

Form **W-2 Wage and Tax Statement** 2017

c Employer's name, address, and ZIP code

UT M.D. ANDERSON CANCER CENTER  
HR PAYROLL SERVICES, UNIT 1696  
1515 HOLCOMBE BLVD.  
HOUSTON TX 77030

e Employee's name, address, and ZIP code

TRINITY A LAWRENCE  
4128 MEYERWOOD  
HOUSTON TX 77025

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	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. 1545-0008Dept. of the Treasury - IRS  
Visit the IRS website at [www.irs.gov/efile](http://www.irs.gov/efile).

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.

Form **W-2 Wage and Tax Statement** 2017

c Employer's name, address, and ZIP code

UT M.D. ANDERSON CANCER CENTER  
HR PAYROLL SERVICES, UNIT 1696  
1515 HOLCOMBE BLVD.  
HOUSTON TX 77030

e Employee's name, address, and ZIP code

TRINITY A LAWRENCE  
4128 MEYERWOOD  
HOUSTON TX 77025

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
----------	----------------------------	----------------------------	---------------------	----------------------------	---------------------	------------------

Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

OMB No. 1545-0008

Dept. of the Treasury - IRS  
Visit the IRS website at [www.irs.gov/efile](http://www.irs.gov/efile).Form **W-2 Wage and Tax Statement** 2017

c Employer's name, address, and ZIP code

UT M.D. ANDERSON CANCER CENTER  
HR PAYROLL SERVICES, UNIT 1696  
1515 HOLCOMBE BLVD.  
HOUSTON TX 77030

e Employee's name, address, and ZIP code

TRINITY A LAWRENCE  
4128 MEYERWOOD  
HOUSTON TX 77025

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
----------	----------------------------	----------------------------	---------------------	----------------------------	---------------------	------------------

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return

OMB No. 1545-0008

Dept. of the Treasury - IRS

Form **W-2 Wage and Tax Statement** 2017

c Employer's name, address, and ZIP code

UT M.D. ANDERSON CANCER CENTER  
HR PAYROLL SERVICES, UNIT 1696  
1515 HOLCOMBE BLVD.  
HOUSTON TX 77030

e Employee's name, address, and ZIP code

TRINITY A LAWRENCE  
4128 MEYERWOOD  
HOUSTON TX 77025

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
----------	----------------------------	----------------------------	---------------------	----------------------------	---------------------	------------------

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return

OMB No. 1545-0008

Dept. of the Treasury - IRS