	a Employee's social security number *****4563			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 OMB No. 1545-0008 may be imposed on you if this income is taxable and you fail to report it.							
<b>b</b> Employer identification number (EIN) 61-1730890					1 Wages,	1 Wages, tips, other compensation 27269.92			2 Federal income tax withheld 1586.88		
c Employer's name, address, and ZIP code Oregon State University PO BOX 1086 Corvallis OR 97339-1086					<b>3</b> Social security wages 9244.56			<b>4</b> Social security tax withheld 573.16			
					<b>5</b> Medicare wages and tips 9244.56				<b>6</b> Medicare tax withheld 134.05		
					<b>7</b> Social se	curity tips			8 Allocated tip:	5	
<b>d</b> Control number 15190					9				10 Dependent care benefits		
<b>e</b> Employee's first name and initial David C		tial	Last name Vasquez	Suff.	11 Nonqualified plans .00			12 See Instructions for box 12 DD 5161.65			
f Employee's address and ZIP code 155 NW Kings Blyd Apt 647				13 Statutor employe	•	Third-party sick pay [ ]					
Corvallis OR 97330-6565					<b>14</b> Other ORSTTW						
<b>15</b> State OR	Employer's state ID 1 1645577-4	number	<b>16</b> State wages, tips, etc. 27269		ncome tax 1564.29	<b>18</b> Local wages, tips, etc.		19 Local income tax		20 Locality	y name

Form W-2 Wage and Tax Statement

2020

Department of Treasury - Internal Revenue Service

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