2023 W-2 and EARNINGS SUMMARY Employee Reference Copy This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that W-2 Wage and Tax you may also find helpful. The following reflects your final pay stub, plus Statement OMB No. 1545-0008 any adjustments made by your employer. GROSS PAY 0.00 Employer use only SOCIAL SECURITY 5.660.23 TAX WITHHELD 0000013670 NQ8 C87M BOX 04 OF W-2 c Employer's name, address, and ZIP code 0.00 FED. INCOME 0.00 MEDICARE TAX DEPAUL UNIVERSITY TAX WITHHELD WITHHELD 1 E JACKSON BLVD BOX 02 OF W-2 BOX 06 OF W-2 CHICAGO, IL 60604 0.00 STATE INCOME TAX 280.18 SUI/SDI BOX 17 OF W-2 LOCAL INCOME TAX BOX 14 OF W-2 0.00 BOX 19 OF W-2 e/f Employee's name, address, and ZIP code GLORIA FRANCIS FARGOSE 500 E 33RD ST APT 1812 CHICAGO, IL 60616 a Employee's SSA numbe XXX-XX-6299 2 Federal income tax withh b Employer's FED ID nun 36-2167048 1 Wages, tips, other 5660.23 3 Social security wages 4 Social security tax withheld 5 Medicare wages and tips 6 Medicare tax withheld To change your employee W-4 profile information 7 Social security tips 8 Allocated tips file a new W-4 with your payroll department 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 Social Security Number: XXX-XX-6299 14 Other GLORIA FRANCIS FARGOSE 500 E 33RD ST APT 1812 12d | 13 Stat emp. | Ret, plan | 3rd party sick pa CHICAGO, IL 60616 15 State Employer's state ID no. 16 State wages, tips, etc. 36-2167048 000 2 5660.23 17 State income tax 18 Local wages, tips, etc 280.18 19 Local income tax 20 Locality name © 2023 ADP. Inc. PAGE 1 OF 1 Fold and Detach Here Wages, tips, other comp 2 Federal income tax withheld Wages, tips, other comp. 2 Federal income tax withheld 1 Wages, tips, other comp. 2 Federal income tax withheld 5660.23 5660.23 5660.23 3 Social security wages 3 Social security wages 4 Social security tax withheld 4 Social security tax withheld 3 Social security wages 4 Social security tax withheld 5 Medicare wages and tips 6 Medicare tax withheld 5 Medicare wages and tips 6 Medicare tax withheld 5 Medicare wages and tips 6 Medicare tax withheld Corp. d Control number Employer use only Dept. Corp. Employer use only d Control number Employer use only 0000013670 NQ8 C87M E S 1515 0000013670 NQ8 C87M E S 1515 0000013670 NQ8 C87M E S 1515 c Employer's name, address, and ZIP code c Employer's name, address, and ZIP code c Employer's name, address, and ZIP code DEPAUL UNIVERSITY **DEPAUL UNIVERSITY DEPAUL UNIVERSITY** 1 E JACKSON BLVD CHICAGO, IL 60604 1 E JACKSON BLVD CHICAGO, IL 60604 1 E JACKSON BLVD CHICAGO, IL 60604 b Employer's FED ID number 36-2167048 a Employee's SSA numbe XXX-XX-6299 b Employer's FED ID number 36-2167048 a Employee's SSA numbe XXX-XX-6299 b Employer's FED ID number 36-2167048 a Employee's SSA numbe XXX-XX-6299 7 Social security tips 8 Allocated tips 7 Social security tips 8 Allocated tips Social security tips 8 Allocated tips 10 Dependent care benefits 10 Dependent care benefits 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 11 Nonqualified plans 12a 11 Nonqualified plans 12a 14 Other 14 Other 12b 12b 14 Other 12b 12c 12c 12d 12d 12d 13 Stat emp. Ret. plan 3rd party sick pay 13 Stat emp. Ret. plan 3rd party sick pay 13 Stat emp. Ret. plan 3rd party sick pay e/f Employee's name, address and ZIP code e/f Employee's name, address and ZIP code e/f Employee's name, address and ZIP code GLORIA FRANCIS FARGOSE GLORIA FRANCIS FARGOSE GLORIA FRANCIS FARGOSE 500 E 33RD ST APT 1812 500 E 33RD ST APT 1812 500 E 33RD ST APT 1812 CHICAGO, IL 60616 CHICAGO, IL 60616 CHICAGO, IL 60616

15 State | Employer's state ID no. 16 State wages, tips, etc. 36-2167048 000 2 5660.2

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Copy 2 to be filed with employee's State Income

L. State Filing Copy

Wage and Tax

Statement

17 State income tax

19 Local income tax

5660.23

18 Local wages, tips, etc.

20 Locality name

15 State Employer's state ID no. 16 State wages, tips, etc. IL 36-2167048 000 2 5660.2

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Federal Filing Copy

Wage and Tax

Statement

17 State income tax

19 Local income tax

5660.23

18 Local wages, tips, etc.

20 Locality name

City or Local Filing Copy Wage and Tax Statement to be filed with employee's City or Local Inco

15 State Employer's state ID no. 16 State wages, tips, etc.

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18 Local wages, tips, etc.

20 Locality name

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17 State income tax

19 Local income tax

PNCBANK, NATIONAL ASSOCIATION

PO BOX 535230

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PITTSBURGH, PA 15253-5230

For Inquiries Please Call 1-888-762-1099

E.I.N. 22-1146430

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GLORIA FRANCIS FARGOSE 500 E 33RD ST APT 1812 CHICAGO IL 60616-4037

Calendar Year 2023

Taxpayer ID XXX-XX-6299

THIS STATEMENT IS A FORM 1098 OMB NO. 1545-0901, OR A FORM 1098-E OMB NO. 1545-1576, OR 1099-A OMB NO. 1545-0877 OR 1099-B OMB NO. 1545-0715 OR 1099-C OMB NO. 1545-1424, OR 1099-DIV OMB NO. 1545-0110 OR 1099-INT OMB NO. 1545-0112 OR 1099-MISC OMB NO. 1545-0115 OR 1099-OID OMB NO. 1545-0117 U.S. INFORMATION RETURN

2023 - 1099-INT, INTEREST INCOME

ACCOUNT NUMBER

HIGH-YIELD SAV 0071 47-2633-9968

BOX 1

INTEREST INCOME

TOTAL INTEREST

BOX 1 INTEREST 57.25

57.25

57.25

THIS IS IN

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THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.

*FORM 1098 CAUTION: THE AMOUNT SHOWN MAY NOT BE FULLY DEDUCTIBLE BY YOU. LIMITS BASED ON THE LOAN AMOUNT AND THE COST AND VALUE OF THE SECURED PROPERTY MAY APPLY. ALSO, YOU MAY ONLY DEDUCT INTEREST TO THE EXTENT IT WAS INCURRED BY YOU, ACTUALLY PAID BY YOU, AND NOT REIMBURSED BY ANOTHER PERSON.

* FORM 1099-OID; THIS MAY NOT BE THE CORRECT FIGURE TO REPORT ON YOUR INCOME TAX RETURN.

PLEASE REFER TO THE INSTRUCTIONS ON THE BACK OF THIS STATEMENT.

COPY B FOR PAYER, RECIPIENT, BORROWER, OR DEBTOR