

This information is being furnished to the Internal Revenue Service.

Copy B — To Be Filed With Employee's FEDERAL Tax Return.		Form W-2 Wage and Tax Statement		OMB No. 1545-0008
<b>2023</b>		1 Wages, tips, other comp. <b>13316.00</b>	2 Federal income tax withheld <b>317.55</b>	
a Employee's SSN XXX-XX-XXXX	3 Social security wages <b>90.00</b>	4 Social security tax withheld <b>5.58</b>		
b Employer ID No. (EIN) 37-6000511	5 Medicare wages and tips <b>90.00</b>	6 Medicare tax withheld <b>1.31</b>		
c Employer's name, address and ZIP code UNIVERSITY OF ILLINOIS UNIVERSITY PAYROLL & BENEFITS MC 547 809 S. MARSHFIELD AVENUE CHICAGO, IL 60612-7205				
d Control number 10723				
e — f Employee's name, address and ZIP code ANTARA CHANSARKAR 304 E DANIEL ST APT 505 CHAMPAIGN, IL 61820-9174				
7 Social security tips	8 Allocated tips	9		
10 Dependent care benefits	11 Nonqualified plans	12a code See instr. for box 12		
13 Statutory employee Retirement plan Third-party sick pay	12b code			
14 Other	12c code			
	12d code			
15 State IL Employer's state ID no. 37-6000511	16 State wages, tips, etc. <b>13316.00</b>	17 State income tax <b>659.15</b>		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Department of the Treasury — Internal Revenue Service

Copy 2 — To Be Filed With Employee's State, City, or Local Income Tax Return		Form W-2 Wage and Tax Statement		OMB No. 1545-0008
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18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Department of the Treasury — Internal Revenue Service

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
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