

1 Wages, tips, other compensation 17493.18		2 Federal Income tax withheld 2399.75	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number 385-91-8574		Employer use only	
b Employer's FED ID number 38-2963835		d Control number 00003593	
c Employer's name, address, and ZIP code Michigan Public Health Institute 2436 Woodlake Circle, Ste 300 Okemos MI 48864			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 C 22.24	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b E 1519.21	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. Nireesha Ponnam 700 Marshall Farm Street Wake Forest NC 27587			
f Employee's address and ZIP code			
15 State NC	Employer's state ID 38-2963835	18 Local wages, tips, etc	
16 State wages, tips, etc. 17493.18		19 Local income tax	
17 State income tax 660.00		20 Locality name	
Form W-2 OMB. No. 1545-0008 Wage and Tax Statement 2023 Dept. of the Treasury - Internal Revenue Service. This information is being furnished to the IRS. 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.			
Copy C for Employee's records			

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3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
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b Employer's FED ID number 38-2963835		d Control number 00003593	
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11 Nonqualified plans		12a See instructions for box 12 C 22.24	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b E 1519.21	
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		12d	
e Employee's first name and initial Last name Suff. Nireesha Ponnam 700 Marshall Farm Street Wake Forest NC 27587			
f Employee's address and ZIP code			
15 State NC	Employer's state ID 38-2963835	18 Local wages, tips, etc	
16 State wages, tips, etc. 17493.18		19 Local income tax	
17 State income tax 660.00		20 Locality name	
Form W-2 OMB. No. 1545-0008 Wage and Tax Statement 2023 Dept. of the Treasury - Internal Revenue Service			
Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation 17493.18		2 Federal Income tax withheld 2399.75	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number 385-91-8574		Employer use only	
b Employer's FED ID number 38-2963835		d Control number 00003593	
c Employer's name, address, and ZIP code Michigan Public Health Institute 2436 Woodlake Circle, Ste 300 Okemos MI 48864			
7 Social security tips		8 Allocated tips	
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e Employee's first name and initial Last name Suff. Nireesha Ponnam 700 Marshall Farm Street Wake Forest NC 27587			
f Employee's address and ZIP code			
15 State NC	Employer's state ID 38-2963835	18 Local wages, tips, etc	
16 State wages, tips, etc. 17493.18		19 Local income tax	
17 State income tax 660.00		20 Locality name	
Form W-2 OMB. No. 1545-0008 Wage and Tax Statement 2023 Dept. of the Treasury - Internal Revenue Service			
Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation 17493.18		2 Federal Income tax withheld 2399.75	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number 385-91-8574		Employer use only	
b Employer's FED ID number 38-2963835		d Control number 00003593	
c Employer's name, address, and ZIP code Michigan Public Health Institute 2436 Woodlake Circle, Ste 300 Okemos MI 48864			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 C 22.24	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b E 1519.21	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. Nireesha Ponnam 700 Marshall Farm Street Wake Forest NC 27587			
f Employee's address and ZIP code			
15 State NC	Employer's state ID 38-2963835	18 Local wages, tips, etc	
16 State wages, tips, etc. 17493.18		19 Local income tax	
17 State income tax 660.00		20 Locality name	
Form W-2 OMB. No. 1545-0008 Wage and Tax Statement 2023 Dept. of the Treasury - Internal Revenue Service			
Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			