

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 1545-0008 2 Federal income tax withheld a Employee's soc. sec. no. 1 Wages, tips, other comp 8255.07 0.00 XXX-XX-7782 3 Social security wages 4 Social security tax withheld 0.00 0.00 b Employer ID number 6 Medicare tax withheld 5 Medicare wages and tips 31-6402332 133.00 9172.31 c Employer's name, address, and ZIP code OLENTANGY LOCAL SCHOOL DISTRIC 7840 GRAPHICS WAY LEWIS CENTER, OH 43035 d Control number CREATED BY EMPLOYEE ACCESS CENTER e Employee's name, address, and ZIP code LALITHASHREE SATHIYANARAYANAN 139 CABOOSE LN DELAWARE, OH 43015 7 Social security tips 8 Allocated tips 0.00 0.00 10 Dependent care benefits 11 Nonqualified plans 12a Code 0.00 12b Code 13 Statutory employee 12c Code Retirement plan 12d Code Third-party sick pay OH 51-1644619 109.79 8255.07 17 State income tax 15 State Emplr's state I.D. # 16 State wages, tips, etc. 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.) OMB No. 1545-0008 a Employee's soc. sec. no. 1 Wages, tips, other comp. 2 Federal income tax withheld 0.00 XXX-XX-7782 3 Social security wages 8255.07 4 Social security tax withheld b Employer ID number 0.00 0.00 5 Medicare wages and tips 9172.31 6 Medicare tax withheld 31-6402332 133.00 c Employer's name, address, and ZIP code OLENTANGY LOCAL SCHOOL DISTRIC 7840 GRAPHICS WAY LEWIS CENTER, OH 43035 d Control number_ e Employee's name, address, and ZIP code LALITHASHREE SATHIYANARAYANAN 139 CABOOSE LN DELAWARE, OH 43015 7 Social security tips 8 Allocated tips 0.00 0.00 10 Dependent care benefits 11 Nonqualified plans 12a Code See Inst. for box 12 0.00 13 Statutory employee 14 Other 12b Code Retirement plan 12c Code

8255.07

16 State wages, tips, etc.

19 Local income tax

Form W-2 Wage and Tax Statement 2023 Dept. of the Treasur. This information isbeing furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

Third-party sick pay

OH 51-1644619

18 Local wages, tips, etc.

15 State Emplr's state I.D.#

12d Code

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17 State income tax

20 Locality name

Form W-2 Wage and Tax Sta	atement 2023	Dept. of the Treasury IRS
Form W-2 Wage and Tax St	2023	Dept. of the freasury inco
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City, or Local Inco	ome Tax Return	OMB No. 1545-0008
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c Employer's name, address		133.00
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LEWIS CENTER, OH 43035		
d Control number CREATED BY EMPLOYEE ACCESS CENTER		
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139 CABOOSE LN		
DELAWARE, OH 43015		
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7 Social security tips	8 Allocated tips	9
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Form W-2 Wage and Tax Statement 2023		Dept. of the Treasury IRS
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