

d Control Number		1 Wages, tips, other compensation 49149.36	2 Federal income tax withheld 6895.53
b Employer identification number (EIN) 94-0304228		3 Social security wages 56488.61	4 Social security tax withheld 3502.29
a Employee's social security number XXX-XX-████		5 Medicare wages and tips 56488.61	6 Medicare tax withheld 819.08

c Employer's name, address and ZIP code
MUG UNION BANK, N.A.
1251 AVENUE OF THE AMERICAS
NEW YORK NY 10020

7 Social security tips		8 Allocated tips		9	
10 Dependent care benefits		11 Nonqualified plans		12a Code C 15.84	
12b Code D 7339.25		12c Code W 750.00		12d Code DD 4884.88	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other		
	X				

e Employee's name, address and ZIP code
SAINADH CHILUKAMARI
512 E ANGEL DR
CHANDLER AZ 85249

2022 Form W-2	15 State Employer's state ID no. AZ 94-0304228		16 State wages, tips, etc. 49149.36

Wage and Tax Statement
Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

Department of the Treasury - Internal Revenue Service

17 State income tax 2064.25		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	

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1251 AVENUE OF THE AMERICAS
NEW YORK NY 10020

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	X				

e Employee's name, address and ZIP code
SAINADH CHILUKAMARI
512 E ANGEL DR
CHANDLER AZ 85249

2022 Form W-2	15 State Employer's state ID no. AZ 94-0304228		16 State wages, tips, etc. 49149.36

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 2064.25		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	

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c Employer's name, address and ZIP code
MUG UNION BANK, N.A.
1251 AVENUE OF THE AMERICAS
NEW YORK NY 10020

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10 Dependent care benefits		11 Nonqualified plans		12a Code C 15.84	
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13 Statutory employee	Retirement plan	Third-party sick pay	14 Other		
	X				

e Employee's name, address and ZIP code
SAINADH CHILUKAMARI
512 E ANGEL DR
CHANDLER AZ 85249

2022 Form W-2	15 State Employer's state ID no. AZ 94-0304228		16 State wages, tips, etc. 49149.36

Wage and Tax Statement
Copy B - To Be Filed With Employee's FEDERAL Tax Return.

This information is being furnished to the Internal Revenue Service.

Department of the Treasury - Internal Revenue Service

17 State income tax 2064.25		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	

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MUG UNION BANK, N.A.
1251 AVENUE OF THE AMERICAS
NEW YORK NY 10020

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e Employee's name, address and ZIP code
SAINADH CHILUKAMARI
512 E ANGEL DR
CHANDLER AZ 85249

2022 Form W-2	15 State Employer's state ID no. AZ 94-0304228		16 State wages, tips, etc. 49149.36

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 2064.25		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	