

Form W-2 Wage and Tax Statement 2023

Copy C, for employee's records

d Control number 0056-11025449 0000000210 - THE AS		Void	c Employer's name, address, and ZIP code CLOCKWORK ACTIVE MEDIA SYSTEMS 1501 E HENNEPIN AVENUE MINNEAPOLIS MN 55414-2428		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008	
b Employer identification number (EIN) 80-0015282		a Employee's social security number XXX-XX-0755		1 Wages, tips, other compensation 37343.77		2 Federal income tax withheld 4990.86
13 Statutory employee	Retirement plan X	Third-party sick pay		3 Social security wages 37793.77	4 Social security tax withheld 2343.21	
12 See instructions for box 12 W 160.42 D 450.00		14 Other		e Employee's name, address, and ZIP code PRIYANKA KALARIA 2812 GRANDE PARKWAY APT 204 PALM BEACH GARDENS FL 33410		5 Medicare wages and tips 37793.77
						6 Medicare tax withheld 548.01
						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.

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

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