

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

Copy C, for employee's records

d Control number 0940-11074480 000000211 - PROJEC		Void	c Employer's name, address, and ZIP code CROSS ISLAND MECHANICAL CORP 41 BOX ST STE 300 BROOKLYN NY 11222		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer identification number (EIN) 11-3524063		a Employee's social security number XXX-XX-3527		1 Wages, tips, other compensation 16193.90		2 Federal income tax withheld 1478.94
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages 3461.55		4 Social security tax withheld 214.62
12 See instructions for box 12		14 Other NYSDI 1.80 NYPFL 15.75		e Employee's name, address, and ZIP code BHARGAVI S HARPUDE 56 BEACON WAY APT T-701 JERSEY CITY NJ 07304		5 Medicare wages and tips 3461.55
				7 Social Security Tips		8 Allocated Tips
				10 Dependent care benefits		11 Nonqualified plans
15 State	Employer's state ID number NY 113524063	16 State wages, tips, etc. 16193.90	17 State income tax 157.41	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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**

Copy B, to be filed with employee's FEDERAL tax return

d Control number 0940-11074480 000000211 - PROJEC		Void	c Employer's name, address, and ZIP code CROSS ISLAND MECHANICAL CORP 41 BOX ST STE 300 BROOKLYN NY 11222		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer identification number (EIN) 11-3524063		a Employee's social security number XXX-XX-3527		1 Wages, tips, other compensation 16193.90		2 Federal income tax withheld 1478.94
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages 3461.55		4 Social security tax withheld 214.62
12 See instructions for box 12		14 Other NYSDI 1.80 NYPFL 15.75		e Employee's name, address, and ZIP code BHARGAVI S HARPUDE 56 BEACON WAY APT T-701 JERSEY CITY NJ 07304		5 Medicare wages and tips 3461.55
				7 Social Security Tips		8 Allocated Tips
				10 Dependent care benefits		11 Nonqualified plans
15 State	Employer's state ID number NY 113524063	16 State wages, tips, etc. 16193.90	17 State income tax 157.41	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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**

Copy 2, to be filed with employee's tax return for NY

d Control number 0940-11074480 000000211 - PROJEC		Void	c Employer's name, address, and ZIP code CROSS ISLAND MECHANICAL CORP 41 BOX ST STE 300 BROOKLYN NY 11222		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer identification number (EIN) 11-3524063		a Employee's social security number XXX-XX-3527		1 Wages, tips, other compensation 16193.90		2 Federal income tax withheld 1478.94
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages 3461.55		4 Social security tax withheld 214.62
12 See instructions for box 12		14 Other NYSDI 1.80 NYPFL 15.75		e Employee's name, address, and ZIP code BHARGAVI S HARPUDE 56 BEACON WAY APT T-701 JERSEY CITY NJ 07304		5 Medicare wages and tips 3461.55
				7 Social Security Tips		8 Allocated Tips
				10 Dependent care benefits		11 Nonqualified plans
15 State	Employer's state ID number NY 113524063	16 State wages, tips, etc. 16193.90	17 State income tax 157.41	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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**

d Control number		Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer identification number (EIN)		a Employee's social security number		1 Wages, tips, other compensation		2 Federal income tax withheld
13 Statutory employee		Retirement plan	Third-party sick pay	3 Social security wages		4 Social security tax withheld
12 See instructions for box 12		14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips
				7 Social Security Tips		8 Allocated Tips
				10 Dependent care benefits		11 Nonqualified plans
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

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.