

Form W-2 Wage and Tax Statement 2023

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number 81716253		Employer identification number EIN 680588324		Copy B, To Be Filed With Employee's FEDERAL Tax Return			
Employer's name, address and ZIP code Battelle Energy Alliance 2525 Fremont Ave PO Box 1625 Idaho Falls, ID 83415		Employee's social security number 846-22-4737		1 Wages, tips, other compensation 33647.13	2 Federal income tax withheld 3122.25		
Employee's first name and init Last name ASRA NASEEM 4305 B RAMONA DR Fairfax, VA 22030 Suffix		7 Social security tips		3 Social security wages	4 Social security tax withheld		
		8 Allocated tips		5 Medicare wages and tips	6 Medicare tax withheld		
				10 Dependent care benefits	11 Nonqualified plans		
		12a		13 Statutory Employee <input type="checkbox"/>	14 Other		
		12b		Retirement Plan <input type="checkbox"/>			
		12c		Third-party sick pay <input type="checkbox"/>			
		12d					
15 State	Employer's state ID number	16 State wages, tips etc.	17 State income tax	18 Local wages, tips etc.	19 Local income tax	20 Locality name	
VA	30-680588324F-001	33647.13	1458.33				

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.

Form W-2 Wage and Tax Statement 2023

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number 81716253		Employer identification number EIN 680588324		Copy C, For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B)			
Employer's name, address and ZIP code Battelle Energy Alliance 2525 Fremont Ave PO Box 1625 Idaho Falls, ID 83415		Employee's social security number 846-22-4737		1 Wages, tips, other compensation 33647.13	2 Federal income tax withheld 3122.25		
Employee's first name and init Last name ASRA NASEEM 4305 B RAMONA DR Fairfax, VA 22030 Suffix		7 Social security tips		3 Social security wages	4 Social security tax withheld		
		8 Allocated tips		5 Medicare wages and tips	6 Medicare tax withheld		
				10 Dependent care benefits	11 Nonqualified plans		
		12a		13 Statutory Employee <input type="checkbox"/>	14 Other		
		12b		Retirement Plan <input type="checkbox"/>			
		12c		Third-party sick pay <input type="checkbox"/>			
		12d					
15 State	Employer's state ID number	16 State wages, tips etc.	17 State income tax	18 Local wages, tips etc.	19 Local income tax	20 Locality name	
VA	30-680588324F-001	33647.13	1458.33				

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.

Form W-2 Wage and Tax Statement 2023

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number 81716253		Employer identification number EIN 680588324		Copy 1, To Be Filed With Employee's State, City, or Local Income Tax Return			
Employer's name, address and ZIP code Battelle Energy Alliance 2525 Fremont Ave PO Box 1625 Idaho Falls, ID 83415		Employee's social security number 846-22-4737		1 Wages, tips, other compensation 33647.13	2 Federal income tax withheld 3122.25		
Employee's first name and init Last name ASRA NASEEM 4305 B RAMONA DR Fairfax, VA 22030 Suffix		7 Social security tips		3 Social security wages	4 Social security tax withheld		
		8 Allocated tips		5 Medicare wages and tips	6 Medicare tax withheld		
				10 Dependent care benefits	11 Nonqualified plans		
		12a		13 Statutory Employee <input type="checkbox"/>	14 Other		
		12b		Retirement Plan <input type="checkbox"/>			
		12c		Third-party sick pay <input type="checkbox"/>			
		12d					
15 State	Employer's state ID number	16 State wages, tips etc.	17 State income tax	18 Local wages, tips etc.	19 Local income tax	20 Locality name	
VA	30-680588324F-001	33647.13	1458.33				

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.

Form W-2 Wage and Tax Statement 2023

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Control number 81716253		Employer identification number EIN 680588324		Copy 2, To Be Filed With Employee's State, City, or Local Income Tax Return			
Employer's name, address and ZIP code Battelle Energy Alliance 2525 Fremont Ave PO Box 1625 Idaho Falls, ID 83415		Employee's social security number 846-22-4737		1 Wages, tips, other compensation 33647.13	2 Federal income tax withheld 3122.25		
Employee's first name and init Last name ASRA NASEEM 4305 B RAMONA DR Fairfax, VA 22030 Suffix		7 Social security tips		3 Social security wages	4 Social security tax withheld		
		8 Allocated tips		5 Medicare wages and tips	6 Medicare tax withheld		
				10 Dependent care benefits	11 Nonqualified plans		
		12a		13 Statutory Employee <input type="checkbox"/>	14 Other		
		12b		Retirement Plan <input type="checkbox"/>			
		12c		Third-party sick pay <input type="checkbox"/>			
		12d					
15 State	Employer's state ID number	16 State wages, tips etc.	17 State income tax	18 Local wages, tips etc.	19 Local income tax	20 Locality name	
VA	30-680588324F-001	33647.13	1458.33				

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.