

Form **W-2 Wage and Tax Statement 2023**

c Employer's name, address, and ZIP code
 UNIVERSITY OF FLORIDA
 SUITE 1250 EAST CAMPUS OFFICE BLDG
 P.O. BOX 113201
 GAINESVILLE FL 32611

e Employee's name, address, and ZIP code
 Suff. PAVAN KUMAR MANGIPUDI
 3800 SW 34TH STREET
 APT X231
 GAINESVILLE FL 32608

7 Social security tips	1 Wages, tips, other comp. 20812.86	2 Federal income tax withheld 1072.15
8 Allocated tips	3 Social security wages	4 Social security tax withheld
9	5 Medicare wages and tips	6 Medicare tax withheld
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 DD 2710.00
13 Statutory employee Retirement plan Third-party sick pay	14 Other 125 120.00	12b
b Employer identification number (EIN) 59-6002052		12c
a Employee's social security no. 759-53-1795		12d

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
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Copy B To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS Web Site at www.irs.gov/efile

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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Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.) OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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