

**TITLE:** 2023 Wage and Tax Statement (Form W-2)

**NUMBER:** MEM - 4090.18

**ISSUER:** David D. Hart  
Chief Business Officer  
Office of the Chief Business Officer

Ernie Thomas  
Controller  
Accounting and Disbursements Division

**ROUTING**  
All Employees  
All Locations

**DATE:** January 12, 2024

**PURPOSE:** The purpose of this Memorandum is to provide information to employees to assist in understanding the Wage and Tax Statement (Form W-2) for calendar year 2023.

**I. W-2 FORM DELIVERY PROCEDURES**

Wage and Tax Statements for calendar year 2023 will be mailed on January 30, 2024, via U.S. mail to employee home addresses on file.

Wage and Tax Statements returned by the United States Postal Service (USPS) and received by Payroll Administration before January 31, 2024, will be mailed to the forwarding address if information is available. A W-2 returned by USPS after January 31, 2024, will be held by Payroll Administration to be forwarded to the current address, upon the employee updating their address in the Employee Self Service (ESS) site.

All returned items without forwarding addresses or insufficient addresses will be mailed once the employee provides a correct and complete mailing address.

**II. 403(b) AND 457(b) TAX SHELTERED ACCOUNTS**

The total amount of 403(b) and 457(b) reductions for calendar year 2023 will appear in box 12 identified as code "E" and code "G" respectively. These amounts *are not included* in box 1, "Wages, tips, other compensation," or box 16, "State wages, tips, etc."

**III. 457(b) ROTH PLANS**

The total amount of 457(b) Roth contributions *are not tax-deferred and are included* in box 1, "Wages, tips, other compensation" and box 16, "State wages, tips, etc.," for Federal and State income tax reporting purposes. They appear in box 12 identified as code "EE".

**IV. VEHICLE USE AND OTHER FRINGE BENEFITS**

The fringe benefit values for vehicle use and other fringe benefits determined to be taxable for calendar year 2023 appear in box 14 identified as "VEH FR" and/or "FB OTHR". The fringe benefit values *are included* in box 1, "Wages, tips, other compensation" and box 16, "State wages, tips, etc.," for Federal and State income tax reporting purposes. If applicable, this value is also included in box 3, "Social security wages" and box 5, "Medicare wages and tips."

**V. TRANSIT SUBSIDY FRINGE BENEFIT**

For Federal income tax reporting for calendar year 2023, the commuting benefit transit Carpool Subsidy (C2) is not excludable from wages and is included in box 1, "Wages, tips, and other compensation" of affected employees. If applicable, this amount is also included in box 3, "Social security wages" and box 5, "Medicare wages and tips," respectively.

For California income tax reporting for calendar year 2023, both the Carpool Subsidy (C2) and Mass Transit Subsidy (B2) are exempt from gross income and are not included in box 16, "State wages, tips, etc."

**VI. WORKERS' COMPENSATION PAYMENTS**

The total amount of temporary disability payments for Workers' Compensation for calendar year 2023 appears in box 14 identified as "TD." These temporary disability payments are *not included* in box 1, "Wages, tips, other compensation," or box 16, "State wages, tips, etc." This amount is also not subject to Social Security and Medicare tax and is not reflected in box 3, "Social security wages," and box 5, "Medicare wages and tips," respectively.

**VII. DEPENDENT CHILDCARE BENEFITS**

The total amount of pre-tax contributions made to Section 125, Dependent Care Flexible Spending account, appears in box 10, "Dependent care benefits." This amount *is not included* in box 1, "Wages, tips, other compensation," box 3, "Social security wages," box 5, "Medicare wages and tips," or box 16, "State wages, tips, etc."

**VIII. DOMESTIC PARTNER HEALTH BENEFIT**

The total value of Domestic Partner coverage for calendar year 2023 will appear in box 14 identified as "DP GR." This amount *is included* in box 1, "Wages, tips, other compensation" and box 16, "State wages, tips, etc." of affected employees for Federal and State income tax reporting purposes. If applicable, this value is also included in box 3, "Social security wages" and box 5, "Medicare wages and tips".

Domestic Partners who are registered with the State of California are exempt from State income tax and the amount of the coverage shown in box 14 is not included in box 16 "State wages, tips, etc."

For inquiries pertaining to Domestic Partner Imputed Income, please call Benefits Administration customer service at (213) 241-4262.

**IX. HEALTH INSURANCE**

The total cost of District-paid health coverage will appear in box 12 identified as code "DD". The amount is displayed on the Form W-2 for information only and is not subject to any type of payroll tax.

**X. IMPACT OF OVERPAYMENTS ON W-2 DATA**

If you were overpaid in 2023 and repaid the overpayment timely to post in 2023, your 2023 W-2 will not reflect the wages overpaid in the calendar year.

If you repaid a prior year overpayment during the 2023 calendar year, there is no impact to your 2023 W-2 wages or tax withholding. Instead, you will receive a remittance statement noting the amount you repaid in 2023 which you may use when filing your 2023 tax forms.

**XI. NON-RECEIPT OF FORM W-2**

W-2 duplicates and reprints are available through the Employee Self Service (ESS) site after February 14, 2024. Employees may log in online at <https://ess.lausd.net> with Single Sign On and password and select My W-2. Please note, if you are going to access the ESS outside of the LAUSD network, you must first log in with the following link: <https://gp.lausd.net>

All related system support can be obtained by contacting the ITS Help Desk at (213) 241-5200 select Option 8.

Employees who do not have access to ESS must submit a request for a duplicate using the Request for Duplicate Form W-2 (Attachment A). This form is also available online and can be accessed through the LAUSD website using this web address: <https://www.lausd.org/Page/1090>. Submit the completed form via fax to (866) 761-7413. Requests for duplicate W-2s will be processed weekly.

**XII. W-2 DATA INQUIRIES**

Every attempt has been made to ensure the accuracy of the information on the W-2. However, any employee who feels the information is inaccurate may complete the W-2 Inquiry Form (Attachment B). This form is also available online and can be accessed through the LAUSD website using this web address: <https://www.lausd.org/Page/1090>. Submit the completed form via fax to (213) 241-8986.

Employees are asked to provide detailed information as to their specific issues and concerns with the W-2 received. If additional information is necessary, the employee will be contacted by a member of the payroll team. Employees will be notified of the outcome of District research via the contact information provided on the inquiry form.

**ATTACHMENTS:**

Attachment A – Request for Duplicate Form W-2  
Attachment B – 2023 W-2 Inquiry Form

**ASSISTANCE:**

Employees who require further information regarding a duplicate W-2 or a W-2 Inquiry should contact Payroll Customer Services at (213) 241- 2570, between the hours of 8:00 am – 4:00 pm.

Request for Duplicate Form W-2

**Employee Name** \_\_\_\_\_

**Employee Number** \_\_\_\_\_

**Document(s) Requested** \_\_\_\_\_

**2023 W-2**                      Requests are only for employees who do not have access to ESS website.

**Prior Year W-2**  
Year(s): \_\_\_\_\_  
Note: Generation of W-2's will only go back to 2018 and can require up to 10-14 days for processing and distribution.

**Mailing Instruction**

All duplicate requests for W-2's will be mailed to the home address or the updated address if provided below.

Home Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Address Change (Your address on record will be updated.)  
Change of address for retired employee must be processed through Benefits Administration by completing Retiree Change of Address Form before a duplicate request can be forwarded to a new address.

Telephone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

***Please fax completed form to 866-761-7413***

2023 W-2 Inquiry Form

**Employee Name** \_\_\_\_\_

**Employee Number** \_\_\_\_\_

Box number  
in question  
(Please check)

<input type="checkbox"/>	Box 1	Wages, tips, other compensation
<input type="checkbox"/>	Box 2	Federal income tax withheld
<input type="checkbox"/>	Box 3	Social Security wages and tips
<input type="checkbox"/>	Box 4	Social Security tax withheld
<input type="checkbox"/>	Box 5	Medicare wages and tips
<input type="checkbox"/>	Box 6	Medicare tax withheld
<input type="checkbox"/>	Box 16	State wages, tips, etc.
<input type="checkbox"/>	Box 17	State income tax
<input type="checkbox"/>	Other	

**Reason for Inquiry** \_\_\_\_\_  
\_\_\_\_\_

**Mailing Instruction**

All W-2c's, if applicable, will be mailed to the home address or the updated address if provided below.

Home Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Address Change (Your address on record will be updated.)

Telephone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

***Please fax completed form to 213-241-8986***