



2023 Earnings Summary and W-2 Forms

Dear Mohammed Khalid,

While it's the beginning of a new year, it's important to look back. The following summary is a reflection of your total 2023 earnings and the tax that was withheld from your pay. This page summarizes all the important information contained in your W-2.

Additionally, we've included the following filing instructions for your benefit:

- Copy B should be filed with your federal tax return
- Copy 2 should be filed with your state and/or local tax return
- Keep Copy C for your personal records

1. Your W-4 Profile:

Mohammed Khalid Iqbal
7 Granny Apple Circle
Ridge NY 11961

Social Security Number:
674-09-6532
Marital Status:
Head of Household

Exemptions/Withholding
Federal: \$0.00
State: 0
Local:

2. Your 2023 Year-to-Date Pay Stub:

Gross wages: \$197,744.43

These are the taxes withheld from your gross pay:

Federal Income Tax: (Box 2)	\$37,776.12	State Tax: (Box 17)	\$12,256.78
Social Security Tax: (Box 4)	\$9,932.39	Local Income Tax: (Box 19)	
Medicare Tax: (Box 6)	\$2,846.40	SUI/SDI: (Box 14)	\$422.82

Total Tax Withheld: \$63,234.51

3. Your W-2 and Gross Wages explained:

You will notice that there might be a difference between your gross wages above and the taxable wages listed on your W-2. That's because you may have some deductions that are pre-tax, ultimately lowering your taxable income. And/or you may have reached the limit of taxable income for a specific tax, making the rest non-taxable wages. See the breakdown below.

	<u>Non-taxable</u>	<u>Taxable wages</u> (reported on W-2)
Wages, tips, other compensation: (Box 1)	\$12,863.08	\$184,881.35
Social security wages: (Box 3)	\$1,440.00	\$160,200.00
Medicare wages: (Box 5)	\$1,440.00	\$196,304.43
State wages, tips: (Box 16)	\$12,863.08	\$184,881.35
Local wages, tips: (Box 18)		

184881.35	37776.12		
1 Wages, tips, other comp.	2 Federal income tax withheld		
160200.00	9932.39		
3 Social security wages	4 Social security tax withheld		
196304.43	2846.40		
5 Medicare wages and tips	6 Medicare tax withheld		
Employer's name, address, and ZIP code EASTERN ELEVATOR OF NEW YORK LLC 3204 CHURCH AVE BROOKLYN NY 11226			
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a D	11423.08	
	12b		
13 Statutory employee	Retirement plan	Third-party sick pay	12c
	X		12d
14	Employee's social security no.		
CAFE 1440.00	674-09-6532		
UI/DB 23.40	Employer ID number (EIN)		
SDI-PFL 399.42	88-0698518		
	Control number	36	
MOHAMMED KHALID IQBAL 7 GRANNY APPLE CIRCLE RIDGE NY 11961			
Employee's name, address, and ZIP code			
15 St. Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
NY 880698518	184881.35	12256.78	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
Wage and Tax Statement Form W-2 Copy B This information is being furnished to the IRS. To Be Filed With Employee's FEDERAL Tax Return. OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

184881.35	37776.12		
1 Wages, tips, other comp.	2 Federal income tax withheld		
160200.00	9932.39		
3 Social security wages	4 Social security tax withheld		
196304.43	2846.40		
5 Medicare wages and tips	6 Medicare tax withheld		
Employer's name, address, and ZIP code EASTERN ELEVATOR OF NEW YORK LLC 3204 CHURCH AVE BROOKLYN NY 11226			
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a D	11423.08	
	12b		
13 Statutory employee	Retirement plan	Third-party sick pay	12c
	X		12d
14	Employee's social security no.		
CAFE 1440.00	674-09-6532		
UI/DB 23.40	Employer ID number (EIN)		
SDI-PFL 399.42	88-0698518		
	Control number	36	
MOHAMMED KHALID IQBAL 7 GRANNY APPLE CIRCLE RIDGE NY 11961			
Employee's name, address, and ZIP code			
15 St. Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
NY 880698518	184881.35	12256.78	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
Wage and Tax Statement Form W-2 Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

184881.35	37776.12		
1 Wages, tips, other comp.	2 Federal income tax withheld		
160200.00	9932.39		
3 Social security wages	4 Social security tax withheld		
196304.43	2846.40		
5 Medicare wages and tips	6 Medicare tax withheld		
Employer's name, address, and ZIP code EASTERN ELEVATOR OF NEW YORK LLC 3204 CHURCH AVE BROOKLYN NY 11226			
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a D	11423.08	
	12b		
13 Statutory employee	Retirement plan	Third-party sick pay	12c
	X		12d
14	Employee's social security no.		
CAFE 1440.00	674-09-6532		
UI/DB 23.40	Employer ID number (EIN)		
SDI-PFL 399.42	88-0698518		
	Control number	36	
MOHAMMED KHALID IQBAL 7 GRANNY APPLE CIRCLE RIDGE NY 11961			
Employee's name, address, and ZIP code			
15 St. Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
NY 880698518	184881.35	12256.78	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
Wage and Tax Statement Form W-2 Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

184881.35	37776.12		
1 Wages, tips, other comp.	2 Federal income tax withheld		
160200.00	9932.39		
3 Social security wages	4 Social security tax withheld		
196304.43	2846.40		
5 Medicare wages and tips	6 Medicare tax withheld		
Employer's name, address, and ZIP code EASTERN ELEVATOR OF NEW YORK LLC 3204 CHURCH AVE BROOKLYN NY 11226			
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a D	11423.08	
	12b		
13 Statutory employee	Retirement plan	Third-party sick pay	12c
	X		12d
14	Employee's social security no.		
CAFE 1440.00	674-09-6532		
UI/DB 23.40	Employer ID number (EIN)		
SDI-PFL 399.42	88-0698518		
	Control number	36	
MOHAMMED KHALID IQBAL 7 GRANNY APPLE CIRCLE RIDGE NY 11961			
Employee's name, address, and ZIP code			
15 St. Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
NY 880698518	184881.35	12256.78	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
Wage and Tax Statement Form W-2 Copy C - For EMPLOYEE'S RECORDS This information is being furnished to the IRS. 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. OMB No. 1545-0008 Department of the Treasury - Internal Revenue Service			

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. 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 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 for 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. 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 \$22,500 (\$15,500 if you only have SIMPLE plans; \$25,500 for section 403(b) plans) if you qualify for the 15-year rule explained in Pub. 571. Deferrals under code G are limited to \$22,500. Deferrals under code H are limited to \$7,000.
However, if you were at least age 50 in 2023, your employer may have allowed an additional deferral of up to \$7,500 (\$3,500 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.
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 non-elective 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 gross parachute payments. See the Form 1040 instructions.
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.
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.

S—Employer 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 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 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.
Y—Deferrals under a section 409A nonqualified deferred compensation plan.
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 403(b). 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(j).
HH—Aggregate deferrals under section 83(j) 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.
Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employees 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 employer 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 have provided while you were an inmate at a penal institution. For 2023 income limits and more information, visit www.irs.gov/ETC. See also Pub. 596. **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.
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 2023 and more than \$3,322.50 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 \$5,821.20 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.