

YE Information Summary

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Year End Forms

W-2 Status Find | View All First 1 of 1 Last
 Company: MSG Calendar Year: 2000 EmpID: 519032 Tax Form ID: W-2 *Process Flag: Complete

W-2 Details Find | View All First 1 of 1 Last
 First Name: ANUCHA Middle Name: Control Number:
 Last Name: BROWNE-SANDERS Suffix: Sequence: 1
 *Address 1: Address 2: Social Security
 *City: State: Country: USA

Employee Status Statutory Employee Retirement Plan Third-party sick pay

W2 Info Customize | Find | View 2 | First 1 of 1 Last
 Box Description State Locality Locality Name W-2 Amount
 01 Wages, tips, other compensation 16346.15
 02 Federal income tax withheld 3493.70
 03 Social Security wages 16346.15
 04 Social Security tax withheld 1013.46
 05 Medicare wages and tips 16346.15
 06 Medicare tax withheld 237.02
 17 State wages, tips, etc. NY 16346.15
 18 State income tax NY 1058.65

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YE Information Summary

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Year End Forms Find | View All First 1 of 6 Last

Company: MSG Calendar Year: 2001 EmplID: 519032 Tax Form ID: W-2 *Process Flag: Complete

W-2 Details Find | View All First 1 of 6 Last

First Name: ANUCHA Middle Name: Last Name: BROWNE-SANDERS Suffix: Control Number: 1
 *Address 1: Address 2: Social Security: *Country: USA

Employee Status: Statutory Employee Retirement Plan Third-party sick pay

W2 Info Customize | Find | View 2 | First 1 of 10 to Last

Box Description	State Locality	Locality Name	W-2 Amount
01 Wages, tips, other compensation			158158.36
02 Fed/terr income tax withheld			31686.75
03 Social Security wages			80400.00
04 Social Security tax withheld			4984.80
05 Medicare wages and tips			188658.36
06 Medicare tax withheld			2445.55
12C Group term life			313.30
12D 401(k)			10500.00
16 State wages, tips, etc.	NY		158158.36
17 State income tax	NY		10086.59

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Year End Forms
 W-2 Status
 Company: MSG Calendar Year: 2002 EmplID: 519032
 Tax Form ID: W-2
 Find | View All | First | 4 of 8 | Last
 Complete

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W-2 Details
 Find | View All | First | 1 of 1 | Last

First Name: ANUCHA
 Last Name: BROWNE-SANDERS
 Middle Name:
 Suffix:
 *Address 1:
 Address 2:
 *City:
 State:
 *Country: USA

Control Number:
 Sequence: 1
 Social Security

Employee Status
 Statutory Employee Retirement Plan Third-party sick pay

W2 Info
 Box Description
 01 Wages, tips, other compensation
 02 Fed/terr income tax withheld
 03 Social Security wages
 04 Social Security tax withheld
 05 Medicare wages and tips
 06 Medicare tax withheld
 12C Group term life
 12D 401(K)
 16 State wages, tips, etc.
 17 State income tax

State Locality
 NY NY
 NY NY

W2 Amount
 213916.42
 45300.23
 84900.00
 5263.80
 224916.42
 3261.29
 358.34
 11000.00
 213916.42
 14130.91

Customize | Find | View 2 | First | 1-10 of 10 | Last

Save Return to Search

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Year End Forms

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Year End Forms

W-2 Status
 Company: MSG Calendar Year: 2003 EmpID: 519082 Tax Form ID: W-2
 Find | View All | First | 1 of 1 | Last | Complete

W-2 Details
 Find | View All | First | 1 of 1 | Last

First Name: ANUCHA Middle Name: Control Number:
 Last Name: BROWNE-SANDERS Suffix: Sequence: 1
 *Address 1: Social Security
 Address 2:
 *City:
 State: *Country: USA

Employee Status
 Statutory Employee Retirement Plan Third-party sick pay

W2 Info
 Customized | Find | View 2 | First | 1 of 1 | Last

Box Description	State	Locality	Locality Name	W-2 Amount
01 Wages, tips, other compensation				255420.72
02 Fed/terr income tax withheld				53942.36
03 Social Security wages				87000.00
04 Social Security tax withheld				5394.00
05 Medicare wages and tips				267420.72
06 Medicare tax withheld				3877.60
12C Group term life				428.40
12D 401(k)				12000.00
16 State wages, tips, etc.	NY			255420.72
17 State income tax	NY			18106.23

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Year End Forms

W-2 Status
 Company: MSG Calendar Year: 2004 EmpID: 519032 Tax Form ID: W-2
 Find | View All | First | 2 of 6 | Last | Complete

W-2 Details
 Find | View All | First | 1 of 1 | Last |
 First Name: ANUCHA
 Last Name: BROWNE-SANDERS
 Middle Name:
 Suffix:
 *Address 1:
 Address 2:
 *City:
 State:
 *Country: USA
 Control Number:
 Sequence: 1
 Social Security

Employee Status
 Statutory Employees Retirement Plan Third-party sick pay

W2 Info
 Customizable | Find | View 2 | First | 1-10 of 10 | Last |
 Box Description State Locality Locality Name W-2 Amount

01	Wages, tips, other compensation			248897.66
02	Fed/term income tax withheld			49778.99
03	Social Security wages			87800.00
04	Social Security tax withheld			5449.80
05	Medicare wages and tips			261897.66
06	Medicare tax withheld			3797.52
12C	Group term life			427.18
12D	401(k)			13000.00
16	State wages, tips, etc.		NY	248897.66
17	State income tax		NY	17889.71

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W-2 Status: Find | View All | First | 1 of 1 | Last | Complete

Company: MSG Calendar Year: 2005 EmplID: 519032 Tax Form ID: W-2 *Process Flag:

W-2 Details: Find | View All | First | 1 of 1 | Last

First Name: ANUCHA Middle Name: Suffix: Control Number: 1
 Last Name: BROWNE SANDERS
 *Address 1:
 Address 2:
 *City:
 State: *Country: USA

Statutory Employee Retirement Plan Third-party sick pay

Employee Status: Customizable | Find | View 2 | First | 1-10 of 10 | Last

Box Description	State	Locality	Locality Name	W-2 Amount
01 Wages, tips, other compensation				307230.00
02 Fed/terr income tax withheld				55484.10
03 Social Security wages				90000.00
04 Social Security tax withheld				5560.00
05 Medicare wages and tips				321230.00
06 Medicare tax withheld				4667.84
12C Group term life				516.08
12D 401(K)				14000.00
18 State wages, tips, etc.	NY			307230.00
17 State income tax	NY			22459.10

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