

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

c Employer's name, address, and ZIP code

SYRACUSE UNIVERSITY
SKYTOP OFFICE BUILDING
640 SKYTOP ROAD
SYRACUSE NY 13244-5300

e Employee's name, address, and ZIP code

PRIYANKA JAIN
1098/176, TULSINAGAR
BEHIND KALIMATA MANDIR
NAGPUR 440002 INDIA

7 Social security tips	1 Wages, tips, other comp. 18764.68	2 Federal income tax withheld 772.83
8 Allocated tips	3 Social security wages	4 Social security tax withheld
9	5 Medicare wages and tips	6 Medicare tax withheld
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b
b Employer identification number (EIN) 15-0532081		12c
a Employee's social security no. XXX-XX-7994		12d
15 State Employer's state ID no. NY 150532081	16 State wages, tips, etc. 18764.68	17 State income tax 562.94
	18 Local wages, tips, etc.	19 Local income tax
		20 Locality name

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

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.

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Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)

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Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

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