	a Employee's social security number 705-59-3801			OMB No. 1545-000		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.					
b Employer identification number (EIN) 31-0732831					1 Wages, tips, other compensation 5660.00				2 Federal income tax withheld 111.82		
c Employer's name, address, and ZIP code Wright State University 3640 Colonel Glenn Hwy				3 9	3 Social security wages				4 Social security tax withheld		
Dayton OH 45435			5 Medicare wages and tips					6 Medicare tax withheld			
				7 9	7 Social security tips				8 Allocated tips		
d Control (number			9					10 Dependent of	are benefits	
e Employee's first name and initial Manvitha B		Last name Baireddy	Su	iff. 11	11 Nonqualified plans			12 See Instructions for box 12			
3701 Kette Fairborn O		,			Third-part sick pay []	У					
f Employee's address and ZIP code				14	Other						
15 State OH	mployer's state ID number 1-100606 16 State wages, tips, etc		0.00	7 State incom	e tax 74.92			19 Loca	ocal income tax 28.32 SD 2903		
							5660.00		113.20	Fairbor	

Form W-2 Wage and Tax Statement

Department of Treasury - Internal Revenue Service