		Employee	e Re	feren	се	Cop	у				
		employee's rec	Stateme	nd ent	Тах	2 ()23 No. 1545-0008				
d		ol number	Dept.	Co	orp.	Employ	er use only				
00	001207	27 TYI		WS	J7		574	3			
c	c Employer's name, address, and ZIP code UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY PARK LOS ANGELES, CA 90089-0001										
e/f	e/f Employee's name, address, and ZIP code SHUBHANKAR M HINGNE 1247 W 30TH ST 306 LOS ANGELES, CA 90007										
b	Emplo	yer's FED ID 95-16423		аE	mplo		A number (X-6621	_			
1	Wage	s, tips, other		² Federal income tax withheld							
3	Socia	152 security wag	85.87 Jes	4 S	ocial	security	287.17 tax withheld				
5	5 Medicare wages and tips				6 Medicare tax withheld						
7	7 Social security tips			8 Allocated tips							
9					•	dent care					
11	Nonqu	alified plans			ee inst	ructions fo	r box 12				
14	Other			12b 12c							
				120 12d				-			
				13 St	at emp	Ret. plan	3rd party sick p	ay			
15	State	Employer's	state ID no	. 16 S	tate w	ages, tip	s, etc.	_			
	CA	910-0606	4		15285.87						
17 State income tax 85.01					18 Local wages, tips, etc.						
19 Local income tax				20 L	20 Locality name						

2023 W-2 and EARNINGS SUMMARY

SHUBHANKAR M HINGNE 1247 W 30TH ST 306 LOS ANGELES, CA 90007 Social Security Number: XXX-XX-6621

¤© 2023 ADP, Inc.

PAGE 01 OF 01

1 Wages, tips, other comp. 15285.87	2 Federal income tax withheld 287.17	1 Wages, tips, other comp. 15285.87 2 Federal income tax withheld 287.17		1 Wages, tips, other comp. 15285.87	2 Federal income tax withheld 287.17	
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld	
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	
d Control number Dept. 0000120727 TYI	Corp. Employer use only WSJ7 5743	d Control number Dept. 0000120727 TYI	Corp. Employer use only WSJ7 5743	d Control number Dept. Dept.	Corp. Employer use only 5743	
c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	nd ZIP code	c Employer's name, address, and ZIP code		
UNIVERSITY OF SOU CALIFORNIA UNIVERSITY PARK LOS ANGELES, CA		UNIVERSITY OF SOU CALIFORNIA UNIVERSITY PARK LOS ANGELES, CA		UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY PARK LOS ANGELES, CA 90089-0001		
b Employer's FED ID number 95-1642394	a Employee's SSA number XXX-XX-6621	b Employer's FED ID number 95-1642394	a Employee's SSA number XXX-XX-6621	b Employer's FED ID number 95-1642394	a Employee's SSA number XXX-XX-6621	
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits	
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a	11 Nonqualified plans	12a	
14 Other	12b	14 Other	12b	14 Other	12b	
	12c		12c		12c	
	12d		12d		12d	
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay	
e/f Employee's name, address ar	nd ZIP code	e/f Employee's name, address and ZIP code		e/f Employee's name, address and ZIP code		
SHUBHANKAR M HIN 1247 W 30TH ST 306 LOS ANGELES, CA		SHUBHANKAR M HIN 1247 W 30TH ST 306 LOS ANGELES, CA		SHUBHANKAR M HINGNE 1247 W 30TH ST 306 LOS ANGELES, CA 90007		
15 State Employer's state ID no CA 910-0606 4	.16 State wages, tips, etc. 15285.87	15 State Employer's state ID no CA 910-0606 4	.16 State wages, tips, etc. 15285.87	15 State Employer's state ID no CA 910-0606 4	. 16 State wages, tips, etc. 15285.87	
17 State income tax 85.01	18 Local wages, tips, etc.	17 State income tax 85.01	18 Local wages, tips, etc.	17 State income tax 85.01	18 Local wages, tips, etc.	
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	
Federal Filing	Сору	CA. State Filir	пд Сору	City or Local	Filing Copy	
W-2 Wage a Stateme Copy B to be filed with employee's Fed	ent ZUZ5	W-2 Wage a Statem	OMB No 1545-0008	W-2 Wage and Tax 2023 Statement OMB No. 1545-0008 Copy 2 to be filed with employee's City or Local Income Tax Return.		