

<b>Copy B To Be Filed With Employee's FEDERAL Tax Return</b>		<b>2023</b> OMB No. 1545-0008	
<b>a</b> Employee's social security number 850-03-8254		<b>1</b> Wages, tips, other comp. 2216.52	<b>2</b> Federal income tax withheld
<b>b</b> Employer ID number 95-6067343		<b>3</b> Social security wages	<b>4</b> Social security tax withheld
		<b>5</b> Medicare wages and tips	<b>6</b> Medicare tax withheld
<b>c</b> Employer's name, address, and ZIP code University Enterprises Corp. at CSUSB 5500 University Pkwy San Bernardino, CA 92407			
<b>d</b> Control Number N6228 204139			
<b>e</b> Employee's name, address, and ZIP code Preethi Victor 1660 Kendall Drive San Bernardino, CA 92407			
<b>7</b> Social security tips		<b>8</b> Allocated tips	<b>9</b> Advance EIC payment
<b>10</b> Dependent care benefits		<b>11</b> Nonqualified plans	<b>12a</b> Code
<b>13</b> Statutory employee		<b>14</b> Other	
Retirement plan		<b>12b</b> Code	
3rd party sick pay		<b>12c</b> Code	
CA 910-1240-1		2216.52	
<b>15</b> State Emplr.'s state I.D. #		<b>16</b> State wages, tips, etc.	<b>17</b> State income tax
<b>18</b> Local wages, tips, etc.	<b>19</b> Local income tax	<b>20</b> Locality name	

Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service

<b>Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)</b>		<b>2023</b> OMB No. 1545-0008	
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CA 910-1240-1		2216.52	
<b>15</b> State Emplr.'s state I.D. #		<b>16</b> State wages, tips, etc.	<b>17</b> State income tax
<b>18</b> Local wages, tips, etc.	<b>19</b> Local income tax	<b>20</b> Locality name	

Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

<b>Copy 1 To Be Filed With Employee's State, City, or Local Income Tax Return</b>		<b>2023</b> OMB No. 1545-0008	
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