1 Wages, tips, other compensation	2 Federal Incor	me tax withheld
460.21		16.79
Social security wages	4 Social securi	ty tax withheld
Medicare wages and tips	6 Medicare tax	withheld
511.35		7.41
Employee's SSA number	Employer use of	
442-35-1722		
Employer's FED ID number 31-6000989	d Control numb 00127626	
Employer's name, address, and ZIP code	00127020	
University of Cincinnati		
P. O. Box 210001		
Cincinnati OH 45221-0001		
Social security tips	8 Allocated tips	· · · · · · · · · · · · · · · · · · ·
Social security lips	o Allocated tipe	5
	10 Dependent	care benefits
1 Nonqualified plans	12a See instruc	ctions for box 12
3 Statutory Retirement Third-Party Employee plan Sick pay	12b	
Employée plan Sick pay ´		
4 Other	12c	
	12d	I
e Employee's first name and initial Last nam	e	Suff.
Hemanth Tadikamalla		
3253 Morrison Ave #205		
3253 Morrison Ave #205 Cincinnati OH 45220		
Cincinnati OH 45220 Employee's address and ZIP code	118 Local wage	s. tips. etc
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3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
	1.35	7.4	
a Employee's SSA number		Employer use only	
442-35-1722 b Employer's FED ID number		d Control number	
31-6000989		00127626	
c Employer's name, address, and ZIP code			
University of Cincinnat	i		
P. O. Box 210001	004		
Cincinnati OH 45221-0	0001		
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nongualified plans		12a See instructions for box 12	
13 Statutory Retirement Third-Party Employee plan Sick pay		12b	
14 Other		12c	
		12d	
e Employee's first name and initial La	ast nam	e Suff.	
f Employee's address and ZIP code           15 State         Employer's state ID           OH         51-160145		18 Local wages, tips, etc 511.35	
16 State wages, tips, etc.	60.21	19 Local income tax 10.74	
17 State income tax		20 Locality name	
Form OMB. No. 1545-0008	2.89	Cincinnati Dept. of the Treasury - Internal Revenue	
Wana and Tax	202		
Copy 2 To Be Filed With Employee's STATE		-	
1 Wages, tips, other compensation	0.01	2 Federal Income tax withheld	
3 Social security wages	50.21	4 Social security tax withheld	
5 Medicare wages and tips	4 05	6 Medicare tax withheld	
a Employee's SSA number	11.35	7.4	
442-35-1722		Employer use only	
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b Employer's FED ID number 31-6000989 c Employer's name, address, and ZIP code University of Cincinnat P. O. Box 210001 Cincinnati OH 45221-0 7 Social security tips		d Control number 00127626 8 Allocated tips	
b Employer's FED ID number 31-6000989 c Employer's name, address, and ZIP code University of Cincinnat P. O. Box 210001 Cincinnati OH 45221-0		d Control number 00127626	

2 Federal Income tax withheld

16.79

460.21

1 Wages, tips, other compensation

9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
13 Statutory Retirement Third-Party Employee plan Sick pay	12b		
14 Other	12c		
	12d		
e Employee's first name and initial Last name Suff.			
Hemanth Tadikamalla			
3253 Morrison Ave #205			
Cincinnati OH 45220			
f Employee's address and ZIP code			
15 State Employer's state ID	18 Local wages, tips, etc		
OH 51-160145	511.35		
16 State wages, tips, etc. 460.21	19 Local income tax 10.74		
17 State income tax	20 Locality name		
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Form OMB. No. 1545-0008	Dept. of the Treasury - Internal Revenue		
W-2 Wage and Tax 2020			
Statement ZUZ	U		
Copy B To Be Filed With Employee's FEDERAL Tax Return			

W-2 Wage and Tax 2020 Statement Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return

460.21

Retirement plan

e Employee's first name and initial

f Employee's address and ZIP code 15 State Employer's state ID OH 51-160145 16 State wages, tips, etc.

OMB. No. 1545-0008

17 State income tax

Third-Party Sick pay

Hemanth Tadikamalla 3253 Morrison Ave #205 Cincinnati OH 45220 12b

12c 12d

18 Local wages, tips, etc

Dept. of the Treasury - Internal Revenue

19 Local income tax

Service

20 Locality name 2.89 Cincinnati

Suff.

511.35

10.74

Last name

13 Statutory Employee

14 Other