

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

7. Social security tips		1 Wages, tips, other compensation	72563.91	2 Federal income tax withheld	7507.63
8. Allocated tips		3 Social security wages	74078.03	4 Social security tax withheld	4592.82
9. Verification code		5 Medicare wages and tips	74078.03	6 Medicare tax withheld	1074.20
10. Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12	D 1514.12
13 Statutory Employee	Retirement Plan	Third-party sick pay	14 Other PA SUTA EMPLOYEE 47.33		12b. W 1310.00
	X				12c. AA 654.55
b Employer identification number					12d. DD 24807.94
25-0930077					
d Employee's social security number					
XXX-XX-5328					

c Employer's name, address, and ZIP code
JOSEPH B. FAY COMPANY
TWO ALLEGHENY CENTER NOVA TOWER 2 SUITE
PITTSBURGH, PA 15212

e Employee's name, address, and ZIP code
SHASHANK REDDY
224 CHATHAM PARK DR
PITTSBURGH, PA 15220

15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
ND	250930077 01	10088.94	69.00			
PA	15956832	63989.09	1964.52	28872.95	288.71	PLUM BORO

COPY B To Be filed with Employee's FEDERAL tax return

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 compensation	72563.91	2 Federal income tax withheld	7507.63
8. Allocated tips		3 Social security wages	74078.03	4 Social security tax withheld	4592.82
9. Verification code		5 Medicare wages and tips	74078.03	6 Medicare tax withheld	1074.20
10. Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12	D 1514.12
13 Statutory Employee	Retirement Plan	Third-party sick pay	14 Other PA SUTA EMPLOYEE 47.33		12b. W 1310.00
	X				12c. AA 654.55
b Employer identification number					12d. DD 24807.94
25-0930077					
d Employee's social security number					
XXX-XX-5328					

c Employer's name, address, and ZIP code
JOSEPH B. FAY COMPANY
TWO ALLEGHENY CENTER NOVA TOWER 2 SUITE
PITTSBURGH, PA 15212

e Employee's name, address, and ZIP code
SHASHANK REDDY
224 CHATHAM PARK DR
PITTSBURGH, PA 15220

15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
PA	15956832	63989.09	1964.52	45205.08	452.01	SCOTT TWP

COPY B To Be filed with Employee's FEDERAL tax return

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 compensation	72563.91	2 Federal income tax withheld	7507.63
8. Allocated tips		3 Social security wages	74078.03	4 Social security tax withheld	4592.82
9. Verification code		5 Medicare wages and tips	74078.03	6 Medicare tax withheld	1074.20
10. Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12	D 1514.12
13 Statutory Employee	Retirement Plan	Third-party sick pay	14 Other PA SUTA EMPLOYEE 47.33		12b. W 1310.00
	X				12c. AA 654.55
b Employer identification number					12d. DD 24807.94
25-0930077					
d Employee's social security number					
XXX-XX-5328					

c Employer's name, address, and ZIP code
JOSEPH B. FAY COMPANY
TWO ALLEGHENY CENTER NOVA TOWER 2 SUITE
PITTSBURGH, PA 15212

e Employee's name, address, and ZIP code
SHASHANK REDDY
224 CHATHAM PARK DR
PITTSBURGH, PA 15220

15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
ND	250930077 01	10088.94	69.00			

COPY C FOR EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B)

OMB No. 1545-0008

Dept. of the Treasury --IRS

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.

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

7. Social security tips		1 Wages, tips, other compensation	72563.91	2 Federal income tax withheld	7507.63	
8. Allocated tips		3 Social security wages	74078.03	4 Social security tax withheld	4592.82	
9. Verification code		5 Medicare wages and tips	74078.03	6 Medicare tax withheld	1074.20	
10. Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12	D 1514.12	
13 Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other PA SUTA EMPLOYEE 47.33		12b. W 1310.00 12c. AA 654.55 12d. DD 24807.94		
b Employer identification number		25-0930077				
d Employee's social security number		XXX-XX-5328				
15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
PA	15956832	63989.09	1964.52	28872.95	288.71	PLUM BORO
			45205.08		452.01	
					SCOTT TWP	

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

OMB No. 1545-0008

Dept. of the Treasury --IRS

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.

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

7. Social security tips		1 Wages, tips, other compensation	72563.91	2 Federal income tax withheld	7507.63	
8. Allocated tips		3 Social security wages	74078.03	4 Social security tax withheld	4592.82	
9. Verification code		5 Medicare wages and tips	74078.03	6 Medicare tax withheld	1074.20	
10. Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12	D 1514.12	
13 Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other		12b. W 1310.00 12c. AA 654.55 12d. DD 24807.94		
b Employer identification number		25-0930077				
d Employee's social security number		XXX-XX-5328				
15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
ND	250930077 01	10088.94	69.00			

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

OMB No. 1545-0008

Dept. of the Treasury --IRS

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.

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

7. Social security tips		1 Wages, tips, other compensation	72563.91	2 Federal income tax withheld	7507.63	
8. Allocated tips		3 Social security wages	74078.03	4 Social security tax withheld	4592.82	
9. Verification code		5 Medicare wages and tips	74078.03	6 Medicare tax withheld	1074.20	
10. Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12	D 1514.12	
13 Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		14 Other		12b. W 1310.00 12c. AA 654.55 12d. DD 24807.94		
b Employer identification number		25-0930077				
d Employee's social security number		XXX-XX-5328				
15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
PA	15956832	63989.09	1964.52	28872.95	288.71	PLUM BORO

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

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 compensation 72563.91	2 Federal income tax withheld 7507.63
8. Allocated tips			3 Social security wages 74078.03	4 Social security tax withheld 4592.82
9. Verification code			5 Medicare wages and tips 74078.03	6 Medicare tax withheld 1074.20
10. Dependent care benefits			11 Nonqualified plans	12a See instructions for box 12 D 1514.12
13 Statutory Employee Retirement Plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>			14 Other	12b. W 1310.00 12c. AA 654.55 12d. DD 24807.94
b Employer identification number 25-0930077				
d Employee's social security number XXX-XX-5328				

c Employer's name, address, and ZIP code

JOSEPH B. FAY COMPANY
TWO ALLEGHENY CENTER NOVA TOWER 2 SUITE
PITTSBURGH, PA 15212

e Employee's name, address, and ZIP code

SHASHANK REDDY
224 CHATHAM PARK DR
PITTSBURGH, PA 15220

15 State PA	Employer's state I.D. no. 15956832	16 State wages, tips, etc. 63989.09	17 State income tax 1964.52	18 Local wages, tips, etc. 45205.08	19 Local income tax 452.01	20 Locality name SCOTT TWP
----------------	---------------------------------------	--	--------------------------------	--	-------------------------------	-------------------------------