

1 Wages, tips, other compensation		2 Federal Income tax withheld	
68563.99		10539.24	
3 Social security wages		4 Social security tax withheld	
69468.61		4307.05	
5 Medicare wages and tips		6 Medicare tax withheld	
69468.61		1007.29	
a Employee's SSA number		Employer use only	
XXX-XX-0956			
b Employer's FED ID number		d Control number	
91-2051883		06450692	
c Employer's name, address, and ZIP code			
CWC Travel, Inc. 999 Lake Drive Issaquah WA 98027			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 5663.00	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		C 37.21	
14 Other		12c D 904.62	
		12d	
e Employee's first name and initial Last name Suff.			
RAJEEV POOSA 908 CHAMBERLAIN ST IRVING TX 75060			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy C for Employee's records			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
68563.99		10539.24	
3 Social security wages		4 Social security tax withheld	
69468.61		4307.05	
5 Medicare wages and tips		6 Medicare tax withheld	
69468.61		1007.29	
a Employee's SSA number		Employer use only	
XXX-XX-0956			
b Employer's FED ID number		d Control number	
91-2051883		06450692	
c Employer's name, address, and ZIP code			
CWC Travel, Inc. 999 Lake Drive Issaquah WA 98027			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 5663.00	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		C 37.21	
14 Other		12c D 904.62	
		12d	
e Employee's first name and initial Last name Suff.			
RAJEEV POOSA 908 CHAMBERLAIN ST IRVING TX 75060			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
68563.99		10539.24	
3 Social security wages		4 Social security tax withheld	
69468.61		4307.05	
5 Medicare wages and tips		6 Medicare tax withheld	
69468.61		1007.29	
a Employee's SSA number		Employer use only	
XXX-XX-0956			
b Employer's FED ID number		d Control number	
91-2051883		06450692	
c Employer's name, address, and ZIP code			
CWC Travel, Inc. 999 Lake Drive Issaquah WA 98027			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 5663.00	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		C 37.21	
14 Other		12c D 904.62	
		12d	
e Employee's first name and initial Last name Suff.			
RAJEEV POOSA 908 CHAMBERLAIN ST IRVING TX 75060			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
68563.99		10539.24	
3 Social security wages		4 Social security tax withheld	
69468.61		4307.05	
5 Medicare wages and tips		6 Medicare tax withheld	
69468.61		1007.29	
a Employee's SSA number		Employer use only	
XXX-XX-0956			
b Employer's FED ID number		d Control number	
91-2051883		06450692	
c Employer's name, address, and ZIP code			
CWC Travel, Inc. 999 Lake Drive Issaquah WA 98027			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 5663.00	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		C 37.21	
14 Other		12c D 904.62	
		12d	
e Employee's first name and initial Last name Suff.			
RAJEEV POOSA 908 CHAMBERLAIN ST IRVING TX 75060			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			