Copy B-To Be Filed With Employee's FEDERAL Tax Return. OMB No. 1545-0008 a Employee's soc, sec. no. 1 Wages, tips, other comp. 2 Federal income tax withheld 43203.77 XXX-XX-5622 3 Social security wages b Employer ID number (EIN) 45193.29 2801.98 6 Medicare tax withheld 5 Medicare wages and tips 953372911 45193.29 655.30 c Employer's name, address, and ZIP code Total Renal Care Inc 32275 32nd Avenue South Federal Way, WA 98001 d Control number e Employee's name, address, and ZIP code Prashanth Kulkarni 13201 TELMO Irvine, CA 92618 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a Code See inst, for box 12 14.16 C 13 Statutory employee 14 Other 12b Code CASDI 451.79 1989.52 Retirement plan 12c Code 4084.59 DD Third-party sick pay 12d Code CA 28161U24

15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 20 Locality name CA 28161024 1397.96 17 State income tax Form W-2 Wage and Tax Statement 5050 Dept. of the Treasury - IRS This information is being furnished to the Internal Revenue Service.

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