	a Employee's social security number	1						
Import Code: M4Y4QPFM	651-23-9157	OMB No. 154	IB No. 1545-0008					
b Employer identification number (EIN)			1 Wa	ges, tips, other compensation	2 Federal inc	2 Federal income tax withheld		
13-3324058			14381	8.41	24365.53			
c Employer's name, address, and	ZIP code		3 Social security wages		4 Social security tax withheld			
MACYS INC			160200.00		9932.40			
	0207044		5 Me	dicare wages and tips	6 Medicare tax withheld			
AGENT FOR MACYS CORP SVC 20- PO BOX 8201	0307941		166056.70		2407.82			
MASON, OH 45040			7 Soc	cial security tips	8 Allocated t	ips		
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d Control number		9		10 Dependent care benefits				
e Employee's first name and initial Last name Suff.		11 Nonqualified plans		<b>12a</b> See instructions for box 12				
1 of 1				<sup>a</sup> D 22238.29				
RISHI THACKER			13 State emp	utory Retirement Third-party loyee plan sick pay				
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HERMITAGE, TN 37076				d w 174	4.96			
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f Employee's address and ZIP coc	le							
15 State         Employer's state ID number         16 State wages, tips, etc.         17 State incor		ne tax <b>18</b> Local wages, tips, etc.		19 Local income	tax <b>20</b> Locality name			
				[	[			

# Form W-2 Wage and Tax Statement

2023

Department of the Treasury-Internal Revenue Service

Copy B-To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.

Import Code: M4Y4QPFM       651-23-9157       OMB No. 1545-0008         b Employer identification number (EIN)       1 Wages, tips, other compensation       2 Federal income tax withheld         13-3324058       143818.41       24365.53         c Employer's name, address, and ZIP code       3 Social security wages       4 Social security tax withheld         AGENT FOR MACYS CORP SVC 20-0307941       5 Medicare wages and tips       6 Medicare tax withheld         PO BOX 8201       7 Social security tips       8 Allocated tips         d Control number       9       10 Dependent care benefits         e Employee's first name and initial       Last name       Suff.       11 Nonqualified plans       12a         a D       22238.29       13 Statutory       Potenent       110 Dependent care benefits         318 CRYSTAL SPRING LN       HERMITAGE, TN 37076       14 Other       12a       12a         a W       174.96       12a       12a       12a         a W       174.96       12a       12a       12a			1					
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HERMITAGE, TN 37076						<sup>8</sup> W 174.96		
f Employee's address and ZIP code	HERMITAGE, TN 37076							
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15 State       Employer's state ID number       16 State wages, tips, etc.       17 State income tax       18 Local wages, tips, etc.       19 Local income tax       20 Locality name	15 State Employer's state ID numb	er <b>16</b> State wages, tips, etc.	17 State incon	ne tax	18 Local wages, tips, etc.	19 Local income tax   20 Locality name		
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Form W-2 Wage and Tax Statement



Department of the Treasury-Internal Revenue Service

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

	a Employee's social security number							
Import Code: M4Y4QPFM	651-23-9157	OMB No. 1545-0008						
b Employer identification number (EIN)			1 Wa	ges, tips, other compensation	2 Fede	2 Federal income tax withheld		
13-3324058			143818	8.41	24365.53			
c Employer's name, address, and	ZIP code		3 Soc	cial security wages	4 Social security tax withheld			
MACYS INC			160200.00		9932.40			
			5 Me	dicare wages and tips	6 Medicare tax withheld			
AGENT FOR MACYS CORP SVC 20-	0307941		166056	6.70	2407.82	2407.82		
PO BOX 8201			7 Soc	cial security tips	8 Alloc	ated tips		
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e Employee's first name and initial Last name Suff.		11 Nonqualified plans		12a				
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HERMITAGE, TN 37076				d W	174.96			
					<b>12d</b>			
f Employee's address and ZIP coc	le							
15 State Employer's state ID numb	er 16 State wages, tips, etc.	. 17 State incor	ne tax	18 Local wages, tips, etc.	<b>19</b> Local in	come tax	20 Locality name	

## Form W-2 Wage and Tax Statement

2023

Department of the Treasury-Internal Revenue Service

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

	a Employee's social security number			This information is being furnis	shed to the Internal Re	venue Service. If vou		
Import Code: M4Y4QPFM	651-23-9157	OMB No. 1545-0008 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				or other sanction		
b Employer identification number (EIN)						ne tax withheld		
13-3324058			14381	8.41	24365.53	24365 53		
c Employer's name, address, and	d ZIP code		3 Social security wages		4 Social security tax withheld			
MACYS INC			160200.00		9932.40			
			5 Medicare wages and tips		6 Medicare tax withheld			
AGENT FOR MACYS CORP SVC 20	0-0307941		166056.70		2407.82			
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e Employee's first name and initial Last name Suff.		11 Nongualified plans 12a S		12a See instructi	a See instructions for box 12			
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HERMITAGE, TN 37076					W 174.9	96		
					12d			
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f Employee's address and ZIP code								
15 State Employer's state ID num	hber 16 State wages, tips, etc.	17 State incom	ne tax	18 Local wages, tips, etc.	19 Local income tax	x 20 Locality name		





Department of the Treasury-Internal Revenue Service

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

#### 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 eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2023 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't take the EIC if your investment income is more than the specified amount for 2023 or if income is earned for services provided while you were an inmate at a penal institution. For 2023 income limits and more information, visit www.irs.gov/IEITC. 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 form 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 \$9,932.40 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.

#### Instructions for Employee

(See also Notice to Employee on the back of Copy B.)

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 to 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 \$2,500. 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

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.

#### Instructions for Employee

#### Box 12 (continued)

E-Elective deferrals under a section 403(b) salary reduction agreement

F-Elective deferrals under a section 408(k)(6) salary reduction SEP

 ${\bf G-}$  Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

 ${\rm H-Elective}$  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 golden 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.

 $\rm N-Uncollected$  Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

 ${\rm P-Excludable}$  moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

 $\mathbf{Q}-\mathbf{N}\text{ontaxable}$  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-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 8839 to figure any taxable and nontaxable amounts.

 ${\rm V-}$  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.

 $\begin{array}{ll} \textbf{W-Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889.\\ \textbf{Y-Deferrals under a section 409A nonqualified deferred compensation plan} \end{array}$ 

Z-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

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(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.

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, keep 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.

# Your tax forms are here. Our experts are here to help you file:

Virtually | In person | Via drop off





New clients only Expires April 10, 2024 Code: **369814860** Get started at hrblock.com

Valid at participating U.S. offices for an original 2023 personal income tax return for new clients only. Discount may not be combined with any other offer or promotion. Void if transferred and where prohibited. Coupon must be presented prior to completion of initial tax office interview. A new client is an individual who did not use H&R Block office services to prepare his or her 2022 tax return. No cash value. Expires April 10, 2024. OBTP#B13696 ©2024 HRB Tax Group, Inc.

EXCLUSIVE OFFER FOR MACY'S EMPLOYEES



\*Offer expires April 30, 2024 (4/30/24)

The above are paid advertisements and do not represent endorsements by your company.



TO: Colleagues of Macy's & Bloomingdale's

## FROM: Macy's Payroll Services

### This message appears for the benefit of those who have elected to obtain their W-2 online. Thank you for supporting Macy's Go Green effort and enrolling in our program!

Information appearing on your Form W-2 will include wages paid and taxes withheld at any time during the calendar year of 2023. It is extremely important that you review your Form W-2 and that you report any discrepancies immediately.

The following services are available through W-2 Tax Form Management (<u>www.mytaxform.com</u>), or call 1-877-325-9239 if,

- > You have found a discrepancy on your Form W-2 and need to report the error.
- The social security number (SSN) on your Form W-2 is incorrect. (Note: In order to request a W-2c for an incorrect SSN, you must first have your SSN corrected in our payroll system. Your local HRA/AST can make the correction by you providing acceptable documentation to support your request (see your HRA/AST for acceptable documents.) Once the correction is made in our payroll system, you can access W-2 Tax Form Management (www.mytaxform.com) or call 1-877-325-9239 to request the W-2c.)
- > You need to request a reprint.

If you cannot obtain internet access to W-2 Tax Form Management, you may call Macy's HR Services at 1-800-234-MACY (6229) for assistance. When speaking with a representative, please be very specific with your issue. Providing specific, detailed information is critical for a timely resolution.

The IRS recommends that Form W-2, Copy "C" for employee's record, be maintained for at least 3 years after the due date for filing an income tax return.

Please read the notice to employee and instructions on the back of your Form W-2. This has been furnished by the IRS and includes information regarding EIC\*, corrections & more.

\* CA Colleagues - To obtain notices and information on the California Earned Income Tax Credit (Cal EITC), visit the California Franchise Tax Board web site at <u>www.ftb.ca.gov</u>.

\* OR Colleagues - Colleagues may be eligible for the Oregon Earned Income Tax Credit, visit these websites for additional information about how to qualify: Federal: <u>www.irs.gov/credits-deductions/individuals/earned-income-tax-credit</u> Oregon: <u>www.oregon.gov/DOR/programs/individuals/Pages/credits.aspx</u>

\* MD Colleagues -Additional information regarding EIC is available to you through the eMAG.