| | a Employee's social security number ********* OMB | | | 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 MB No. 1545-0008 may be imposed on you if this income is taxable and you fail to report it. | | | | | |
|---|---|---|----------------|---|--|--------------------------|---|--|--|
| b Employer identification number (EIN) 37-6013590 | | | | 1 Wages, tips, | es, tips, other compensation 6689.0 | | 2 Federal income tax withheld 9.11 | | |
| c Employer's name, address, and ZIP code Eastern Illinois University 600 Lincoln Avenue | | | | 3 Social security wages | | | 4 Social security tax withheld | | |
| Charleston IL 61920 | | | | 5 Medicare wages and tips | | | 6 Medicare tax withheld | | |
| | | | | 7 Social security tips | | | 8 Allocated tips | | |
| d Control number 3451 | | | | 9 | | | 10 Dependent care benefits | | |
| | | Last name Yerragunta | Suff. | 11 Nonqualified plans 0 | | 0.00 | 10 12 See Instructions for box 12 | | |
| 2219 9th St Apt 121 Charleston IL 61920-4054 | | | | 13 Statutory Retirement Third-party employee plan sick pay [] [] [] | | | _ | | |
| f Employee's address and ZIP code | | | | 14 Other | | | | | |
| 15 State IL | Employer's state ID num 376013590 | ber 16 State wages, tips, etc. 6689.05 | 17 State incor | income tax 18 Local wages, tips, etc. 19 I 331.10 | | c. 19 Local incom | Local income tax 20 Locality name | | |
| Form W-2 Wage and Tax Statement | | | 2023 | | | Depa | Department of Treasury - Internal Revenue Service | | |