

Form **W-2 Wage and Tax Statement** 2023

**c** Employer's name, address, and ZIP code  
 HONEYWELL INTERNATIONAL INC  
 855 S. MINT ST.  
 17TH FLOOR PAYROLL  
 CHARLOTTE NC 28202

**e** Employee's name, address, and ZIP code  
 POONAM R HATURE  
 26800 N 27TH AVE  
 APT #386  
 PHOENIX AZ 85085

7 Social security tips	1 Wages, tips, other comp. 48353.98	2 Federal income tax withheld 6816.36
8 Allocated tips	3 Social security wages 3787.70	4 Social security tax withheld 234.84
9	5 Medicare wages and tips 3787.70	6 Medicare tax withheld 54.92
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 18.33
13 Statutory employee Retirement plan Third-party sick pay Suff. <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	14 Other	12b D 2913.50
b Employer identification number (EIN) 22-2640650		12c DD 7233.49
a Employee's social security no. 824-02-1958		12d
15 State Employer's state ID no. AZ 222640650	16 State wages, tips, etc. 48353.98	17 State income tax 966.69
	18 Local wages, tips, etc.	19 Local income 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](http://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 income is taxable and you fail to report it.

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**Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)**

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**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return**

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