	a Employ number *****302	ree's social security	This information is being furnished to the I are required to file a tax return, a negligen OMB No. 1545-0008 may be imposed on you if this income is ta					e penalty or oth	er sanction
b Employer identification number (EIN) 31-6402079				1 Wages	1 Wages, tips, other compensation 2094.83			2 Federal income tax withheld 92.37	
c Employer's name, address, and ZIP code Kent State University PO Box 5190 Kent OH 44242				3 Social s	3 Social security wages			4 Social security tax withheld	
				5 Medicar	5 Medicare wages and tips			6 Medicare tax withheld	
				7 Social s	ecurity tips			8 Allocated tips	
d Control number 126				9 Verificat	9 Verification code			10 Dependent care benefits	
e Employe Sai teja	Employee's first name and initial Last name sai teja Salagrama		Suff.	11 Nonqu	11 Nonqualified plans			12 See Instructions for box 12	
12-29, Apt no. T1 P and T Colony Dilsukhnagar, Hyderabad Hyderabad NA 500060 India				13 Statute employ []	,	Third-party sick pay []	/		
	e's address and ZIP code								
	Employer's state ID number 511644296	16 State wages, tips,	etc. 17 9 2094.83	State income tax 14.3	18 Local wages,	tips, etc. 2094.83	19 Loca	Il income tax 47.14	20 Locality name KENT

Form W-2 Wage and Tax Statement

2022

Department of Treasury - Internal Revenue Service