

b Employer identification number (EIN) 74-2579628		12a See instructions for Box 12		1 Wages, tips, other compensation 7657.09	2 Federal income tax withheld 594.61	
c Employer's name, address, and ZIP code NORTHERN ARIZONA UNIVERSITY PO BOX 4113 FLAGSTAFF, AZ 86011-4113		12b		3 Social security wages	4 Social security tax withheld	
		12c		5 Medicare wages and tips	6 Medicare tax withheld	
		12d		7 Social security tips	8 Allocated tips	
		12e		9	10 Dependent care benefits	
d Employer's name, address, and ZIP code VARNA GOBBUR 813 W UNIVERSITY AVE APT 9-909 FLAGSTAFF, AZ 86001-7105		This information is being furnished to the Internal Revenue Service		11 Nonqualified plans	13 <input type="checkbox"/> Health insurance <input type="checkbox"/> Retirement plan <input type="checkbox"/> Tuition and fees	
		Copy B—To Be Filed With Employee's FEDERAL Tax Return		14 Other		
		e Employer's social security number Applied For				
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
AZ	74-2579628	7657.09	59.71			

Form **W-2** Wage and Tax Statement 2023 Department of the Treasury Internal Revenue Service OMB # 1545-0046 Copy B—To Be Filed With Employee's FEDERAL Tax Return

b Employer identification number (EIN) 74-2579628		12a See instructions for Box 12		1 Wages, tips, other compensation 7657.09	2 Federal income tax withheld 594.61	
c Employer's name, address, and ZIP code NORTHERN ARIZONA UNIVERSITY PO BOX 4113 FLAGSTAFF, AZ 86011-4113		12b		3 Social security wages	4 Social security tax withheld	
		12c		5 Medicare wages and tips	6 Medicare tax withheld	
		12d		7 Social security tips	8 Allocated tips	
		12e		9	10 Dependent care benefits	
d Employer's name, address, and ZIP code VARNA GOBBUR 813 W UNIVERSITY AVE APT 9-909 FLAGSTAFF, AZ 86001-7105		This information is being furnished to the Internal Revenue Service		11 Nonqualified plans	13 <input type="checkbox"/> Health insurance <input type="checkbox"/> Retirement plan <input type="checkbox"/> Tuition and fees	
		Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return		14 Other		
		e Employer's social security number Applied For				
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
AZ	74-2579628	7657.09	59.71			

Form **W-2** Wage and Tax Statement 2023 Department of the Treasury Internal Revenue Service OMB # 1545-0046 Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return

b Employer identification number (EIN) 74-2579628		12a See instructions for Box 12		1 Wages, tips, other compensation 7657.09	2 Federal income tax withheld 594.61	
c Employer's name, address, and ZIP code NORTHERN ARIZONA UNIVERSITY PO BOX 4113 FLAGSTAFF, AZ 86011-4113		12b		3 Social security wages	4 Social security tax withheld	
		12c		5 Medicare wages and tips	6 Medicare tax withheld	
		12d		7 Social security tips	8 Allocated tips	
		12e		9	10 Dependent care benefits	
d Employer's name, address, and ZIP code VARNA GOBBUR 813 W UNIVERSITY AVE APT 9-909 FLAGSTAFF, AZ 86001-7105		This information is being furnished to the Internal Revenue Service		11 Nonqualified plans	13 <input type="checkbox"/> Health insurance <input type="checkbox"/> Retirement plan <input type="checkbox"/> Tuition and fees	
		Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return		14 Other		
		e Employer's social security number Applied For				
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
AZ	74-2579628	7657.09	59.71			

Form **W-2** Wage and Tax Statement 2023 Department of the Treasury Internal Revenue Service OMB # 1545-0046 Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return

b Employer identification number (EIN) 74-2579628		12a See instructions for Box 12		1 Wages, tips, other compensation 7657.09	2 Federal income tax withheld 594.61	
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		Copy C—For EMPLOYEE'S RECORDS (see Notice to Employee on back)		14 Other		
		e Employer's social security number Applied For				
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Form **W-2** Wage and Tax Statement 2023 Department of the Treasury Internal Revenue Service OMB # 1545-0046 Copy C—For EMPLOYEE'S RECORDS (see Notice to Employee on back)