal income tax withheld 104915.25     3 Social security wages 104915.25     5 Medicare wages and tips 104915.25     6 Medicare tax withheld 104915.25     7 Social security tips     8 Allocated tips     9     11 Nonqualified plans     12a See instructions for box 12 C 1 71.52     12b D1 19470.00 12c DD1 15869.52     13 Stat employer's state ID no. 16 State wages, tips, etc.     15 State Employer's state ID no. 16 State wages, tips, etc.	c Employer's name, address,	and ZIP code			
1000 TOWN CENTER WAY#210 CANONSBURG PA 15317     Batch #02459     e/f Employee's name, address, and ZIP code     RAJANI YERRA     13525   BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b   Employer's FED ID number 23-2920053   a Employee's SSA number XXX-XX-6493     1   Wages, tips, other comp. 2   Federal income tax withheld 6504.75     3   Social security wages 104915.25   4 Social security tax withheld 6504.75     5   Medicare wages and tips 104915.25   6 Medicare tax withheld 1521.27     7   Social security tips   8 Allocated tips     9   10 Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 C 1     14   Other   12b D 19470.00 12c DD 19470.00 12					
CANONSBURG PA 15317     Batch #02459     e/f Employee's name, address, and ZIP code     RAJANI YERRA     13525 BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b Employer's FED ID number     23-2920053     1 Wages, tips, other comp.     2 Federal income tax withheld     104915.25     5 Medicare wages and tips     10 Dependent care benefits     11 Nonqualified plans     12a See instructions for box 12     12b   19470.00     12c DDi   15869.52     13 Stat employer's state ID no.   16 State wages, tips, etc.     15 State   Employer's state ID no.   16 State wages, tips, etc.					
Batch #02459     e/f Employee's name, address, and ZIP code     RAJANI YERRA     13525 BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b Employer's FED ID number     a Employee's SSA number     23-2920053     1 Wages, tips, other comp.     2 Federal income tax withheld     104915.25     5 Medicare wages and tips     6 Medicare tax withheld     104915.25     7 Social security tips     8 Allocated tips     9     11 Nonqualified plans     12a See instructions for box 12 C 71.52     14 Other     12b D1     12b D1     13 Stat emp Ret.plan Brd party sick parts     15 State   Employer's state ID no.     16 State income tax   18 Local wages, tips, etc.					
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e/f Employee's name, address, and ZIP code RAJANI YERA 13525 BARTRAM PARK BOULEVARD UNIT 220 JACKSONVILLE FL 32258 b Employer's FED ID number 23-2920053 1 Wages, tips, other comp. 85445.25 3 Social security wages 104915.25 5 Medicare wages and tips 104915.25 5 Medicare wages and tips 104915.25 6 Medicare tax withheld 104915.25 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 11 Nonqualified plans 12 See instructions for box 12 C   71.52 12   19470.00 12 D   19470.00 12 D   19470.00 13 State employer's state ID no. 16 State mployer's state ID no. 16 State income tax 18 Local wages, tips, etc.					
RAJANI YERRA     13525   BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b   Employer's FED ID number 23-2920053     1   Wages, tips, other comp.     8   Social security wages     1   104915.25     5   Medicare wages and tips     6   Medicare tax withheld     104915.25   1521.27     7   Social security tips     8   Allocated tips     9   10 Dependent care benefits     11   Nonqualified plans     12a See instructions for box 12 Cl   71.52 74.000     14   Other     15   State     Fmployer's state ID no.   16 State wages, tips, etc.     FL   18 Local wages, tips, etc.		Batch #02459			
RAJANI YERRA     13525   BARTRAM PARK BOULEVARD     UNIT 220     JACKSONVILLE FL 32258     b   Employer's FED ID number 23-2920053     1   Wages, tips, other comp.     8   Social security wages     1   104915.25     5   Medicare wages and tips     6   Medicare tax withheld     104915.25   1521.27     7   Social security tips     8   Allocated tips     9   10 Dependent care benefits     11   Nonqualified plans     12a See instructions for box 12 Cl   71.52 74.000     14   Other     15   State     Fmployer's state ID no.   16 State wages, tips, etc.     FL   18 Local wages, tips, etc.					
13525   BARTRAM   PARK   BOULEVARD     UNIT   220   JACKSONVILLE   FL   32258     b   Employer's FED ID number   a   Employee's SSA number     23-2920053   a   Employee's SSA number     1   Wages, tips, other comp.   2   Federal income tax withheld     104915.25   13442.16   6504.75     5   Medicare wages and tips   6   Medicare tax withheld     104915.25   1521.27   1521.27     7   Social security tips   8   Allocated tips     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 Cl   71.52     14   Other   12b   19470.00     12c   DL   15869.52   12d     13   State emp Ret.plan and party sick parts   X     15   State   Employer's state ID no.   16     15   State income tax   18   Local wages, tips, etc.	e/f Employee's name, address,	and ZIP code			
UNIT 220     JACKSONVILLE FL 32258     b   Employer's FED ID number 23-2920053   a   Employee's SSA number XXX-XX-6493     1   Wages, tips, other comp. 85445.25   2   Federal income tax withheld     3   Social security wages 104915.25   4   Social security tax withheld     5   Medicare wages and tips 104915.25   6   Medicare tax withheld     7   Social security tips   8   Allocated tips     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 Cl   7     14   Other   12b   D   19470.00     12c   DI   15869.52   12d   1     13   State employer's state ID no.   16   State wages, tips, etc.     15   State   Employer's state ID no.   16   State wages, tips, etc.     17   State income tax   18   Local wages, tips, etc.	RAJANI YERRA				
UNIT 220     JACKSONVILLE FL 32258     b   Employer's FED ID number 23-2920053   a   Employee's SSA number XXX-XX-6493     1   Wages, tips, other comp. 85445.25   2   Federal income tax withheld     3   Social security wages 104915.25   4   Social security tax withheld     5   Medicare wages and tips 104915.25   6   Medicare tax withheld     7   Social security tips   8   Allocated tips     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 Cl   7     14   Other   12b   D   19470.00     12c   DI   15869.52   12d   1     13   State employer's state ID no.   16   State wages, tips, etc.     15   State   Employer's state ID no.   16   State wages, tips, etc.     17   State income tax   18   Local wages, tips, etc.	13525 BARTRAM PA	RK BOULEVARD			
JACKSONVILLE   FL   32258     b   Employer's FED ID number 23-2920053   a   Employee's SSA number XXX-XX-6493     1   Wages, tips, other comp. 85445.25   2   Federal income tax withheld     3   Social security wages 104915.25   4   Social security tax withheld     5   Medicare wages and tips 104915.25   6   Medicare tax withheld     7   Social security tips   8   Allocated tips     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 C 171.52     14   Other   12b   D 1   19470.00     12c   DI   15869.52   12d   I     13   State employer's state ID no.   16 State wages, tips, etc.   T     15   State   Employer's state ID no.   16 State wages, tips, etc.     17   State income tax   18 Local wages, tips, etc.		BOOLENING			
b   Employer's FED ID number 23-2920053   a   Employee's SSA number XXX-XX-6493     1   Wages, tips, other comp. 85445.25   2   Federal income tax withheld 13442.16     3   Social security wages 104915.25   4   Social security tax withheld 6504.75     5   Medicare wages and tips 104915.25   6   Medicare tax withheld 1521.27     7   Social security tips   8   Allocated tips 10 Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 C 171.52     14   Other   12b D 19470.00 12c DD 19470.00 12c DD 15869.52 12d I     15   State Employer's state ID no. FL   16 State wages, tips, etc.     17   State income tax   18 Local wages, tips, etc.		2250			
23-2920053     XXX-XX-6493       1     Wages, tips, other comp. 85445.25     2     Federal income tax withheld       3     Social security wages 104915.25     4     Social security tax withheld       5     Medicare wages and tips 104915.25     6     Medicare tax withheld       7     Social security tips     8     Allocated tips       9     10     Dependent care benefits       11     Nonqualified plans     12a See instructions for box 12 C 171.52       14     Other     12a See instructions for box 12 C 171.52       12     DI     19470.00       12c     DI     19470.00       12d     I     I3       13     State employer's state ID no.     16       15     State     Employer's state ID no.       15     State income tax     18       17     State income tax     18					
1   Wages, tips, other comp. 85445.25   2   Federal income tax withheld 13442.16     3   Social security wages 104915.25   4   Social security tax withheld 6504.75     5   Medicare wages and tips 104915.25   6   Medicare tax withheld 1521.27     7   Social security tips   8   Allocated tips     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 Cl   71.52 12b     14   Other   12b   19470.00 12c   12d     13   State employer's state ID no. FL   16   State wages, tips, etc.     17   State income tax   18   Local wages, tips, etc.					
3 Social security wages 104915.25 4 Social security tax withheld 6504.75   5 Medicare wages and tips 104915.25 6 Medicare tax withheld 1521.27   7 Social security tips 8 Allocated tips 10   9 10 Dependent care benefits 12a See instructions for box 12 Cl   11 Nonqualified plans 12a See instructions for box 12 Cl   14 Other 12b Dl   15 State Employer's state ID no. FL   17 State income tax 18 Local wages, tips, etc.					
3 Social security wages 104915.25 4 Social security tax withheld 6504.75   5 Medicare wages and tips 104915.25 6 Medicare tax withheld 1521.27   7 Social security tips 8 Allocated tips 10   9 10 Dependent care benefits 12a See instructions for box 12 Cl   11 Nonqualified plans 12a See instructions for box 12 Cl   14 Other 12b Dl   15 State Employer's state ID no. FL   17 State income tax 18 Local wages, tips, etc.	85445.25	13442.16			
5   Medicare wages and tips 104915.25   6   Medicare tax withheld 1521.27     7   Social security tips   8   Allocated tips     9   10   Dependent care benefits     11   Nonqualified plans   12a See instructions for box 12 C 1 71.52     14   Other   12b D 1 19470.00 12c DD 1 15869.52     12d   1     13   State employer's state ID no. FL   16 State wages, tips, etc.     17   State income tax   18 Local wages, tips, etc.	3 Social security wages				
104915.25     1521.27       7     Social security tips     8     Allocated tips       9     10 Dependent care benefits       11     Nonqualified plans     12a See instructions for box 12 Cl     71.52       14     Other     12b     D     19470.00       12     DD     19470.00     12c     DI     19470.00       14     Other     12c     DD     19470.00     12c     12d     1       13     State employer's state ID no.     16 State wages, tips, etc.     FL     17     State income tax     18 Local wages, tips, etc.					
7 Social security tips 8 Allocated tips   9 10 Dependent care benefits   11 Nonqualified plans 12a See instructions for box 12 C 71.52   14 Other 12b D 19470.00   12c DDi 15869.52   12d 1   13 State employer's state ID no.   16 FL   17 State income tax					
9 10 Dependent care benefits   11 Nonqualified plans 12a See instructions for box 12 C 71.52   14 Other 12b D 19470.00 12c DDI 15869.52   13 State emp Ret.plan 3rd party sick pa X   15 State Employer's state ID no. FL   17 State income tax 18 Local wages, tips, etc.		1521.27			
11 Nonqualified plans     12a See instructions for box 12 C   71.52       14 Other     12b D   19470.00       12c DDi     15869.52       12d       13 State emp Ret. plan 3rd party sick pa	7 Social security tips	8 Allocated tips			
11 Nonqualified plans     12a See instructions for box 12 C   71.52       14 Other     12b D   19470.00       12c DDi     15869.52       12d       13 State emp Ret. plan 3rd party sick pa	<b>A</b>				
Cl     71.52       14 Other     12b Dl     19470.00       12c DDl     15869.52     12d       12d     13     State employer's state ID no. 16 State wages, tips, etc.       17 State income tax     18 Local wages, tips, etc.	9	To Dependent care benefits			
Cl     71.52       14 Other     12b Dl     19470.00       12c DDl     15869.52     12d       12d     13     State employer's state ID no. 16 State wages, tips, etc.       17 State income tax     18 Local wages, tips, etc.	11 Nonqualified plans	12a See instructions for box 12			
14 Other 12c DDI 13869.52   12d I 13 State emp Ret. plan [3rd party sick party sick party]   15 State Employer's state ID no. 16 State wages, tips, etc.   FL 18 Local wages, tips, etc.	······quanica piano				
12d I   13 State employer's state ID no.   16 State wages, tips, etc.   FL I   17 State income tax	14 Other				
13 State emp Ret. plan Brd party sick party   15 State Employer's state ID no. 16 State wages, tips, etc.   17 State income tax 18 Local wages, tips, etc.					
15 State Employer's state ID no. 16 State wages, tips, etc.   FL 17 State income tax 18 Local wages, tips, etc.					
FL     Image: FL       17 State income tax     18 Local wages, tips, etc.		X			
		b. 16 State wages, tips, etc.			
19 Local income tax 20 Locality name	17 State income tax	18 Local wages, tips, etc.			
	19 Local income tax	20 Locality name			

# 2022 W-2 and EARNINGS SUMMARY



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

### 1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	FL. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	110,000.16	110,000.16	110,000.16	
Plus GTL (C-Box 12)	71.52	71.52	71.52	
Less 401(k) (D-Box 12)	19,470.00	N/A	N/A	
Less Medical FSA	0.03	0.03	0.03	
Less Other Cafe 125	5,156.40	5,156.40	5,156.40	
Reported W-2 Wages	85,445.25	104,915.25	104,915.25	

2. Employee Name and Address.

**RAJANI YERRA** 13525 BARTRAM PARK BOULEVARD **UNIT 220** JACKSONVILLE FL 32258

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1 Wages, tips, other comp. 85445.25	2 Federal income tax withheld 13442.16	1 Wages, tips, other comp. 85445.25	2 Federal income tax withheld 13442.16	1 Wages, tips, other comp. 85445.25	2 Federal income tax withheld 13442.16
3 Social security wages 104915.25	4 Social security tax withheld 6504.75	3 Social security wages 104915.25	4 Social security tax withheld 6504.75	<sup>3</sup> Social security wages 104915.25	4 Social security tax withheld 6504.75
5 Medicare wages and tips 104915.25	6 Medicare tax withheld 1521.27	5 Medicare wages and tips 104915.25	6 Medicare tax withheld 1521.27	5 Medicare wages and tips 104915.25	6 Medicare tax withheld 1521.27
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
104960 PITT/XC4 000521	A 269	104960 PITT/XC4 000521	A 269	104960 PITT/XC4 000521	A 269
c Employer's name, address, a	and ZIP code	c Employer's name, address, a	Ind ZIP code	c Employer's name, address, a	nd ZIP code
NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317 NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317		NESS USA INC 1000 TOWN CENTER WAY#210 CANONSBURG PA 15317			
b Employer's FED ID number 23-2920053	a Employee's SSA number XXX-XX-6493	b Employer's FED ID number 23-2920053	a Employee's SSA number XXX-XX-6493	b Employer's FED ID number 23-2920053	a Employee's SSA number XXX-XX-6493
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9 10 Dependent care benefits		9 10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12 C 71.52	11 Nonqualified plans	<sup>12a</sup> C 71.52	11 Nonqualified plans	<sup>12a</sup> C 71.52
14 Other	<sup>12b</sup> D 19470.00	14 Other	<sup>12b</sup> D   19470.00	14 Other	<sup>12b</sup> D 19470.00
	<sup>12c</sup> DD 15869.52		<sup>12c</sup> DD 15869.52		<sup>12c</sup> DD 15869.52
	12d		12d		12d
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pa
e/f Employee's name, address ar	nd ZIP code	e/f Employee's name, address and ZIP code		e/f Employee's name, address and ZIP code	
RAJANI YERRA		RAJANI YERRA		RAJANI YERRA	
13525 BARTRAM PAR		13525 BARTRAM PARK BOULEVARD		13525 BARTRAM PARK BOULEVARD	
UNIT 220	UN BOOLEVAND	UNIT 220		UNIT 220	UN DOOLETAND
JACKSONVILLE FL 32	258	JACKSONVILLE FL 32258		JACKSONVILLE FL 32258	
15 State Employer's state ID no	16 State wages, tips, etc.	15 State Employer's state ID no. 16 State wages, tips, etc.		15 State Employer's state ID no. 16 State wages, tips, etc.	
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fil	ing Copy	FL.State Reference Copy		FL.State Filing Copy	
W-2 Wage and Statemers	nd Tax 2022 ent OMB No. 1545-0008 ederal Income Tax Return.	W-2 Wage and Statement Copy 2 to be filed with employee's State		W-2 Wage a Stateme Copy 2 to be filed with employee's State	

### 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 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 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, 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.

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 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 Form 1040 instructions.

 $\ensuremath{\textbf{L-Substantiated}}$  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 Form 1040 instructions.

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

 $\begin{array}{l} \textbf{P-} \text{Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) \\ \textbf{Q-} \text{Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.} \end{array}$ 

**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 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, 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**, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

#### IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



## 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 specified amount for 2022 or if income is earned for services provided 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 the 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 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. See the Form 1040 instructions. If you had more than one railroad employer and more than \$5,350.80 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.