

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 Employee on the back of Copy 2.)		Form W-2 Wage and Tax Statement		OMB No. 1545-0008
2023		1 Wages, tips, other comp. 3705.14	2 Federal income tax withheld 230.73	
a Employee's SSN	3 Social security wages	4 Social security tax withheld		
b Employer ID No. (EIN) 06-1236737	5 Medicare wages and tips	6 Medicare tax withheld		
c Employer's name, address and ZIP code SYNCHRONY BANK 170 WEST ELECTION ROAD SUITE 125 DRAPER, UT 84020				
d Control number				
e — f Employee's name, address and ZIP code ANTARA CHANSARKAR 304 E DANIEL ST. APT. 501 CHAMPAIGN, IL 61820				
7 Social security tips	8 Allocated tips	9		
10 Dependent care benefits	11 Nonqualified plans	12a code D	See instr. for box 12 3.18	
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	12b code	
14 Other			12c code	
			12d code	
15 State IL	Employer's state ID no. 06-1236737	16 State wages, tips, etc. 3705.14	17 State income tax	183.40
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		