	I	a Employee's social security number *****7087 OMB No. 1545					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>b</b> Employer identification number (EIN) 31-6402079						1 Wages, tips, other compensation 682.50					2 Federal income tax withheld 23.76		
Kent State	Employer's name, address, and ZIP code  (ent State University  O Box 5190					3 Social security wages					4 Social security tax withheld		
Kent OH 44242					5 Medicare wages and tips					6 Medicare tax withheld			
						7 Social security tips					8 Allocated tips		
<b>d</b> Control number 112						9 Verification code					10 Dependent care benefits		
e Employee's first name and initial Last name Ramya Donthi				9	Suff.	11 Nonqualified plans					<b>12</b> See Instructions for box 12		
316 dale drive apt 101 kent OH 44240 India					13 Statutory Retirement Third-party employee plan sick pay  [ ] [ ] [ ]								
<b>f</b> Employee's address and ZIP code													
<b>15</b> State OH	Employer's state ID 511644296	number	<b>16</b> State wages, tips, etc. 68	32.50	17 State inc	ome tax 4.35	18	Local wages, ti	ps, etc. 682.50		al income tax 15.36	<b>20</b> Locality name KENT	

Form W-2 Wage and Tax Statement

Department of Treasury - Internal Revenue Service