

Copy B--To Be Filed With Employee's FEDERAL Tax Return			OMB No. 1545-0008		
This information is being furnished to the Internal Revenue Service.					
a. Employee's social security number	1. Wages, tips, other compensation	2. Federal income tax withheld			
821-42-2344	36925.36	1985.46			
b. Employer ID number (EIN)	3. Social security wages	4. Social security tax withheld			
45-4526162	36925.36	2289.37			
d. Control number	5. Medicare wages and tips	6. Medicare tax withheld			
SDPHS1-2230	36925.36	535.42			
c. Employer's name, address, and ZIP code					
Pioneer Healthcare Services 6215 Ferris Sq Ste 120 San Diego, CA 92121-3251					
e. Employee's name, address, and ZIP code					
Sowmya Krishnamurthy 10522 Clasico Ct San Diego, CA 92127					
7. Social security tips	8. Allocated tips	9.			
10. Dependent care benefits	11. Nonqualified plans	12a. Code See inst. for Box 12			
13. Statutory employee	14. Other CASDI 332.33	12b. Code			
Retirement plan		12c. Code			
Third-party sick pay		12d. Code			
15. State	Employer's state ID number	16. State wages, tips, etc.	17. State income tax		
CA	013-2330-2	36925.36	1308.23		
18. Local wages, tips, etc.	19. Local income tax	20. Locality name			

Form W-2 Wage and Tax Statement **2023** Department of the Treasury - Internal Revenue Service

Copy 2--To Be Filed With Employee's State, City, or Local Income Tax Return			OMB No. 1545-0008		
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CA	013-2330-2	36925.36	1308.23		
18. Local wages, tips, etc.	19. Local income tax	20. Locality name			

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Copy C--For EMPLOYEE'S RECORDS(See Notice to Employee.)			OMB No. 1545-0008		
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.					
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18. Local wages, tips, etc.	19. Local income tax	20. Locality name			

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