

d Control number	1 Wages, tips, and compensation 2,962.50	2 Federal income tax withheld 33.30
OMB NO. 1545-0008	3 Social security wages	4 Social security tax withheld
	5 Medicare wages and tips	6 Medicare tax withheld

c Employer's name, address and ZIP code
STATE OF CALIFORNIA
BETTY T. YEE, CALIFORNIA STATE CONTROLLER
P.O. BOX 942850
SACRAMENTO, CA 94250-5878

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a
12b	12c	12d

b Employer identification number (EIN)
94-6001347

a Employee's social security number
XXX-XX-0789

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other

e Employee's name, address and ZIP code
A P NADVI
1255 UNIVERSITY AVE APT 312
SACRAMENTO CA
95825

2021	15 State Employer's state ID No. CA 80040397	16 State wages, tips, etc. 2,962.50
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Form W-2 Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service	17 State income tax	18 Local wages, tips, etc.
	19 Local income tax	20 Locality name