| Copy B - For Employ | ee's Federal Income Tax Retu | | Copy 2 - For Employee | 's State Income Tax Return | 2022 OMB No. | | |
|--|---------------------------------------|--|--|--------------------------------------|---|--|--|
| | | 2023 1545-0008 | | | [CA] ZUZJ 1545-0008 | | |
| a Employee's social security number | 1 Wages, tips, other comp. 127.88 | 2 Federal income tax withheld | a Employee's social security number | 1 Wages, tips, other comp. 127.88 | 2 Federal income tax withheld | | |
| 308-89-3099 | 3 Social security wages | 4 Capiel accurity to with bald | 308-89-3099 | 3 Social security wages | | | |
| b Employer ID number | 3 Social security wages | 4 Social security tax withheld | b Employer ID number | 3 Social security wages | 4 Social security tax withheld | | |
| 95-3104280 | 5 Medicare wages and tips | 6 Medicare tax withheld | 95-3104280 | 5 Medicare wages and tips | 6 Medicare tax withheld | | |
| 95-3104280 | 5 Medicare wages and tips | | 95-5104280 | 5 Medicare wages and ups | | | |
| c Employer's name, address, | and ZIP code | | c Employer's name, address, ar | d ZIP code | 1 | | |
| Santos Manuel | . Student Union of (| CSUSB | Santos Manuel Student Union of CSUSB | | | | |
| 5500 Universi | | | 5500 University Parkway | | | | |
| San Bernardir | 10, CA 92407 | | San Bernardino, CA 92407 | | | | |
| | | | | | | | |
| d Control number B6922 2939 | | | d Control number B6922 2939 | | | | |
| | | | | | | | |
| e Employee's name, address | | | e Employee's name, address, and ZIP code | | | | |
| | Reddy Jakkireddy | | Mohan Kumar Reddy Jakkireddy | | | | |
| San Bernardir | ge Ave Apt 234 | | 1925 W College Ave Apt 234 San Bernardino, CA 92407 | | | | |
| 7 Social security tips | 8 Allocated tips | 9 Advance EIC payment | 7 Social security tips | 8 Allocated tips | 9 Advance EIC payment | | |
| | | | | | | | |
| 10 Dependent care benefits | 11 Nonqualified plans | | 10 Dependent care benefits | | | | |
| 12a | 13 Statutory e | mployee Retirement plan 3rd-party sick pay | 12a | 13 Statutory em | ployee Retirement plan 3rd-party sick pay | | |
| 12b | | | 12b | | | | |
| 12b 14 Other | | | 120 | 14 Other | | | |
| 12c | | | 12c | | | | |
| 12d | | | 12d | | | | |
| 120 | | | 120 | | | | |
| N/A | N/A | N/A | CA 910-2668-2 | 127.88 | | | |
| 15 State Employer's State ID | # 16 State wages, tips, etc. | 17 State income tax | 15 State Employer's State ID# | 16 State wages, tips, etc. | 17 State income tax | | |
| 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name | | |
| N/A | N/A | N/A | N/A | N/A | N/A | | |
| Form W-2 Wage and Tax St | | Dept. of the Treasury - IRS | Form W-2 Wage and Tax State | ement | Dept. of the Treasury - IR | | |
| i his information is being furni | ished to the Internal Revenue Service | | | | | | |

| Copy C - FOR EMPLOYEE'S RECORDS ONLY 2023 OMB No. 1545-0008 | | | | | | | | | | |
|---|--------------------------------------|----------------------------|------------------------|-----------------------|-------------------------|--------------------------------|------------------|--|--|--|
| · · · | yee's social y number | 1 Wage | es, tips, other o] | comp. 27.88 | 2 Feder | Federal income tax withheld | | | | |
| | | | al security wages | | 4 Social | 4 Social security tax withheld | | | | |
| | ver ID number | | | | | | | | | |
| 95- | 3104280 | 5 Medic | care wages an | id tips | 6 Medicare tax withheld | | | | | |
| c Employer's name, address, and ZIP code | | | | | | | | | | |
| | Santos Manuel Student Union of CSUSB | | | | | | | | | |
| | 0 Universit Bernardino | - | _ | | | | | | | |
| Sall | Bernaruino | , CA | 92407 | | | | | | | |
| | | | | | | | | | | |
| d Control number B6922 2939 | | | | | | | | | | |
| e Employee's name, address, and ZIP code | | | | | | | | | | |
| Mohan Kumar Reddy Jakkireddy | | | | | | | | | | |
| 1925 W College Ave Apt 234 | | | | | | | | | | |
| San Bernardino, CA 92407 | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 7 Social security tips | | 8 / | 8 Allocated tips | | 9 Adv | 9 Advance EIC payment | | | | |
| 10 Dependent core honofite | | 11 | 1 Nonqualified plans | | _ | | | | | |
| 10 Dependent care benefits | | | n Nonqualmed plans | | | | | | | |
| 12a | | | | 13 Statutory employee | | Retirement plan 3r | d-party sick pay | | | |
| 12b | | | | | | | | | | |
| | | | 14 Other | | | | | | | |
| 12c | | | | | | | | | | |
| 12d | | | | | | | | | | |
| CA | 910-2668-2 | | | 127.88 | | | | | | |
| 15 State Employer's State ID# | | 16 State wages, tips, etc. | | 17 S | 17 State income tax | | | | | |
| 18 Local wages, tips, etc. | | 19 Local income tax | | 20 L | 20 Locality name | | | | | |
| N/A | | | N/A | | | N/A | | | | |
| | | | | | | | | | | |

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS