	a Employee's social security number 817-29-4443	OMB No. 1545-0	This information is being furnished to t are required to file a tax return, a neglows may be imposed on you if this income	igence penalty or other sanction
b Employer identification nur 44-6000301	mber (EIN)		1 Wages, tips, other compensation	2 Federal income tax withheld 150.00
c Employer's name, address, and ZIP code Northwest MO State University 800 University Drive Maryville MO 64468			3 Social security wages	4 Social security tax withheld
			5 Medicare wages and tips	6 Medicare tax withheld
			7 Social security tips	8 Allocated tips
d Control number 2293			9	10 Dependent care benefits
e Employee's first name and initial Last name Suff. Vishal Reddy Vennavaram Hno 7 52 Velair Warangal Urban FR 0 INDIA		Suff.	11 Nonqualified plans	12 See Instructions for box 12
			13 Statutory Retirement Third-party employee plan sick pay [] [] []	
f Employee's address and ZI	P code		14 Other	
15 State Employer's state 1 MO 10659854	ID number 16 State wages, tips	, etc. 17 State inc	come tax 18 Local wages, tips, etc. 19	Local income tax 20 Locality name

Form W-2 Wage and Tax Statement