

Form **W-2 Wage and Tax Statement** **2021**

c Employer's name, address, and ZIP code
 LSUHSC-SHREVEPORT
 PAYROLL OFFICE
 1501 KINGS HIGHWAY
 SHREVEPORT LA 71130

e Employee's name, address, and ZIP code
 ANOOP JOSE THOPPIL
 4855 AIRLINE DR
 APT 35C
 BOSSIER CITY LA 71111-6650

OMB No. 1545-0008

7 Social security tips	1 Wages, tips, other compensation	2 Federal income tax withheld
	57892.79	12054.37
8 Allocated tips	3 Social security wages	4 Social security tax withheld
9	5 Medicare wages and tips	6 Medicare tax withheld
	83645.15	1212.85
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
		E 11200.00
b Employer identification number (EIN)	14 Other	12b See instructions for box 12
72-0702002	RET 2852.36	G 11700.00
a Employee's social security number	CAF 1707.56	12c See instructions for box 12
315-61-4557		DD 4787.24
13 Statutory employee Retirement plan Third-party sick pay		12d See instructions for box 12
	X	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax
LA 0077933001	57892.79	2826.55
		18 Local wages, tips, etc.
		19 Local income tax
		20 Locality name

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return Dept. of the Treasury - IRS

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Copy 2 To Be Filed with Employee's State, City, or Local Income Tax Return 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 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 the back of Copy B.) Dept. of the Treasury - IRS

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Copy B—To Be Filed With Employee's FEDERAL Tax Return. Dept. of the Treasury - IRS

This information is being furnished to the Internal Revenue Service.

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