7						Federal Box	1 Soc. S	iec. Box 3 & 7	Medicare Box 5		
To th	ne right is information v	which shows your total wages	Gross Wages		17322.9	95 1	17322.95	17322.95			
W-2	box and the amount of	any deferred compensation a t were subtracted from total	Txbl Benefits								
	es to arrive at your W-2		Group Term Life Adoption		16.6	50	16.60	16.60			
of th	e letter codes used in b	se forms, including an explandox 12, are available on a	Deferred Comp								
sepa	rate document.		Section 125 Other Pretax/Wag	ge Limit (1			7339.55)	(17339.55)			
2				W-2 Wages		17339.					
	ee's social security number -XX-XXXX	b Employer identification number (EIN 36-3249852	1)	d Control number 001144709701							
	er's name, address, and ZIP coo		1 Wages, tips, other compensation			sation	OMB No. 1545-0008 2 Federal income tax withheld				
	ssociates, Inc.		3 Social secur		17339.55	4 Social security	4	2384.92			
Ste.	Sherman Avenue 800 ston IL 60201			3 docial security wages			4 Social Security				
Lvaii	Stoll IL 00201				5 Medicare wa	iges and tips		6 Medicare tax w	ithheld		
e Employe Antai	ee's first name and initial	Last name Chansarkar	ff.	7 Social security tips			8 Allocated tips 10 Dependent care benefits				
304 I	E Daniel St.	Cildisarkar									
Apt 501 Champaign IL 61820 USA											
f Employee's address and ZIP code					11 Nonqualified plans			12a See instructions for box 12 Code C 16.60			
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State in	ncome tax	13 Statutor	ry Retirement	Third-party sick Pay	12b Code			
IL	36-3249852 000 7	17339.55		857.48		×		12c			
18 Local v	wages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other		2000.00	Code 12d			
					MOVE		2000.00	Code			
	2 Wage and Tax Statement	t		2023					easury—Internal F		
сору С—Е	or EMPLOYEE'S RECORDS			2023	ne	This information is gligence penalty o	being furnished to t r other sanction may	he Internal Revenue Si be imposed on you if	ervice. If you are require this income is taxable a	d to file a tax returr nd you fail to repor	
		b Employer identification number (EIN	N.	d Control number	1						
	ee's social security number -XX-XXXX	001144709701				OMB No. 1545-0008					
c Employe	er's name, address, and ZIP co	de			1 Wages, tips,	other compen	sation 17339.55	2 Federal income	tax withheld	2384.92	
ZS Associates, Inc. 1560 Sherman Avenue						3 Social security wages			4 Social security tax withheld		
Ste. 800 Evanston IL 60201						5 Medicare wages and tips			6 Medicare tax withheld		
e Employe	ee's first name and initial	Last name	Sut	ff							
Antai	ra	Chansarkar		7 Social security tips			8 Allocated tips				
304 E Daniel St. Apt 501 Champaign IL 61820 USA					9			10 Dependent care benefits			
					11 Nonqualified plans			12a See instructions for box 12			
f Employe	ee's address and ZIP code				21.1.1			Code C		16.60	
15 State IL	Employer's state ID Number 36-3249852 000 7	16 State wages, tips, etc. 17339.55	17 State in	ncome tax 857.48	13 Statutol		sick Pay	Code			
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							Dona	to a state of the a To	anne Internal E		
	2 Wage and Tax Statement o Be Filed With Employee's FE			2023			Бера	artment of the Tr	easury - Internal F	revenue Servi	
	ee's social security number	b Employer identification number (EIN	1)	d Control number	í						
	-XX-XXXX er's name, address, and ZIP coo	36-3249852 de		001144709701	1 Wages, tips,	other compen	sation	2 Federal income		No. 1545-0008	
	ssociates, Inc.				2 Casial as sur		17339.55	4 Capial populity	tov vithbold	2384.92	
1560 Sherman Avenue Ste. 800					3 Social secur	ity wages		4 Social security	tax withheid		
Evan	ston IL 60201				5 Medicare wa	iges and tips		6 Medicare tax w	ithheld		
e Employee's first name and initial Last name Suff.					7 Social secur	ity tips		8 Allocated tips			
Antara Chansarkar 304 E Daniel St. Apt 501					9 10 Dependent care benefits						
	npaign IL 61820										
	ee's address and ZIP code			11 Nonqualifie	d plans		12a See instruct	tions for box 12	16.60		
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State in	ncome tax	13 Statutor	ry Retirement	Third-party sick Pay	12b			
<u>IL</u>	36-3249852 000 7	17339.55	 -	857.48		X		Code 12c			
18 Local v	wages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other			Code 12d			
					MOVE		2000.00	Code			
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