2017 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 <u>Your Agency</u> Payroll Office**

Amounts Included	Amounts Subtracted (Pre-Tax)
Taxable Wages (Regular Pay, Holiday, Paid Leave, etc) Value of Auto Usage (see Box 14) Taxable Fringe Benefit(s), Awards, Prizes Value of Imputed Income (see Box 14) Taxable Travel Reimbursements (see Box 14) Taxable Per Diem (see Box 14) Taxable Educational Assistance Taxable Allowances Excess Retirement Contribution Refunds	Health/Dental/Vision Insurance Premiums Supplemental Life Premiums (Pre-Tax portion) Dependent Care Deductions (DCRA) (see Box 10) Medical Reimbursement Deductions (AMRA, LMRA) HSA Contributions (employee only) (see Box 12) Deferred Compensation Contributions (see Box 12) Tax Sheltered Annuity Contributions (see Box 12) Transit Program Deductions Retirement Contributions
X #3 SOCIAL SECURITY WAGES (Not to exceed	d appual maximum social socurity wago baso)
Amounts Included	Amounts Subtracted (Pre-Tax)
Taxable Wages (Regular Pay, Holiday, Paid Leave, etc) Value of Auto Usage (see Box 14) Taxable Fringe Benefit(s), Awards, Prizes Value of Imputed Income (see Box 14) Taxable Travel Reimbursements (see Box 14) Taxable Per Diem (see Box 14) Taxable Educational Assistance Taxable Allowances	Health/Dental/Vision Insurance Premiums Supplemental Life Premiums (Pre-Tax portion) Dependent Care Deductions (DCRA) (see Box 10) Medical Reimbursement Deductions (AMRA, LMRA) HSA Contributions (employee only) (see Box 12)
X #5 MEDICARE WAGES AND TIPS	
Amounts Included	Amounts Subtracted (Pre-Tax)
Taxable Wages (Regular Pay, Holiday, Paid Leave, etc) Value of Auto Usage (see Box 14) Taxable Fringe Benefit(s), Awards, Prizes Value of Imputed Income (see Box 14) Taxable Travel Reimbursements (see Box 14) Taxable Per Diem (see Box 14) Taxable Educational Assistance Taxable Allowances	Health/Dental/Vision Insurance Premiums Supplemental Life Premiums (Pre-Tax portion) Dependent Care Deductions (DCRA) (see Box 10) Medical Reimbursement Deductions (AMRA, LMRA) HSA Contributions (employee only) (see Box 12)
X #10 DEPENDENT CARE BENEFITS you had Dependent Care Deductions (DCRA), the amour	nt will appear in this box.
 X #12 DD – Cost of employer-sponsored health coverage (both the DD – Cost of employer-sponsored health coverage (both the E – Tax Sheltered Annuity Contributions – 403(b) E E – Designated Roth Contributions under government the G – Deferred Compensation Contributions – 457(b) E P – Excludable moving expense reimbursement paid of the W – Health Savings Account (HSA) Contributions (both the W) 	directly to employee (not included in box 1, 3, 5, and 16)
X #13 RETIREMENT PLAN his box will be checked if you participated in any State Re	tirement System.
X #14 OTHER (any items below are also included in Bo JTO" – The value of your Auto Usage benefit PUT" – The value of Imputed Income Benefits (TRV" – Taxable Travel Reimbursements (SUB" – Taxable Legislative Subsistence Per Diem	ox 1, 3, 5, and 16).

The amount displayed in this box will be Arizona taxable income and may be the same as in Box 1.