Copy B To Be Filed with Employee's 2023								
FEDERAL Tax R	B No. 1545-0008							
a Employee's SSN	1 Wages, tips, ot	her comp. 12312.75	2 Federal	income tax withheld 591.00				
043-59-6919	3 Social security	wages	4 Social security tax withheld					
b Employer ID no. (EIN)		12312.75		763.39				
83-2153688	5 Medicare wage	s and tips 12312.75	6 Medica	re tax withheld 178.53				
c Employer's name, address, and ZIP code STREATOR TWO DONUTS INC								
2608 W PETERSON AVE #201								
STREATOR	IL	60659						
d Control number								
e Employee's name, address, and ZIP code Suff. ANITHA ALIGE 1 MARILLA PARK RD STREATOR IL 61364								
7 Social security tips 8 Allocated tips			9					
10 Dependent care benefits 11 Nonqualified plans			12a Code See inst. for box 12					
13	14 Other		12b Code					
Statutory employee	110410		,					
Retirement Plan		12c Code						
			12d Code					
Third-party sick pay								
IL 83-2153	2.75	567.13						
15 State Employer's state ID number 16 State wages, tips			ps, etc.	17 State income tax				
18 Local wages, tips, et	c. 19 Local ir	ncome tax		lity name				
Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS								

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.

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employees).					2023 OMB No. 1545-0008		
a Employee's SSN	1 Wages, tips, other comp.			2 Federal income tax withheld			
a Employee's 3314		12312.75			591.00		
043-59-6919	3 Social security wages			4 Sc	4 Social security tax withheld		
b Employer ID no. (EIN)	12312.75			763.39			
a mproyer to the (arry	5 Medicare wages and tips			6 Medicare tax withheld			
83-2153688	12312.75			178.53			
c Employer's name, address, and ZIP code STREATOR TWO DONUTS INC							
2608 W PETERSON AVE #201							
STREATOR				I	L	60659	
d Control number							
e Employee's name, address, and ZIP code Suff. ANITHA ALIGE							
1 MARILLA PARK RD STREATOR IL 61364							
STREATOR IL 61364 7 Social security tips 8 Allocated tips 9						01301	
7 Social security tips	8 Allocated tips						
10 Dependent care bene	11 Nonqualified plans			12a Code See inst. for box 12			
13	14 Ot	her		1	12b Code		
Statutory employee				12c Code			
Retirement Plan				12d Code			
Third-party sick pay							
IL 83-2153688 000 1231				L2.	75	567.13	
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 L	20 Locality name		
Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS							

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. **2023** OMB No. 1545-0008 1 Wages, tips, other comp. 2 Federal income tax withheld a Employee's SSN 591.00 12312.75 043-59-6919 4 Social security tax withheld 3 Social security wages 12312.75 763.39 **b** Employer ID no. (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 83-2153688 178.53 12312.75 c Employer's name, address, and ZIP code STREATOR TWO DONUTS INC 2608 W PETERSON AVE #201 IL 60659 STREATOR d Control number e Employee's name, address, and ZIP code Suff. ANITHA ALIGE 1 MARILLA PARK RD IL 61364 STREATOR 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a Code See inst. for box 12 14 Other 12b Code Statutory employee 12c Code Retirement Plan 12d Code Third-party sick pay 12312.75 83-2153688 000 567.13 17 State income tax 16 State wages, tips, etc. 15 State Employer's state ID number 20 Locality name 18 Local wages, tips, etc. 19 Local income tax

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

REV 11/30/23 QBDT

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. OMB No. 1545-0008							
City, or Local Income Tax Return.				2 Federal income tax withheld			
a Employee's SSN	i wages, ups, or	12312.75	591.00				
043-59-6919	3 Social security			4 Social security tax withheld			
043-59-6919	3 Social Security		763.39				
b Employer ID no. (EIN)		12312.75	6 Medicare tax withheld				
	5 Medicare wage	and the same and t	178.53				
83-2153688		12312.75		1/0.53			
c Employer's name, address, and ZIP code STREATOR TWO DONUTS INC							
2608 W PETERSON AVE #201							
STREATOR			IL	60659			
d Control number							
e Employee's name, address, and ZIP code Suff. ANITHA ALIGE 1 MARILLA PARK RD							
STREATOR IL 61364							
7 Social security tips	8 Allocat	8 Allocated tips					
10 Dependent care bene	efits 11 Nonqu	11 Nonqualified plans		12a Code See inst. for box 12			
13	14 Other		12b Code				
Statutory employee							
	12c C	12c Code					
Retirement Plan	12d C	12d Code					
Third-party sick pay							
IL 83-2153688 000 1231				567.13			
15 State Employer's state ID number 16 State wages, tips, etc. 17 State incom							
18 Local wages, tips, etc. 19 Local income tax			20 Locality name				
Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS							