	a Empl numbe 160-85		OMB No. 154	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.
b Employer identification number (EIN) 37-0986220				1 Wages, tips, other compensation 2854.98 2 Federal income tax withheld 137.34
c Employer's name, address, and ZIP code SOUTHERN IL UNIV EDWARDSVILLE CAMPUS BOX 1040				3 Social security wages 4 Social security tax withheld
Edwardsville IL 62026				5 Medicare wages and tips 6 Medicare tax withheld
				7 Social security tips 8 Allocated tips
d Control r 438	number			9 10 Dependent care benefits
e Employee's first name and initial Last name Suff. Sai Prathyusha Bokku		Suff.	11 Nonqualified plans 12 See Instructions for box 12	
6 Fraser St Littleton MA 01460-1471				13 Statutory Retirement Third-party employee plan sick pay [] [] []
f Employee's address and ZIP code				14 Other
15 State IL	Employer's state ID number 09217657000	16 State wages, tips	, etc. 17 State 2854.98	income tax 141.30 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

Form W-2 Wage and Tax Statement

2021

Department of Treasury - Internal Revenue Service