

1 Wages, tips, other compensation	2201.75	2 Federal Income tax withheld	11.46
3 Social security wages	2201.75	4 Social security tax withheld	136.51
5 Medicare wages and tips	2201.75	6 Medicare tax withheld	31.93
a Employee's SSA number 201-29-2099		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01626601	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
<b>REISSUED STATEMENT</b>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Other CA SDI Tax	24.22	12c	
		12d	
e Employee's first name and initial Last name Suff. VENKAT MANNAM 144 S 3RD ST APT 437 SAN JOSE CA 95112			
f Employee's address and ZIP code			
15 State	CA	18 Local wages, tips, etc	
16 State wages, tips, etc.	2201.75	19 Local income tax	
17 State income tax		20 Locality name	
Form OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service <b>W-2 Wage and Tax Statement 2022</b> Copy C for Employee's records			

1 Wages, tips, other compensation	2201.75	2 Federal Income tax withheld	11.46
3 Social security wages	2201.75	4 Social security tax withheld	136.51
5 Medicare wages and tips	2201.75	6 Medicare tax withheld	31.93
a Employee's SSA number 201-29-2099		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01626601	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
<b>REISSUED STATEMENT</b>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Other CA SDI Tax	24.22	12c	
		12d	
e Employee's first name and initial Last name Suff. VENKAT MANNAM 144 S 3RD ST APT 437 SAN JOSE CA 95112			
f Employee's address and ZIP code			
15 State	CA	18 Local wages, tips, etc	
16 State wages, tips, etc.	2201.75	19 Local income tax	
17 State income tax		20 Locality name	
Form OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service <b>W-2 Wage and Tax Statement 2022</b> Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation	2201.75	2 Federal Income tax withheld	11.46
3 Social security wages	2201.75	4 Social security tax withheld	136.51
5 Medicare wages and tips	2201.75	6 Medicare tax withheld	31.93
a Employee's SSA number 201-29-2099		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01626601	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
<b>REISSUED STATEMENT</b>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Other CA SDI Tax	24.22	12c	
		12d	
e Employee's first name and initial Last name Suff. VENKAT MANNAM 144 S 3RD ST APT 437 SAN JOSE CA 95112			
f Employee's address and ZIP code			
15 State	CA	18 Local wages, tips, etc	
16 State wages, tips, etc.	2201.75	19 Local income tax	
17 State income tax		20 Locality name	
Form OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service <b>W-2 Wage and Tax Statement 2022</b> Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation	2201.75	2 Federal Income tax withheld	11.46
3 Social security wages	2201.75	4 Social security tax withheld	136.51
5 Medicare wages and tips	2201.75	6 Medicare tax withheld	31.93
a Employee's SSA number 201-29-2099		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01626601	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
<b>REISSUED STATEMENT</b>			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Other CA SDI Tax	24.22	12c	
		12d	
e Employee's first name and initial Last name Suff. VENKAT MANNAM 144 S 3RD ST APT 437 SAN JOSE CA 95112			
f Employee's address and ZIP code			
15 State	CA	18 Local wages, tips, etc	
16 State wages, tips, etc.	2201.75	19 Local income tax	
17 State income tax		20 Locality name	
Form OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service <b>W-2 Wage and Tax Statement 2022</b> Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			