W2 - Non Per Diem

2022 W-2 and Earnings Summary

				Statement	
Copy C - For EMPLO	OYE	E'S RECOR	RDS	2022	
This information is being furnished to the to file a tax return, a negligence penalty imposed on you if this income is taxable.	e IRS. or oth	If you are required er sanction may be you fall to report it	e De	OMB No. 1545-0008 epartment of Treasury - ternal Revenue Service	
Control OKL44 287	73	0081			
Employer's name, address, and ZIP cod	le				
TRIPLE CROWN CONSULT 10814 JOLLYVILLE ROA AUSTIN TX 78759			IV	SUITE 100	
Employee's name, address, and ZIP cod ANDREW B SHAR 212 THOMPSON	P				
MOUNTAIN VIEW	F.,	-	3		
19004.4	10		3	3224.62	
1 Wages, tips, other comp),	2 Federal i		me tax withheld	
19004.4	1178.27				
3 Social security wages	4 Social security tax withheld				
19004.4	10	275.56			
5 Medicare wages and tip	6 Medicare tax withheld				
7 Social security tips		8 Allocate	d ti	ps	
9		10 Depend	ent	care benefits	
11 Nonqualified plans		12a		Ÿ	
		12b		-	
13 Statutory Retirement Third-par sick pay	ty	12c			
		12d			
Employee's social security no. 550 - 70 - 1490		14 CASDI		209.05	
Employer ID number (EIN) 20-1368158					
15 St. Employer's state ID number	16	6 State wages, tips, etc. 19004.40		17 State income tax	
CA 24642498	-			1034.94	
18 Local wages, tips, etc.	19	Local income tax		20 Locality name	

	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages and Tips
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions Less: Third Party Sick Pay Less: Excess Wages Total Reported Wages	\$19,004.40 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 N/A \$19,004.40	\$19,004.40 \$0.00 N/A \$0.00 \$0.00 \$0.00 \$19,004.40	\$19,004.40 \$0.00 N/A \$0.00 \$0.00 N/A \$19,004.40
Tax Withheld	Fed Income	Social Security	Medicare
	Box 2 of W-2	Box 4 of W-2	Box 6 of W-2
	\$3,224.62	\$1,178.27	\$275.56

CA State Wages, Tips, etc. Box 16 of W-2 Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions \$19,004.40 \$0.00 \$0.00 \$0.00 Less: Third Party Sick Pay \$0.00 \$19,004.40

> **CA State Income Tax** Box 17 of W-2 \$1.034.94

Tax Withheld

Total Reported Wages

ANDREW B SHARP 212 THOMPSON SQ. MOUNTAIN VIEW, CA 94043

The Form W-2 Box 1 wages are the Gross Wages as of your last pay statement for the year minus any non-taxable earnings or deductions, plus any additional compensation received after the last pay statement. Gross pay may not match Box 1 wages due to deductions for retirement deferrals, health insurance, or other Sec. 125 cafeteria plan deductions, etc.

Form W-2

Copy 2 - To Be Filed With

Employee's State, City, or Local

Form W-2 Wage and Tax Statement Copy B — To Be Filed With 2022

Employee's FEDERAL Tax Return.

is information is being furnished to the IRS.

Control OKL44 2873

00815

Employer's name, address, and ZIP code

TRIPLE CROWN CONSULTING LLC

10814 JOLLYVILLE ROAD BUILDING IV SUITE 100 AUSTIN TX 78759

ANDREW B SHARP 212 THOMPSON SQ. MOUNTAIN VIEW CA 94043

1178.27 4 Social security tax withhele 275.56 6 Medicare tax withheld 8 Allocated tips		
6 Medicare tax withheld		
8 Allocated tips		
10 Dependent care benefits		
12a 12b		
12c		
14 CASDI 209.05		
State wages, tips, etc. 17 State income to 19004.40 1034.94		
Local income tax 20 Locality name		

Wage and Tax Statement Form W-2 Copy 2 - To Be Filed With 5055 Employee's State, City, or Local

Income Tax Return.
Control OKL44

Employer's name, address, and ZIP code

TRIPLE CROWN CONSULTING LLC 10814 JOLLYVILLE ROAD BUILDING IV SUITE 100 AUSTIN TX 78759

mployee's name, address, and ZIP code ANDREW B SHARP 212 THOMPSON SQ. MOUNTAIN VIEW CA 94043

1	19004.4 Wages, tips, other comp		2	Federal i		3224.62 me tax withheld	
3	19004.4 Social security wages	10	4	1178.27 Social security tax withheld			
5	19004.40 Medicare wages and tips			275.56 6 Medicare tax withheld			
7	Social security tips			8 Allocated tips			
9				10 Dependent care benefits			
11 Nonqualified plans			12	-			
13	Statutory Retirement Third-part sick pay	ty	12				
Employee's social security no. 550 - 70 - 1490			14	ASDI		209.05	
En	mployer ID number (EIN) 20-1368158						
15 St. Employer's state ID number 16 CA 24642498				wages, tips,		17 State income ta:	
18	18 Local wages, tips, etc.		Local income tax		20 Locality name		

	ne Tax Return	٦.			Int	ernal Revenue Service
Control number	0KL44	287	3	00815		
Employer	's name, address, æ	nd ZIP code				
10814	LE CROWN CO 4 JOLLYVILI IN TX 78759	LE ROA			V	SUITE 100
AND 212	e's name, address, a REW B S THOMPS NTAIN V	HARI ON S	SQ.		3	
19004.40 1 Wages, tips, other comp.			3224.62 2 Federal income tax withheld			
19004.40 3 Social security wages			0	1178.27 4 Social security tax withheld		
19004.40 5 Medicare wages and tips			275.56 6 Medicare tax withheld			
7 Social security tips 9			8 Allocated tips 10 Dependent care benefits			
						11 Nonqualified plans
13 Statut	tory Retirement	Third-part	y	12c	_	
employée plan sick pay				12d		
Employee's social security no. 550 - 70 - 1490			0.	14 CASDI		209.05
	yer ID number 0 - 13681					
15 St. Employer's state ID number 16		16	State wages, tips,	etc.	17 State income tax	
~~		1	19004.40		1034.94	
18 Local wages, tips, etc.		19	Local income tax 20 Locality in		20 Locality name	

Wage and Tax Statement

5055

OMB No. 1545-0008 Department of Treasury -