	a Employee' *****9896	s social security number	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 5-0008 may be imposed on you if this income is taxable and you fail to report it.						
b Employer identification number (EIN) 61-1730890				1 Wages, tips,	es, tips, other compensation 55775.33			2 Federal income tax withheld 6423.07		
c Employer's name, address, and ZIP code Oregon State University PO BOX 1086				3 Social security wages			4 Social sec	4 Social security tax withheld		
Corvallis OR 97339-1086				5 Medicare wages and tips			6 Medicare	6 Medicare tax withheld		
				7 Social security tips			8 Allocated tips			
d Control number 777				9			10 Depende	10 Dependent care benefits		
e Employee's first name and initial George		Last name Augustin	Suff.	11 Nonqualified plans 0.			00 12 See Instr DD	12 See Instructions for box 12 DD 6683.19		
1005 SW Washington Ave Apt 5 Corvallis OR 97333-4328				13 Statutory employee []	Retirement plan []	Third-party sick pay []				
f Employee's address and ZIP code				14 Other ORSTTW Other		55. 115.				
15 State OR	Employer's state ID number 1645577-4	16 State wages, tips, etc. 55775.32	17 State incom	ne tax 4367.91	18 Local wages, tips, etc.	19 Local inco	me tax	20 Locality name		

Form W-2 Wage and Tax Statement

2023

Department of Treasury - Internal Revenue Service