	a Employee number ****4563	's social security	OMB No. 1545-0	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.					
b Employer identification number (EIN) 61-1730890				1 Wages, tips, other compensation			2 Federal income tax withheld		
c Employer's name, address, and ZIP code Oregon State University PO BOX 1086					3 Social security wages			4 Social security tax withheld	
Corvallis OR 97339-1086				5 Medicare wages and tips			6 Medicare tax withheld		
				7 Social security tips				8 Allocated tips	
d Control number 14965				9				10 Dependent care benefits	
e Employee's first David C	Employee's first name and initial Last name Suff. Vasquez		Suff.	11 Nonqualified plans .00				12 See Instructions for box 12 DD	
f Employee's address and ZIP code 155 NW Kings Blvd Apt 647				13 Statutory employe		Third-party sick pay []	,		
Corvallis OR 97330-6565				14 Other ORSTTW					
15 State Employed OR 164557	er's state ID number 7-4	16 State wages, tips, etc.	17 State inc	come tax	18 Local wages, t	ips, etc.	19 Loca	al income tax	20 Locality name

Form W-2 Wage and Tax Statement