

2010



EXPLANATION FOR CERTAIN BOXES ON W-2



Wages paid from more than one State agency are combined on one W-2.
Questions about wages reported are to be directed to Your Agency Payroll Office!

BOX #1 WAGES, TIPS, OTHER COMPENSATION

Amounts Included	Amounts Subtracted (Pre-Tax)
Year to Date <u>Gross Wages</u> (taken from the PAY section of your Final 2010 Pay Stub)	Health/Dental Insurance Premiums
Value of Auto Usage (see Box 14)	Supplemental Life Premiums
Value of Imputed Income (see Box 14)	Dependent Care Deductions (DCRA) (see Box 10)
Taxable Travel Reimbursements (see Box 14)	Medical Reimbursement Deductions (AMRA)
Taxable Per Diem (see Box 14)	Vision Care Premiums
	Deferred Compensation Contributions (see Box 12)
	Tax Sheltered Annuity Contributions (see Box 12)
	HSA Contributions (employee only) (see Box 12)
	Retirement Contributions
	Bus Card/Platinum Pass Deductions

BOX #3 SOCIAL SECURITY WAGES (Not to exceed annual maximum social security wage base)

Amounts Included	Amounts Subtracted (Pre-Tax)
Year to Date <u>Gross Wages</u> (taken from the PAY section of your Final 2010 Pay Stub)	Health/Dental Insurance Premiums
Value of Auto Usage (see Box 14)	Supplemental Life Premiums
Value of Imputed Income (see Box 14)	Dependent Care Deductions (DCRA) (see Box 10)
Taxable Travel Reimbursements (see Box 14)	Medical Reimbursement Deductions (AMRA)
Taxable Per Diem (see Box 14)	Vision Care Premiums

BOX #5 MEDICARE WAGES AND TIPS

Amounts Included	Amounts Subtracted (Pre-Tax)
Year to Date <u>Gross Wages</u> (taken from the PAY section of your Final 2010 Pay Stub)	Health/Dental Insurance Premiums
Value of Auto Usage (see Box 14)	Supplemental Life Premiums
Value of Imputed Income (see Box 14)	Dependent Care Deductions (DCRA) (see Box 10)
Taxable Travel Reimbursements (see Box 14)	Medical Reimbursement Deductions (AMRA)
Taxable Per Diem (see Box 14)	Vision Care Premiums

BOX #9 ADVANCE EIC PAYMENT

If you received Advance Earned Income Credit payments, the amount will appear in this box.

BOX #10 DEPENDENT CARE BENEFITS

If you had Dependent Care Deductions (DCRA), the amount will appear in this box.

BOX #12

Code E – Tax Sheltered Annuity Contributions
Code G – Deferred Compensation Contributions
Code W – HSA Contributions (both employee and employer)

BOX #13 RETIREMENT PLAN

This box will be checked if you participate in any State Retirement System.

BOX #14 OTHER

“AUTO” The value of your Auto Use benefit included in Box 1, 3, 5, and 16.
“IMPUT” The value of Imputed Income for Health and/or Dental Insurance Benefits for a non-tax dependent included in Box 1, 3, 5, and 16.
“TXTRV” Taxable Travel reimbursements included in Box 1, 3, 5, and 16.
“UNACT” Taxable Per Diem included in Box 1, 3, 5, and 16.

BOX #16 STATE WAGES, TIPS, ETC.

The amount displayed in this box will be the same as the amount in Box 1.