| 7 | | | | | | Federal Box 1 | Soc. S | ec. Box 3 & 7 | Medicare Box ! | 5 |
|---|--|---|-------------------------------|---------------------------------------|--|--|----------------------------|-------------------------------|-------------------|----------------------|
| To the right is information which shows your total wages by | | | Gross Wages | | 197764.80 | 19 | 7764.80 | 197764.80 | 0 | |
| W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total wages to arrive at your W-2 wages. | | | Txbl Benefits Group Term Life | | 176.28 | | 176.28 | 176.28 | R | |
| 1 | | z wages. se forms, including an explan | Adoption | | 170.20 | | 170.20 | 170.20 | | |
| of th | e letter codes used in trate document. | pox 12, are available on a | Deferred Comp Section 125 | | (2855.06) | (2 | 2855.06) | (2855.06 |) | |
| | | | | Other Pretax/Wag | ge Limit | | | 1886.02) | | _ |
| | | | | W-2 Wages | | 195086.02 | 16 | 50200.00 | 195086.0 | 2 |
| a Employ | ee's social security number | b Employer identification number (EIN | N) | d Control number | | | | | | |
| XXX- | XX-6729 | 90-0853791 | | 008918989401 | | | | | | B No. 1545-0008 |
| | er's name, address, and ZIP co | | | | 1 Wages, tips, other compensation 195086.02 | | | 2 Federal income tax withheld | | 25764.24 |
| Kraft Foods Group Brands LLC PO Box 57 Attn: Payroll | | | | | 3 Social secu | | 200.00 | 4 Social security | tax withheld | 9932.40 |
| | ourgh PA 15230 | | | | 5 Medicare w | ages and tips | .00.00 | 6 Medicare tax w | vithheld | 3332.40 |
| e Employe | ee's first name and initial | Last name | Su | ff. | 7 Social secu | | 086.02 | 8 Allocated tips | | 2828.75 |
| RAJESH CHAVAN 261, Poplar Avenue, R618 Devon PA 19333 USA | | | | | , . | | · | | | |
| | | | | | 9 | | 10 Dependent care benefits | | | |
| f Employe | e's address and ZIP code | | | | 11 Nonqualific | ed plans | | 12a See instruc | tions for box 12 | 176.28 |
| 15 State | Employer's state ID Number | 16 State wages, tips, etc. | 17 State i | ncome tax | 13 Statuto | ory Retirement Third yee plan sick | d-party | 12b | | |
| PA | 95653179 9008537 | 194909.74 | ļ | 5983.66 | employ | yee plan sick | Pay | Code W | | 2200.00 |
| 18 Local v | vages, tips, etc. | 19 Local income tax | 20 Locali | ty name | 14 Other | | | Code AA 12d | | 12036.68 |
| | | | } | | PA LST PA UI | | 52.00 138.44 | Code DD | | 19886.90 |
| | 2 Wage and Tax Statemen | t | L | 2023 | | | | | , | I Revenue Servi |
| Сору С—Е | or EMPLOYEE'S RECORDS | | | 2023 | | This information is being egligence penalty or othe | | | | |
| a Employ | ee's social security number | b Employer identification number (EIN | N) | d Control number | | | | | | |
| XXX- | XX-6729 | 90-0853791 | | 008918989401 | | | | | | B No. 1545-0008 |
| | er's name, address, and ZIP co | | | | 1 Wages, tips | , other compensatio 1950 | n)86.02 | 2 Federal incom | e tax withheld | 25764.24 |
| PO B | Foods Group Brands LL ox 57 Payroll | C | | | 3 Social security wages 160200.00 | | | 4 Social security | tax withheld | 9932.40 |
| | ourgh PA 15230 | | | | 5 Medicare wa | ages and tips | .00.00 | 6 Medicare tax w | vithheld | 9932.40 |
| e Employee's first name and initial Last name Suff. RAJESH CHAVAN 261, Poplar Avenue, R618 | | | | ff. | 7 Social secu | | 86.02 | 8 Allocated tips | | 2828.75 |
| | | | | | | , | | | | |
| USA USA | n PA 19333 | | | | 9 | | 10 Dependent care benefits | | | |
| f Employe | e's address and ZIP code | | | | 11 Nonqualific | ed plans | | 12a See instruc | tions for box 12 | 176.28 |
| 15 State | Employer's state ID Number | 16 State wages, tips, etc. | 17 State i | ncome tax | | ory Retirement Third yee plan sick | | 12b Code W | | 2200.00 |
| PA | 95653179 9008537 | 194909.74 | } | 5983.66 | · | X [| | 12c | | |
| 18 Local v | vages, tips, etc. | 19 Local income tax | 20 Locali | ty name | 14 Other | | F2.00 | Code AA 12d | | 12036.68 |
| | | | ¦ | | PA LST PA UI | | 52.00 138.44 | Code DD | | 19886.90 |
| | 2 Wage and Tax Statemen o Be Filed With Employee's FE | | | 2023 | 2 | | Depa | rtment of the Tr | reasury - Interna | l Revenue Servi |
| сору Б | o do militar Employee o 1 E | | | 2025 | | | | | | |
| a Employ | ee's social security number | b Employer identification number (EI | N) | d Control number | | | | | | |
| | XX-6729 | 90-0853791 | | 008918989401 | 1 Wages tine | , other compensatio | | 2 Federal incom | | B No. 1545-0008 |
| | er's name, address, and ZIP co Foods Group Brands LL | | | | i wayes, ups | |)86.02 | 2 rederal incom | e tax witiilieiu | 25764.24 |
| PO Box 57 Attn: Payroll | | | | 3 Social secu | | 200.00 | 4 Social security | tax withheld | 9932.40 | |
| Pittsl | ourgh PA 15230 | | | | 5 Medicare w | ages and tips | | 6 Medicare tax w | vithheld | |
| e Employee's first name and initial Last name Suff. RAJESH CHAVAN 261, Poplar Avenue, R618 Device PA 19232 | | | ff. | 7 Social secu | | 086.02 | 8 Allocated tips | | 2828.75 | |
| | | | | 9 | | | 40.0 | | | |
| Devon PA 19333 USA | | | | | , | | | 10 Dependent ca | a d Denents | |
| f Employe | e's address and ZIP code | | | | 11 Nonqualific | ed plans | | 12a See instruc Code C | ctions for box 12 | 176.28 |
| 15 State Employer's state ID Number 16 State wages, tips, etc. 17 State inco | | | 13 Statuto | ory Retirement Third yee plan sick | d-party Pay | 12b Code W | | 2200.00 | | |
| PA | 95653179 90085379 | 194909.74 | Ļ | 5983.66 |] | | $\vec{}$ | 12c | | |
| | | | | | |) (x) (| | | | 12026.55 |
| 18 Local v | vages, tips, etc. | 19 Local income tax | 20 Locali | ty name | 14 Other PA LST | | 52.00 | Code AA 12d Code DD | | 12036.68 19886.90 |

Department of the Treasury - Internal Revenue Service