

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code  
 DANA-FARBER CANCER INSTITUTE  
 450 BROOKLINE AVE  
 BOSTON MA 02215

e Employee's name, address, and ZIP code  
 Suff. DEBOLINA GANGULY  
 160 CAMBRIDGEPARK DR, UNIT #431  
 CAMBRIDGE MA 02140

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
MA	WTH-10597668	56346.37	2725.66			

**Copy B To Be Filed With Employee's FEDERAL Tax Return** This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS**  
 Visit the IRS Web Site at [www.irs.gov/efile](http://www.irs.gov/efile)

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

c Employer's name, address, and ZIP code  
 DANA-FARBER CANCER INSTITUTE  
 450 BROOKLINE AVE  
 BOSTON MA 02215

e Employee's name, address, and ZIP code  
 Suff. DEBOLINA GANGULY  
 160 CAMBRIDGEPARK DR, UNIT #431  
 CAMBRIDGE MA 02140

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
MA	WTH-10597668	56346.37	2725.66			

**Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code  
 DANA-FARBER CANCER INSTITUTE  
 450 BROOKLINE AVE  
 BOSTON MA 02215

e Employee's name, address, and ZIP code  
 Suff. DEBOLINA GANGULY  
 160 CAMBRIDGEPARK DR, UNIT #431  
 CAMBRIDGE MA 02140

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
MA	WTH-10597668	56346.37	2725.66			

**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code  
 DANA-FARBER CANCER INSTITUTE  
 450 BROOKLINE AVE  
 BOSTON MA 02215

e Employee's name, address, and ZIP code  
 Suff. DEBOLINA GANGULY  
 160 CAMBRIDGEPARK DR, UNIT #431  
 CAMBRIDGE MA 02140

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
MA	WTH-10597668	56346.37	2725.66			

**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** L87 OMB No. 1545-0008 5206 **Dept. of the Treasury - IRS**