Form W-2 Wage and Tax Statement	2022	7 Social security tips		1 Wages, tips, other comp. 41938.14		2 Federal income tax withheld	
c Employer's name, address, and ZIP code INDIANA UNIVERSITY		8 Allocated tips		3 Social security wages 41938.14		4 Social security tax withheld 2600.16	
1024 E 3RD ST		9		5 Medicare wages and tips 41938.14		6 Medicare tax withheld 608.10	
BLOOMINGTON IN 47405		10 Dependent care benefits 5000.00		11 Nonqualified plans		12aSee instructions for box 12 $\stackrel{\circ}{_{2}}$ DD34320.72	
e Employee's name, address, and ZIP code RAVICHAND PALAKURTI		13 Statutory Retirement Third-party plan Statutory blan Stick pay		14 Other		12b	
						12c	
705 W WALNUT STREET,		35-6001673		-			
APT A		a Employee's social security no. XXX-XX-5804				12d	
INDIANAPOLIS IN 46202				1			
15 State Employer's state ID no. 16 S IN 0003123294900 16 S	State wages, tips, etc. 41938.14	17 State income tax 1354.58	18 Loc	al wages, tips, etc. 41938.14	19 Local income tax 20 Locality na 847.11 C 49		20 Locality name C 49
Copy B To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 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 repor							-
Form W-2 Wage and Tax Statement 2022		7 Social security tips		1 Wages, tips, other comp. 41938.14		2 Federal income tax withheld	
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						12a See instructions for box 12	
e Employee's name, address, and ZIP code			d-party pay	14 Other		a DD 12b	34320.72
RAVICHAND PALAKURTI		b Employer identification number (EIN) 35-6001673)		Code	
705 W WALNUT STREET,							
APT A		a Employee's social security no.				12d	
INDIANAPOLIS IN 46202		XXX-XX-5804				ăe	
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Form W-2 Wage and Tax Statemen	t 2022	7 Social security tips	1 Wages, tips, oth	ner comp. 41938.14	2 Federal income tax withheld		
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		10 Dependent care benefits 5000		11 Nonqualified plans		34320.72	
e Employee's name, address, and ZIP code		13 Statutory Retirement Third plan Sick	-party bay 14 Other		12b		
RAVICHAND PALAKURTI 705 w Walnut Street,		b Employer identification numb	er (EIN)	v)		12c	
		35-6001673	. ,				
APT A		a Employee's social security no	D.				
INDIANAPOLIS IN 46202		XXX-XX-5804					
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IN 0003123294900	41938.14	1354.58	41938	.14	847.11	C 49	

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)

OMB No. 1545-0008

OMB No. 1545-0008

Dept. of the Treasury - IRS

Dept. of the Treasury - IRS

Form W-2 Wag	ge and Tax Statement	2022	7 Social security tips	1 Wages, tips, other co	^{mp.} .938.14	2 Federal incon	ne tax withheld	
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		10 Dependent care benefits 5000	.00 11 Nonqualified plans	11 Nonqualified plans		34320.72		
e Employee's name, address, and ZIP code RAVICHAND PALAKURTI 705 W WALNUT STREET, APT A INDIANAPOLIS IN 46202		13 Statutory Retirement Third plan sick	I-party pay 14 Other					
		b Employer identification numb 35-6001673	per (EIN)					
		a Employee's social security n XXX-XX-5804	D.			12d		
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Copy 2 To Be File	ed With Employee's State, City,	or Local Income Tax Returr	L87	OMB No. 1545-0008	5206	Dept. of	the Treasury - IRS	