

1 Wages, tips, other compensation 3588.75		2 Federal Income tax withheld	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number XXX-XX-8032		Employer use only	
b Employer's FED ID number 38-6004447		d Control number 00850609	
c Employer's name, address, and ZIP code CENTRAL MICHIGAN UNIVERSITY 1200 SOUTH FRANKLIN STREET MOUNT PLEASANT MI 48859			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. POOJA NELLA FLAT NO-101,1ST FLOOR,SWARAJ REGENCY NEAR PARADISE HOTEL KARIMNAGAR TG 50500-1 India			
f Employee's address and ZIP code		18 Local wages, tips, etc	
15 State MI	Employer's state ID 690354473	19 Local income tax	
16 State wages, tips, etc. 3588.75		20 Locality name	
17 State income tax 152.52			
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy C for Employee's records			

1 Wages, tips, other compensation 3588.75		2 Federal Income tax withheld	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number XXX-XX-8032		Employer use only	
b Employer's FED ID number 38-6004447		d Control number 00850609	
c Employer's name, address, and ZIP code CENTRAL MICHIGAN UNIVERSITY 1200 SOUTH FRANKLIN STREET MOUNT PLEASANT MI 48859			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. POOJA NELLA FLAT NO-101,1ST FLOOR,SWARAJ REGENCY NEAR PARADISE HOTEL KARIMNAGAR TG 50500-1 India			
f Employee's address and ZIP code		18 Local wages, tips, etc	
15 State MI	Employer's state ID 690354473	19 Local income tax	
16 State wages, tips, etc. 3588.75		20 Locality name	
17 State income tax 152.52			
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation 3588.75		2 Federal Income tax withheld	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number XXX-XX-8032		Employer use only	
b Employer's FED ID number 38-6004447		d Control number 00850609	
c Employer's name, address, and ZIP code CENTRAL MICHIGAN UNIVERSITY 1200 SOUTH FRANKLIN STREET MOUNT PLEASANT MI 48859			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. POOJA NELLA FLAT NO-101,1ST FLOOR,SWARAJ REGENCY NEAR PARADISE HOTEL KARIMNAGAR TG 50500-1 India			
f Employee's address and ZIP code		18 Local wages, tips, etc	
15 State MI	Employer's state ID 690354473	19 Local income tax	
16 State wages, tips, etc. 3588.75		20 Locality name	
17 State income tax 152.52			
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation 3588.75		2 Federal Income tax withheld	
3 Social security wages		4 Social security tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
a Employee's SSA number XXX-XX-8032		Employer use only	
b Employer's FED ID number 38-6004447		d Control number 00850609	
c Employer's name, address, and ZIP code CENTRAL MICHIGAN UNIVERSITY 1200 SOUTH FRANKLIN STREET MOUNT PLEASANT MI 48859			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. POOJA NELLA FLAT NO-101,1ST FLOOR,SWARAJ REGENCY NEAR PARADISE HOTEL KARIMNAGAR TG 50500-1 India			
f Employee's address and ZIP code		18 Local wages, tips, etc	
15 State MI	Employer's state ID 690354473	19 Local income tax	
16 State wages, tips, etc. 3588.75		20 Locality name	
17 State income tax 152.52			
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			