**Recipient’s Primary Employer:** **[ ]  CSUSM** **[ ]  CSUSM Corporation**

**Notification of Mandatory Tax Withholding for Fringe Benefit Recipient**

**Employee Acknowledgment**

Taxation on Employee Fringe Benefit

The value of any fringe benefit provided to an employee is taxable. Taxes will be recovered from your future paycheck and will be shown on your paystub as additional tax withholding. The value of the fringe benefit will also be reported as imputed income on your W2 form.

Imputed income related to receiving a fringe benefit from the CSU, is subject to specific tax rates as follows:

Federal Tax 22%

State of California Tax 6.6%

Social Security 6.2 %

Medicare Tax 1.45 %

**Total Tax Based on Value of Fringe Benefit** **36.25%**

**By signing below, you acknowledge that you are aware of the additional tax that will be deducted from your future paycheck, based upon the value of the fringe benefit you have received.**

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**Employee Signature Employee Printed Name**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee Peoplesoft ID Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Department Name Dept ID**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Gift Card Amount Gift Card Vendor**

 Rev: 11/2020