		a Employee's	social security number	OMB No. 154	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) 37-6013590					1 Wages, tips, other compensation 2648.6			2 Federal income tax withheld 138.14		
c Employer's name, address, and ZIP code Eastern Illinois University 600 Lincoln Avenue					3 Social security wages			4 Social security tax withheld		
Charleston IL 61920					5 Medicare wages and tips			6 Medicare tax withheld		
					7 Social security tips			8 Allocated tips		
d Control number 3121					9			10 Dependent care benefits		
e Employee's first name and initial Samuel O		Last name Torimiro	Suff.	11 Nonqualified plans 0		0.00	0 12 See Instructions for box 12			
Goshenland Villa, 9, Ibukunoluwa St., Ca Ile- Ife 220101 Nigeria				13 Statutory employee []	Retirement plan []	Third-party sick pay []				
f Employee's address and ZIP code					14 Other					
1	Employer's state ID r 376013590	umber	16 State wages, tips, etc. 2648.62	17 State incom	ie tax 131.10	18 Local wages, tips, etc	. 19 Local incom	e tax	20 Locality name	

Form W-2 Wage and Tax Statement