

Form **W-2 Wage and Tax Statement 2022**

c Employer's name, address, and ZIP code  
**MUTUAL OF OMAHA INSURANCE CO.**  
 3301 DODGE STREET  
 OMAHA NE 68131

e Employee's name, address, and ZIP code  
**S GADUPUTI SUBBAMMAGARI**  
 6714 PACIFIC ST  
 OMAHA NE 68106

|                |                                    |  |                                |                            |                     |                  |
|----------------|------------------------------------|--|--------------------------------|----------------------------|---------------------|------------------|
| 15 State<br>NE | Employer's state ID no.<br>0340081 | 16 State wages, tips, etc.<br>25460.00 | 17 State income tax<br>1136.25 | 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. 1545-0008

Dept. of the Treasury - IRS  
 Visit the IRS Web Site 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.

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

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

OMB No. 1545-0008

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