OMB No. 1545-0008	REISSUED STATEMENT			
d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld		
	6096.03	986.30		
b Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld		
13-5611741	13749.80	852.49		
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld		
211-90-3221	13749.80	199.37		

c Employer's name, address and ZIP code MUFG BANK, LTD. 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

7 Social security tips			8 Alloca	ated tips		9	
10 Dependent	care benefits		11 Non	qualified plans		12a	See instructions for box 12
						Code	5.84
12b			12c			12d	
p D	765	53.77	g DD		697.84	Code	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Othe	er			
	х						
e Employee's MEETHA	name, addres MYKALA	s and ZIP cod	e				

2038 W MARCONI AVE PHOENIX AZ 85023

	15 State Employ	er's state I.D. no.		16 State wages, tips, etc.
2022	AZ 13-	5611741	6096.03	
⁵ W-2				
Wage and Tax State	ement	17 State income tax		ocal wages, tips, etc.
Copy C - For EMPL		256.04		
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Employee on back of This information is being furn				
Internal Revenue Service. If	you are required	19 Local income tax	20 1	ocality name
to file a tax return, a negliger other sanction may be impos				
income is taxable and you fa	il to report it.			
Department of the Treasury - Internal Revenue Service	-			
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OMB No. 1545-0008		REISSUED STATEMEN	т	
d Control Number		1 Wages, tips, other compensation	n	2 Federal income tax withheld
		6096.	03	986.30
b Employer identification	n number (EIN)	3 Social security wages		4 Social security tax withheld
13-5611	1741	13749.	80	852.49
a Employee's social sec	urity number	5 Medicare wages and tips		6 Medicare tax withheld
211-90-	3221	13749.	13749.80	

c Employer's name, address and ZIP code MUFG BANK, LTD. 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

7 Social security tips				8 Allocated tips	S			9			
10 Dependent care benefits				11 Nonqualifie	d plans			12a 90 C		5.	84
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13 Statutory employee	Retire pla		Third-part sick pay								
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^ی W-2	2										
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Employee's State, City, or Local Income Tax Return.				19 Local income t	ax		20 L	ocality n			
Department of the Internal Revenue S	Treasury ervice	-									

OMB No. 1545-0008 REISSUED STATEMENT						
d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld				
	6096.03	986.30				
b Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld				
13-5611741	13749.80	852.49				
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld				
211-90-3221	13749.80	199.37				

c Employer's name, address and ZIP code MUFG BANK, LTD. 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

7 Social security tips			8 Alloca	ted tips			9		
10 Dependent	care benefits		11 Nonc	ualified plans			12a	See ins	structions for box 12
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e Employee's MEETHA	name, addres MYKALA	s and ZIP coo	le						
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2038 W MARCONI AVE PHOENIX AZ 85023

2025		ver's state I.D. no.		16 State wages, tips, etc.
	AZ 13-	5611741	6096.03	
[™] W-2				
Wage and Tax Sta	tement	17 State income tax	18	Local wages, tips, etc.
		256.04		
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This information is being furnished to the Internal Revenue Service.		19 Local income tax	20 l	_ocality name
Department of the Treasur Internal Revenue Service	y –			
OMB No. 1545-0008		REISSUED STATEMENT		
d Control Number		1 Wages, tips, other compensation		2 Federal income tax withheld
		6096.03	3	986.30
b Employer identificatio	n number (EIN)	3 Social security wages		4 Social security tax withheld
13-561	1741	13749.80	ן כ	852.49
a Employee's social see	curity number	5 Medicare wages and tips		6 Medicare tax withheld
211-90-	3221	13749.80	וכ	199.37

C Employed's name, address and ZIP code MUFG BANK, LTD. 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

7 Social security tips			8 Alloca	ited tips		9	
10 Dependent	care benefits		11 None	qualified plans		12a	
						D Code	5.84
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13 Statutory employee	Retirement plan	Third-party sick pay	14 Othe	er			
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2038 W MARCONI AVE

PHOENIX AZ 85023

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Wage and Tax Statement Copy 2 - To Be Filed With			17 State income tax 256.04	18 L	ocal wages, tips, etc.
Employee's State, Local Income Tax	City, d	or	19 Local income tax	20.1	ocality name
			19 Local income tax	20 L	ocality name
Department of the Treasury – Internal Revenue Service					

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 buy 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 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 ins gow/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 tax return**.

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 employed 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.

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 o 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 xitheld 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 Urreported 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 you 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 me 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

Instructions for Employee (Continued)

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 SMPLE plans; \$23,500 for section 4030) 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.

57,000. 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%(11) and 408(b); MME/E plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code 6, 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 to us 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 show, not the current year. If no year is shown, the contributions are for the current year. Al-Uncollected social security or RRT At ax on tps. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions. B—Uncollected Medicare tax on tps. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions. C—Taxable cost of group-term life instrance over \$50,000 (included in toxs on 150 or 1040 or 1040-SR. See the Form 1040 instructions. C—Taxable cost of group-term life instrance over \$50,000 (included and the size on to form 1040 or 1040-SR. See the Form 1040 instructions. C—Taxable cost of group-term life instrance over \$50,000 (included and the size on to form 1040 or 1040-SR. See the Form 1040 instructions C—Taxable cost of group-term life instrance over \$50,000 (included and the size of the deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a section 403(b) salary reduction agreement T—Elective deferrals under a section 403(b) salary reduction agreement T—Elective deferrals under a section 408(b)(6) salary reduction SEP

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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 8339, 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 889, Health Savings Accounts (HSAs). V—Deferrals under a section 409A nonqualified deferred compensation plan T_—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

-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, lego 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.

OMB No. 1545-0008	REISSUED STATEMENT	
d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld
	128773.44	25760.57
b Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld
94-0304228	131480.79	8151.81
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld
211-90-3221	131480.79	1906.47

c Employer's name, address and ZIP code MUFG UNION BANK, N.A.

1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a instructions for box 12 g C 63.52 12b B D 13 Statutory employee 12c 12d 2707.35 ğw 750.00 g DD 7676.24 Third-party sick pay Retirement 14 Othe plan Х

e Employee's name, address and ZIP code MEETHA MYKALA

2038 W MARCONI AVE

PHOENIX AZ 85023

	15 State Employ	er's state I.D. no.		16 State wages, tips, etc.	
2025	AZ 94-	0304228	128773.44		
[™] W-2					
Wage and Tax Sta	tement	17 State income tax	18 L	ocal wages, tips, etc.	
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Department of the Treasury Internal Revenue Service					
OMB No. 1545-0008		REISSUED STATEMENT			
d Control Number		1 Wages, tips, other compensation		2 Federal income tax withheld	
		128773.4	4	25760.57	
b Employer identification	on number (EIN)	3 Social security wages		4 Social security tax withheld	
94-030	4228	131480.7	9	8151.81	
a Employee's social se	curity number	5 Medicare wages and tips		6 Medicare tax withheld	
211-90-	-3221	131480.7	131480.79		

Employer's name, address and ZIP code MUFG UNION BANK, N.A.
 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

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7 Social security tips			8 Allocated t	ips		9	
10 Dependent	care benefit	s	11 Nonqualit	ied plans		12a	
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13 Statutory employee	Retirement plan	t Third-party sick pay	/ 14 Other				
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	15	State Employ	er's state I.D. no			16 Stat	e wages, tips, etc.
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			17 State income	e tax	18 L	ocal wag	es, tips, etc.
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Department of the Treasury -Internal Revenue Service

REISSUED STATEMENT OMB No. 1545-0008 d Control Number Wages, tip 128773.44 25760.57 b Employer identification number (EIN) curity wages curity tax withheld Social So 131480.79 8151.81 94-0304228 a Employee's social security number Medicare wages and tips 6 Medicare tax withheld 211-90-3221 131480.79 1906.47

c Employer's name, address and ZIP code MUFG UNION BANK, N.A. 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

7 Social security tips			8 Allocated tips			9	9		
10 Dependent care benefits			11 None	qualified plans		12a	See instructions for box 12		
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2038 W MARCONI AVE PHOENIX AZ 85023

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W-2						
Wage and Tax Statement			17 State income tax 5408.47	18	Local wages, tips, etc.	
Copy B - To Be Filed With Employee's FEDERAL Tax Return.						
This information is being furnished to the Internal Revenue Service.			19 Local income tax 20		_ocality name	
Department of the Treasury – Internal Revenue Service						
OMB No. 1545-0008			REISSUED STATEMENT			
d Control Number			1 Wages, tips, other compensation 128773.44		2 Federal income tax withheld 25760.57	
b Employer identification number (EIN) 94-0304228			³ Social security wages 131480.79		4 Social security tax withheld 8151.81	
a Employee's social security number 211-90-3221			5 Medicare wages and tips 131480.79		6 Medicare tax withheld 1906.47	

c Employer's name, address and ZIP code MUFG UNION BANK, N.A. 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020

7 Social security tips			8 Alloca	ated tips		9		
10 Dependent care benefits			11 Non	qualified plans		12a		
					D Code	63.52		
12b			12c			12d		
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13 Statutory employee	Retirement plan X	Third-party sick pay	14 Othe	er				
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MEETHA MYKALA 2038 W MARCONI AVE

PHOENIX AZ 85023

5055			yer's state I.D. no. 0304228	16 State wages, tips, etc. 128773.44		
™ W-2						
Wage and Tax Statement Copy 2 - To Be Filed With			17 State income tax 5408.47	ocal wages, tips, etc.		
Employee's State, City, or Local Income Tax Return.		19 Local income tax 2		20 Locality name		
Department of the Treasury – Internal Revenue Service						

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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 employed 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.

Instructions for Employee

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Instructions for Employee (Continued)

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 SMPLE plans; \$23,500 for section 4030) 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.

57,000. 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%(11) and 408(b); MME/E plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code 6, 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 to us 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 show, not the current year. If no year is shown, the contributions are for the current year. Al-Uncollected social security or RRT At ax on tps. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions. B—Uncollected Medicare tax on tps. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions. C—Taxable cost of group-term life instrance over \$50,000 (included in toxs on 150 or 1040 or 1040-SR. See the Form 1040 instructions. C—Taxable cost of group-term life instrance over \$50,000 (included and the size on to form 1040 or 1040-SR. See the Form 1040 instructions. C—Taxable cost of group-term life instrance over \$50,000 (included and the size on to form 1040 or 1040-SR. See the Form 1040 instructions C—Taxable cost of group-term life instrance over \$50,000 (included and the size of the deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a section 403(b) salary reduction agreement T—Elective deferrals under a section 403(b) salary reduction agreement T—Elective deferrals under a section 408(b)(6) salary reduction SEP

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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 8339, 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 889, Health Savings Accounts (HSAs). V—Deferrals under a section 409A nonqualified deferred compensation plan T_—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

-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, lego 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.