

Form **W-2** Federal Filing Copy - COPY B **2023**
 Wage and Tax Statement To Be Filed With Employee's FEDERAL Tax Return. OMB No. 1545-0008

a Control number 2261	1 Wages, tips, other comp. 63088.67	2 Federal income tax withheld 6884.27
b Employer's EIN 13-3819494	3 Social security wages	4 Social security tax withheld
d Employee's SSN 658-38-8647	5 Medicare wages and tips	6 Medicare tax withheld
c Employer's name, address and ZIP code JOY CONSTRUCTION CORPORATION 40 FULTON STREET NEW YORK NY 10038		
13 Statutory employee	Retirement plan	Third-party sick pay
e Employee's name, address and ZIP code GAGAN SINGH 21 PATERSON ST APT#1 JERSEY CITY NJ 07307		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	
12 See instructions for box 12 DD 4617.24	14 Other	
15 State NY Employer's state ID no. 133819494	16 State wages, tips, etc. 63088.67	17 State income tax 2953.27
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

This information is being furnished to the Internal Revenue Service. Dept. of the Treasury - IRS

Form **W-2** State or Local Copy - COPY 2 **2023**
 Wage and Tax Statement To Be Filed With Employee's State, City, or Local Income Tax Return. OMB No. 1545-0008

a Control number 2261	1 Wages, tips, other comp. 63088.67	2 Federal income tax withheld 6884.27
b Employer's EIN 13-3819494	3 Social security wages	4 Social security tax withheld
d Employee's SSN 658-38-8647	5 Medicare wages and tips	6 Medicare tax withheld
c Employer's name, address and ZIP code JOY CONSTRUCTION CORPORATION 40 FULTON STREET NEW YORK NY 10038		
13 Statutory employee	Retirement plan	Third-party sick pay
e Employee's name, address and ZIP code GAGAN SINGH 21 PATERSON ST APT#1 JERSEY CITY NJ 07307		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	
12 See instructions for box 12 DD 4617.24	14 Other	
15 State NY Employer's state ID no. 133819494	16 State wages, tips, etc. 63088.67	17 State income tax 2953.27
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Dept. of the Treasury - IRS

Form **W-2** **COPY C** For EMPLOYEE'S RECORDS **2023**
 Wage and Tax Statement (See Notice to Employee on the back of Employee Earnings Statement.) OMB No. 1545-0008

a Control number 2261	1 Wages, tips, other comp. 63088.67	2 Federal income tax withheld 6884.27
b Employer's EIN 13-3819494	3 Social security wages	4 Social security tax withheld
d Employee's SSN 658-38-8647	5 Medicare wages and tips	6 Medicare tax withheld
c Employer's name, address and ZIP code JOY CONSTRUCTION CORPORATION 40 FULTON STREET NEW YORK NY 10038		
13 Statutory employee	Retirement plan	Third-party sick pay
e Employee's name, address and ZIP code GAGAN SINGH 21 PATERSON ST APT#1 JERSEY CITY NJ 07307		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	
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This information is being furnished to the Internal Revenue Service. Dept. of the Treasury - IRS

2023 EMPLOYEE EARNINGS STATEMENT

This Earnings Statement provides you with more information pertaining to your W-2 and tax status. Also see the reverse side for IRS instructions.

1. W-4 information reflects data submitted to employer on Form W-4

Soc. Sec. No.: 658-38-8647
 Marital Status: Single

Exemptions

Federal: N/A
 State: 0
 Local: N/A

2. Taxable W-2 Wages

	Wages, Tips Other Comp. Box 1	Soc. Sec. Wages Box 3	Medicare Wages Box 5	State Wages Box 16
Gross Pay	67403.97			67403.97
Exempt Wages Reported on W2	4315.30			4315.30
	63088.67			63088.67