Form W-2 Wage and Tax Statement	t 2022		7 Social security tips	1 Wages, tips, other comp. 1440	0.00	2 Federal income	e tax withheld	
c Employer's name, address, and ZIP code CURATORS OF THE		8 Allocated tips	3 Social security wages	3 Social security wages		4 Social security tax withheld		
UNIVERSITY OF MISSOURI			9	5 Medicare wages and tips	5 Medicare wages and tips		6 Medicare tax withheld	
PO BOX 56 COLUMBIA MO 65205-0056 e Employee's name, address, and ZIP code AMULYA REDDY LAKKU 11416 TIVOLI LN APT C			10 Dependent care benefits	11 Nonqualified plans	14 Other		12a See instructions for box 12	
			13 Statutory Retirement Third-pau plan sick pay					
			<ul> <li>b Employer identification number</li> <li>43-6003859</li> <li>a Employee's social security no.</li> </ul>	(EIN)				
SAINT LOUIS MO 63146			XXX-XX-3217	,				
15         Employer's state ID no.           MO         11166045	16 State wages, tips, etc 14400		17 State income tax 54.00	Local wages, tips, etc. 19	9 Local inco	ome tax	20 Locality name	
Copy B To Be Filed With Employee's FEDERAL T	ax Return		This information is being fumished to	<ul> <li>the Internal Revenue Service.</li> <li>OMB No. 1545-0008</li> <li>This information is being furnished to negligence penalty or other sanction</li> </ul>	the Internal Rev may be imposed	Visit the IRS Web Site	the Treasury - IRS e at www.irs.gov/efile equired to file a tax return, a taxable and you fail to report it	
Form W-2 Wage and Tax Statement	: 2022		7 Social security tips	1 Wages, tips, other comp. 1440	00.00	2 Federal income	e tax withheld	
c Employer's name, address, and ZIP code CURATORS OF THE			8 Allocated tips	3 Social security wages		4 Social security	tax withheld	
UNIVERSITY OF MISSOURI PO BOX 56 COLUMBIA MO 65205-0056		9	5 Medicare wages and tips	5 Medicare wages and tips		6 Medicare tax withheld		
		10 Dependent care benefits	11 Nonqualified plans	11 Nonqualified plans		12a See instructions for box 12		
e Employee's name, address, and ZIP code AMULYA REDDY LAKKU		13 Statutory Retirement Third-par plan sick pay			12b			
11416 TIVOLI LN APT C SAINT LOUIS MO 63146			<b>b</b> Employer identification number 43-6003859	(EIN)				
			a Employee's social security no. XXX-XX-3217	_		12d		
15 State         Employer's state ID no.           MO         11166045	16 State wages, tips, etc 1440		17 State income tax 54.00	Local wages, tips, etc. 19	9 Local inco	ome tax	20 Locality name	

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)

OMB No. 1545-0008

7 Social security tips 1 Wages, tips, other comp. 2 Federal income tax withheld 2025 Form W-2 Wage and Tax Statement 14400.00 c Employer's name, address, and ZIP code CURATORS OF THE 8 Allocated tips 3 Social security wages 4 Social security tax withheld UNIVERSITY OF MISSOURI 9 5 Medicare wages and tips 6 Medicare tax withheld PO BOX 56 12a 10 Dependent care benefits 11 Nonqualified plans COLUMBIA MO 65205-0056 e Employee's name, address, and ZIP code 13 Statutory employee Third-party sick pay 14 Other 12b AMULYA REDDY LAKKU b Employer identification number (EIN) 12c 11416 TIVOLI LN APT C 43-6003859 12d SAINT LOUIS MO 63146 a Employee's social security no. XXX-XX-3217 15 State Employer's state ID no. 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name 11166045 14400.00 54.00 MO

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

OMB No. 1545-0008

Dept. of the Treasury - IRS

Dept. of the Treasury - IRS

Form W-2 Wage and Tax Statement	t 2022	7 Social security tips	1 Wages, tips, other co 14	<sup>mp.</sup> 4400.00	2 Federal ir	ncome tax withheld
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COLUMBIA MO 65205-0056		10 Dependent care benefits	11 Nonqualified plans		C C Q	
e Employee's name, address, and ZIP code		13 Statutory Retirement Third employee plan sick	l-party pay 14 Other		<b>12b</b> ទ	
AMULYA REDDY LAKKU		h. Englisher identifier time another			d	
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SAINT LOUIS MO 63146	a Employee's social security no XXX-XX-3217	D.				
15 State         Employer's state ID no.           MO         11166045	16 State wages, tips, etc. 14400.00	17 State income tax 54.00	18 Local wages, tips, etc.	19 Local ind	come tax	20 Locality name
Copy 2 To Be Filed With Employee's State, City,	or Local Income Tax Return	L87	OMB No. 1545-0008	5206	Dep	t. of the Treasury - IRS