## Employer Copy of W-2C Report

W-2C Request Id: Y Ishimwe

Created: Committed: No Consolidate previously committed W-2Cs into one W-2C: No 
 Dayforce

 Run By:
 009317

 Run Date:
 3/21/2024 1:13:04 PM

 Legal Entity
 Central Garden & Pet Company
 Federal ID Number
 68-0275553

Total # of W2-C forms	1
Corrected SSN and/or Name	0

Amount	Corrections
Amount	COLLECTIONS

Box	CTS Code	State/Locality	Previously Reported	Correct Information	Count
03	0003		\$49,704.04	\$0.00	1
04	0003		\$3,081.65	\$0.00	1
05	0023		\$49,704.04	\$0.00	1
06	0023		\$720.71	\$0.00	1

## Employer Copy of W-2C Report

W-2C Request Id: Y Ishimwe

Created:

Committed: No Consolidate previously committed W-2Cs into one W-2C: No

Dayforce Run By: 009317 Run Date: 3/21/2024 1:13:04 PM

**Grand Totals** 

Total # of W2-C forms	1
Corrected SSN and/or Name	0

Amount	Corrections

Box	CTS Code	State/Locality	Previously Reported	Correct Information	Count
03	0003		\$49,704.04	\$0.00	1
04	0003		\$3,081.65	\$0.00	1
05	0023		\$49,704.04	\$0.00	1
06	0023		\$720.71	\$0.00	1

4444	For Official Use Only OMB No. 1545-0008	y ►			
a Employer's na	ame, address, and ZIP co	ode	c Tax year/Form corrected	d Employee's correct SSN	
Central Garden & Pet Company 1340 Treat Blvd.		2023 / ₩/2	835-32-0363		
Suite 600 Walnut Creek CA 94597		e Corrected SSN and/or name (Check this box and complete boxes f and/or g if incorrect on form previously filed.)			
			Complete boxes f and/or g only if inco	prrect on form previously filed	
		f Employee's previously reported SSN			
b Employer ider 68-0275553	b Employer identification number (EIN)		g Employee's previously reported name		
00 0210000			h Employee's first name and initial	Last name Suff.	
			Yvette	Ishimwe	
			305 Centennial Olympic Park Drive NV	l. /.	
<b>Note:</b> Only complete money fields that are being corrected (exception: for corrections involving MQGE, see the Instructions for Forms W-2c and W-3c, boxes 5 and 6).		Apt. 2505 Atlanta GA 30313 USA			
	isly reported	Correct information	i Employee's address and ZIP code	Correct information	
1 Wages, tips, oth		1 Wages, tips, other compensation	Previously reported     Sederal income tax withheld	2 Federal income tax withheld	
3 Social security	y wages	3 Social security wages	4 Social security tax withheld	4 Social security tax withheld	
49704.04	and the		3081.65	0.00	
5 Medicare wag 49704.04	jes and tips	5 Medicare wages and tips 0.00	6 Medicare tax withheld 720.71	6 Medicare tax withheld 0.00	
7 Social security	y tips	7 Social security tips	8 Allocated tips	8 Allocated tips	
9		9	10 Dependent care benefits	10 Dependent care benefits	
11 Nonqualified p	olans	11 Nonqualified plans	12a See instructions for box 12	12a See instructions for box 12	
	an sick pay	13 Statutory Retirement Third-party employee plan sick pay	12b	12b	
14 Other (see ins	structions)	14 Other (see instructions)	12c	12c	
			12d	12d	
			C o d e	o d e	
		State Correctio			
Broviou	sly reported	State Correctio	Previously reported	Correct information	
15 State	siy reported	15 State	15 State	15 State	
Employer's sta	ate ID number	Employer's state ID number	Employer's state ID number	Employer's state ID number	
16 State wages,	tips, etc.	16 State wages, tips, etc.	16 State wages, tips, etc.	16 State wages, tips, etc.	
17 State income	tax	17 State income tax	17 State income tax	17 State income tax	
Locality Correction Information					
Previou	sly reported	Correct information	Previously reported	Correct information	
18 Local wages,	tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc.	
19 Local income	tax	19 Local income tax	19 Local income tax	19 Local income tax	
20 Locality name	1	20 Locality name	20 Locality name	20 Locality name	