								Federal Box 1	Soc. Sec. Box 3 8	k 7 Medicare Box 5	
to the right is an explanation of your W 2 magest						Gross Wage		134438.			
riease note that the Gross amount may include adjustments.						Txbl Benefit	ts	35.	.00 35.		
This information is being furnished to the Internal Revenue Service. If you are						Group Term	ı Life	74.	.88 74.	88 74.88	
required to file a tax return, a negligence penalty or other sanction may be					Adoption						
imposed on you if this income is taxable and you fail to report it.					Deferred Co	omp	(20500.0	00)			
Form W-2 Wage	and Tax Stateme	ent 2022				Section 125		(9061.1	10) (9061.1	.0) (9061.10)	
	LOYEE'S RECOR					Other Preta	x/Wage Limit	(3001.10) (300			
							, -3-	104987.	.26 125487.	26 125487.26	
						W-2 Wages		104987.	.26 125487.	26 125487.26	
D. CONTROL NUMBER				0140 1	0 4545 0000	1. WAGES, TI	IPS, OTHER COMPENSA	ATION	2. FEDERAL INCOME TA	XX WITHHELD	
000807306101			2022	OMB N	O. 1545-0008	104987.26			11960.66		
B. EMPLOYER IDENTIFIC	ATION NUMBER (EIN)	A. EMPLOYEE'S	SOCIAL SEC	URITY NUN	//BER	3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD		
39-1864073		XXX-XX-0128				125487.26			7780.21		
C. EMPLOYER'S NAME,	ADDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	THHELD	
Centene Manageme	nt Company LLC						125487	7.26		1819.57	
7700 Forsyth Blvd						7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS		
St. Louis MO 63105											
						9.			10. DEPENDENT CARE	BENEFITS	
E. EMPLOYEE'S FIRST NA	ME AND INITIAL	LAST NA	ME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d See instructions fo		
Venkata		Surapa	neni						C	74.88	
811 Stone Cellar Dr	ive					14. OTHER			D	20500.00	
St Charles MO 6330	1								W DD	7299.88 17522.40	
USA											
F. EMPLOYEE'S ADDRESS AND ZIP CODE								EMPLOYEE PLAN	REMENT X THIRD-PARTY SICK PAY		
	'S STATE ID NUMBER	16. STATE WAGE			7. STATE INCOME T		18. LOCAL WAGES, 7	IPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	
MO 186026	'3		104987	7.26		4693.00					

D. CONTROL NU 00080730610		20	022 OMB	NO. 1545-0	800	1. WAGES, TI	PS, OTHER COM	PENSATION 04987.26		2. FEDERAL INCOME TA	X WITHHELD 11960.66	
B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER			JMBER		3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD				
39-1864073 XXX-XX-0128					125487.26			7780.21				
C. EMPLOYER'S I	NAME, ADDRESS, AND ZIP C	ODE				5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD			
Centene Mana	agement Company LLC					125487.26				1819.57		
7700 Forsyth Blvd St. Louis MO 63105					7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS				
						9.				10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S F	FIRST NAME AND INITIAL	LAST NAME		SI	JFF.	11. NONQUAL	IFIED PLANS			12.a-d		
Venkata		Surapaner	ni							С	74.88	
, , , , , , , , , , , , , , , , , , ,					14. OTHER				D	20500.00		
811 Stone Cellar Drive St Charles MO 63301					THO MEN				W	7299.88		
USA									DD	17522.40		
F. EMPLOYEE'S ADDRESS AND ZIP CODE									13. STATUTORY RETIR	THIRD-PARTY SICK PAY		
15. STATE EN	MPLOYER'S STATE ID NUMBER	16. STATE WAGES, T	TIPS, ETC.	17. STATE INCO	ME T	AX	18. LOCAL WA	GES, TIPS, ETC.	19.	LOCAL INCOME TAX	20. LOCALITY NAME	
MO 18	8602673	10	04987.26			4693.00						

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 000807306101	2022	OMB NO. 1545-0008	1. WAGES, TI	PS, OTHER COMPENSATION 104987.26	2. FEDERAL INCOME T	AX WITHHELD 11960.66		
B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER				CURITY WAGES	4. SOCIAL SECURITY	4. SOCIAL SECURITY TAX WITHHELD		
39-1864073 XXX-XX-0128				125487.26		7780.21		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP O	ODE		5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WI	6. MEDICARE TAX WITHHELD		
Centene Management Company LLC				125487.26		1819.57		
7700 Forsyth Blvd St. Louis MO 63105				CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
			9.		10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL Venkata	LAST NAME Surapaneni	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d C	74.88		
			14. OTHER		D	20500.00		
811 Stone Cellar Drive St Charles MO 63301			14. OTHER		W	7299.88		
USA					DD	17522.40		
F. EMPLOYEE'S ADDRESS AND ZIP CODE					13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY		
15. STATE EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS, ET	C. 17. STATE INCOME	TAX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		
MO 18602673	104987.	26	4693.00					

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER		ONAR	NO. 1545-0008	1. WAGES, T	PS, OTHER COMPEN	SATION	2. FEDERAL INCOME TA	AX WITHHELD	
000807306101	202	22 OIVID	OIVIB NO. 1343-0008	104987.26			11960.66		
B. EMPLOYER IDENTIFICATION NUMBER (EI	A. EMPLOYEE'S SOCIA	AL SECURITY N	CURITY NUMBER		3. SOCIAL SECURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD		
39-1864073 XXX-XX-0128			125487.26			7780.21			
C. EMPLOYER'S NAME, ADDRESS, AND ZIF	CODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WIT	6. MEDICARE TAX WITHHELD	
Centene Management Company LLC				125487.26			1819.57		
7700 Forsyth Blvd St. Louis MO 63105					CURITY TIPS		8. ALLOCATED TIPS		
							10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d See instructions fo	r box 12	
Venkata	Surapaneni	i					С	74.88	
044.01. 0.11. 0.1				14. OTHER			D	20500.00	
811 Stone Cellar Drive				14. OTHER			W	7299.88	
St Charles MO 63301 USA							DD	17522.40	
F. EMPLOYEE'S ADDRESS AND ZIP CODE							13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY	
15. STATE EMPLOYER'S STATE ID NUMB	R 16. STATE WAGES, TII	PS, ETC.	17. STATE INCOME 1	AX	18. LOCAL WAGES,	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	
MO 18602673	104	4987.26		4693.00					