Form W-2 Wage and Tax Statement	2023	7 Social security tips	1 Wages, tips, other comp. 48353.98	2 Federal income tax withheld 6816.36	
c Employer's name, address, and ZIP code HONEYWELL INTERNATIONAL INC		8 Allocated tips	3 Social security wages 3787.70	4 Social security tax withheld	
855 S. MINT ST.		9	5 Medicare wages and tips 3787.70	6 Medicare tax withheld 54.92	
17TH FLOOR PAYROLL CHARLOTTE NC 28202		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 18.33	
e Employee's name, address, and ZIP code	Suff.	13 Statutory Retirement Third-party employee plan sick pay	14 Other	_12b	
POONAM R HATURE		· ·		D 2913.50	
26800 N 27TH AVE		<b>b</b> Employer identification number (EIN 22-2640650	)	DD 7233.49	
APT #386		a Employee's social security no. 824-02-1958	1	12d	
PHOENIX AZ 85085		824-02-1958	4	Ge	
15 State       Employer's state ID no.         AZ       222640650	16 State wages, tips, etc. 48353.98		cal wages, tips, etc. <b>19</b> Local inc	ome tax 20 Locality name	
	_				

Copy B To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008

Dept. of the Treasury - IRS Visit the IRS Web Site at www.irs.gov/efile

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 inco	me is taxable and you fail to report
Form W-2 Wage and Tax Statemen	t 2023	7 Social security tips	1 Wages, tips, other comp. 48353		come tax withheld 6816.36
c Employer's name, address, and ZIP code HONEYWELL INTERNATIONAL INC		8 Allocated tips	3 Social security wages 3787		urity tax withheld 234.84
855 S. MINT ST.		9	5 Medicare wages and tips 3787	.70 6 Medicare t	ax withheld 54.92
17TH FLOOR PAYROLL CHARLOTTE NC 28202		10 Dependent care benefits	11 Nonqualified plans	12a See inst	ructions for box 12 18.33
e Employee's name, address, and ZIP code POONAM R HATURE 26800 N 27TH AVE	Suff.	13 Statutory employee Plan Third-F sickpa ✓ b Employer identification numbe 22-2640650	-	12b G D 12c G DD	2913.50
APT #386 PHOENIX AZ 85085		a Employee's social security no. 824-02-1958		<b>12d</b> C G d d d d d d d d d d d d d d d d d d	
15 State       Employer's state ID no.         AZ       222640650	16 State wages, tips, etc. 48353.98		8 Local wages, tips, etc. 19 Loc	al income tax	20 Locality name
Copy C For EMPLOYEE'S RECORDS (See Notic	e to Employee on back of Co	ру В.)	OMB No. 1545-0008	Dept.	of the Treasury - IRS

Form W-2 Wage and Tax Statement 2023		7 Social security tips		1 Wages, tips, other co	<sup>mp.</sup> 18353.98		ome tax withheld 6816.36
c Employer's name, address, and ZIP code HONEYWELL INTERNATIONAL INC		8 Allocated tips		3 Social security wages 4 Social secur 3787.70		rity tax withheld 234.84	
855 S. MINT ST.		9		5 Medicare wages and	•	6 Medicare ta	
17TH FLOOR PAYROLL CHARLOTTE NC 28202		10 Dependent care benefits		11 Nonqualified plans	3787.70	<b>12a</b>	54.92 18.33
e Employee's name, address, and ZIP code POONAM R HATURE 26800 N 27TH AVE	Suff.	13       Statutory employee       Retirement plan       Thire sick         ▶       Employee       Image: second	d-party pay ber (EIN)	14 Other		12b 2 D 12c 2 DD	2913.50
APT #386		a Employee's social security no. 824-02-1958				12d	7255.15
						Code	
15       State       Employer's state ID no.       16       State wages, tips,         AZ       222640650       48	etc. 353 <b>.</b> 98	17 State income tax 966.69		al wages, tips, etc.	19 Local inc	ome tax	20 Locality name
Copy 2 To Be Filed With Employee's State, City, or Local Income 1	ax Retur	n	OM	1B No. 1545-0008	1	Dept.	of the Treasury - IRS

		7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld
Form W-2 Wage and Tax Statemen	nt 2023		48353.98	6816.36
c Employer's name, address, and ZIP code		8 Allocated tips	3 Social security wages	4 Social security tax withheld
HONEYWELL INTERNATIONAL IN	1C		3787.70	234.84
855 S. MINT ST.		9	5 Medicare wages and tips	6 Medicare tax withheld
17TH FLOOR PAYROLL			3787.70	54.92
CHARLOTTE NC 28202		10 Dependent care benefits	11 Nonqualified plans	12a
CHARLOITE NC 20202				§C 18.33
e Employee's name, address, and ZIP code	Suff.	13 Statutory Retirement Third-par employee plan Sick pay	ty 14 Other	12b
POONAM R HATURE		V		D 2913.50
26800 N 27TH AVE		<b>b</b> Employer identification number	(EIN)	12c
		22-2640650		ğ DD 7233.49
APT #386		a Employee's social security no.		្ព <b>12d</b>
PHOENIX AZ 85085		824-02-1958		o d e
<b>15</b> State Employer's state ID no.	16 State wages, tips, etc.	17 State income tax 18	Local wages, tips, etc. <b>19</b> Local inc	come tax 20 Locality name
AZ 222640650	48353.98	966.69		
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