	nı	Employee's social security Imber ****5185	OMB No. 154	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     2 Federal income tax withheld       1953.68     58.4
<b>c</b> Employer's name, address, and ZIP code Kent State University PO 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 7097	number			9 Verification code 10 Dependent care benefits
<b>e</b> Employe Nikhil	ee's first name and initi	al Last name Velakurthy	Suff.	11 Nonqualified plans 12 See Instructions for box 12
1984 Hastings Dr Kent OH 442404614				13 Statutory Retirement Third-party   employee plan sick pay   [ ] [ X ] [ ]
f Employee's address and ZIP code				14 Other
<b>15</b> State OH	Employer's state ID n 511644296		etc. <b>17</b> State 1953.68	e income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name 2170.76 48.84 KENT

Form W-2 Wage and Tax Statement

2023

Department of Treasury - Internal Revenue Service