

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code

ASCENSION HEALTH MINISTRY SERV
AGENT FOR ASCENSION INFORMATION SERVI
4040 VINCENNES CIRCLE
INDIANAPOLIS IN 46268

e Employee's name, address, and ZIP code

S P BALASUBRAHMANYAM
24515 W MAGNETIC WAY
PLAINFIELD IL 60585

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	27-3138686	62466.03	2906.62			

Copy B To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.
OMB No. 1545-0008

Dept. of the Treasury - IRS
Visit the IRS Web Site at www.irs.gov/efile

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.

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code

ASCENSION HEALTH MINISTRY SERV
AGENT FOR ASCENSION INFORMATION SERVI
4040 VINCENNES CIRCLE
INDIANAPOLIS IN 46268

e Employee's name, address, and ZIP code

S P BALASUBRAHMANYAM
24515 W MAGNETIC WAY
PLAINFIELD IL 60585

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	27-3138686	62466.03	2906.62			

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)

OMB No. 1545-0008

Dept. of the Treasury - IRS

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code

ASCENSION HEALTH MINISTRY SERV
AGENT FOR ASCENSION INFORMATION SERVI
4040 VINCENNES CIRCLE
INDIANAPOLIS IN 46268

e Employee's name, address, and ZIP code

S P BALASUBRAHMANYAM
24515 W MAGNETIC WAY
PLAINFIELD IL 60585

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	27-3138686	62466.03	2906.62			

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

OMB No. 1545-0008

Dept. of the Treasury - IRS

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code

ASCENSION HEALTH MINISTRY SERV
AGENT FOR ASCENSION INFORMATION SERVI
4040 VINCENNES CIRCLE
INDIANAPOLIS IN 46268

e Employee's name, address, and ZIP code

S P BALASUBRAHMANYAM
24515 W MAGNETIC WAY
PLAINFIELD IL 60585

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	27-3138686	62466.03	2906.62			

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

L87

OMB No. 1545-0008

5206

Dept. of the Treasury - IRS