

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

c Employer's name, address, and ZIP code
 UNIVERSITY OF MINNESOTA
 319 15TH AVE SE
 B20 DONHOWE BUILDING
 MINNEAPOLIS MN 55455-0103

e Employee's name, address, and ZIP code
 Suff. RAJ VAIBHAV GUDE
 1004 7TH ST SE
 APT 301
 MINNEAPOLIS MN 55414-1462

7 Social security tips	1 Wages, tips, other comp. 4649.48	2 Federal income tax withheld 8.88
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) 41-6007513		12c
a Employee's social security no. 759-82-8477		12d
15 State Employer's state ID no. MN 8029894	16 State wages, tips, etc. 4649.48	17 State income tax 58.45
	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

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

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

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