


		a Employee's social security number XXX-XX-XXXX		Safe, accurate, FAST! Use				Visit the IRS website at www.irs.gov/efile	
OMB No. 1545-0008									
b Employer identification number (EIN) XX-XXXXXXX				1 Wages, tips, other compensation 7,225.00		2 Federal income tax withheld 901.00			
c Employer's name, address, and ZIP code IVY LEAGUE UNIVERSITY 221 WHITNEY AVENUE YOUR TOWN, YS XXXXX				3 Social security wages		4 Social security tax withheld			
				5 Medicare wages and tips		6 Medicare tax withheld			
				7 Social security tips		8 Allocated tips			
d Control number				9		10 Dependent care benefits			
e Employee's first name and initial Last name Suff. SIMONE DUPONT IVY LEAGUE UNIVERSITY 250 CHURCH STREET YOUR TOWN, YS XXXXX				11 Nonqualified plans		12a See instructions for box 12 C o d e			
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C o d e			
				14 Other		12c C o d e			
						12d C o d e			
f Employee's address and ZIP code									
15 State Employer's state ID number YS XX-XXXXXXX		16 State wages, tips, etc. 7,225.00		17 State income tax 125.00		18 Local wages, tips, etc.		19 Local income tax	
								20 Locality name	

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

2022

Department of the Treasury—Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.