| Form W-2 Wage and Tax Statemen | t 2022 | | 7 Social security tips | | 1 Wages, tips, other com | э. | 2 Federal | income | e tax withheld |
|--|-----------------------------------|----------|---|---------------------------|--|-------------------------|--|--------------|---|
| c Employer's name, address, and ZIP code OPTUM SERVICES, INC ATTNOPERATIONS MN008-B213 9900 BREN ROAD EAST MINNETONKA MN 55343 e Employee's name, address, and ZIP code | | | 8 Allocated tips | | 3 Social security wages | | 4 Social security tax withheld | | |
| | | | 9 | | 5 Medicare wages and tips | | 6 Medicare tax withheld | | |
| | | | 10 Dependent care benefits | | 11 Nonqualified plans | | 12a See instructions for box 12 | | |
| | | | 13 Statutory Retirement Third-party plan sick pay | | 14 Other | | 12b | | |
| AVINASH RAYAPUDI | | | b Employer identification number (EIN) | | | | 12c | | |
| 13066 MARCEY CREEK RD | | | 45-4683454 a Employee's social security no. | | FED W-2 DATA IS | | 12d | | |
| HERNDON VA 20171 | | | XXX-XX-7297 | - | ON SEPARATE W- | | Code | | |
| 15 State Employer's state ID no. VA 30454683454F001 | 16 State wages, tips, etc. 78011 | | 17 State income tax 1395.67 | 18 Loc | cal wages, tips, etc. | 19 Local inc | ome tax | | 20 Locality name |
| Copy B To Be Filed With Employee's FEDERAL | Tax Return | | This information is being furnished | | Internal Revenue Service. MB No. 1545-0008 | | | | the Treasury - IRS at www.irs.gov/efile |
| | | | | - | | to the Internal Re | | | |
| | | | 7 Social security tips | | negligence penalty or other sanction may be impose 1 Wages, tips, other comp. | | evenue Service. If you are required to file a tax return, a ed on you if this income is taxable and you fail to report if 2 Federal income tax withheld | | |
| Form W-2 Wage and Tax Statement 2022 c Employer's name, address, and ZIP code OPTUM SERVICES, INC ATTNOPERATIONS MN008-B213 9900 BREN ROAD EAST MINNETONKA MN 55343 | | | 8 Allocated tips | | 3 Social security wages | | 4 Social security tax withheld | | |
| | | | · | | | | 4 Social Security tax withheld | | |
| | | | 9 | | 5 Medicare wages and tips | | 6 Medicare tax withheld | | |
| | | | 10 Dependent care benefits | | 11 Nonqualified plans | | 12a See instructions for box 12 | | |
| e Employee's name, address, and ZIP code | | | 13 Statutory Retirement Third-party sick pay | | 14 Other | | 12b | | |
| AVINASH RAYAPUDI 13066 MARCEY CREEK RD HERNDON VA 20171 | | | b Employer identification number | er (EIN) |) | | 12c | L | |
| | | | 45-4683454 a Employee's social security no. | | FED W-2 DATA IS | | 12d | | |
| HEIMEON VA 20171 | | | XXX-XX-7297 | | ON SEPARATE W- | 2 | Code | | |
| 15 State Employer's state ID no. | 16 State wages, tips, etc | | 17 State income tax | 18 Loc | al wages, tips, etc. | 19 Local inc | ome tax | | 20 Locality name |
| VA 30454683454F001 | 7801 | 1.61 | 1395.67 | | | | | | |
| Form W-2 Wage and Tax Statemen | t 2022 | | 7 Social security tips | | 1 Wages, tips, other com | o. | 2 Federa | I income | e tax withheld |
| c Employer's name, address, and ZIP code OPTUM SERVICES, INC ATTNOPERATIONS MN008-B213 9900 BREN ROAD EAST MINNETONKA MN 55343 | | | 8 Allocated tips | | 3 Social security wages | | 4 Social security tax withheld | | |
| | | | 9 | | 5 Medicare wages and tips | | 6 Medicare tax withheld | | |
| | | | 10 Dependent care benefits | | 11 Nonqualified plans | | 12a | | |
| | | | | l-narty | | | Coope | | |
| e Employee's name, address, and ZIP code AVINASH RAYAPUDI | | | 13 Statutory Retirement Third sick | l-party pay | 14 Other | | 12b | | |
| 13066 MARCEY CREEK RD HERNDON VA 20171 | | | b Employer identification number (EIN) 45-4683454 a Employee's social security no. XXX-XX-7297 | | FED W-2 DATA IS ON SEPARATE W-2 | | 12c | 1 | |
| | | | | | | | 12d | | |
| 15 State Employer's state ID no. | 16 State wages, tips, etc | | 17 State income tax | 18 Loc | al wages, tips, etc. | 19 Local inc | ome tax | | 20 Locality name |
| VA 30454683454F001 | 7801 | 1.61 | 1395.67 | | | | | | |
| Copy 2 To Be Filed With Employee's State, City | , or Local Income Tax | k Returi | 1 | OM | MB No. 1545-0008 | | De | ∍pt. of tl | he Treasury - IRS |
| | | | | | | | | | |
| Form W-2 Wage and Tax Statemen | t 2022 | | 7 Social security tips | | 1 Wages, tips, other com | p. | 2 Federal | income | e tax withheld |
| c Employer's name, address, and ZIP code OPTUM SERVICES, INC | | | 8 Allocated tips | | 3 Social security wages | | 4 Social security tax withheld | | |
| ATTNOPERATIONS MN008-B213 | | 9 | | 5 Medicare wages and tips | | 6 Medicare tax withheld | | | |
| 9900 BREN ROAD EAST | | | 10 Dependent care benefits | | 11 Nonqualified plans | | 12a | | |
| MINNETONKA MN 55343 e Employee's name, address, and ZIP code | | | 13 Statutory Retirement Third-party sick pay | | 14 Other | | 12h | | |
| AVINASH RAYAPUDI | | | | | | | 12b | | |
| 13066 MARCEY CREEK RD HERNDON VA 20171 | | | b Employer identification number (EIN) 45-4683454 a Employee's social security no. XXX-XX-7297 | | FED W-2 DATA IS | | 12c | | |
| | | | | | | | 12d | | |
| | | | ΔΔΔ-ΔΔ-1291 | | ON SEPARATE W- | 2 | e e | | |
| 15 State Employer's state ID no. VA 30454683454F001 | 16 State wages, tips, etc 7801 | | 17 State income tax 1395.67 | 18 Loc | cal wages, tips, etc. | 19 Local inc | ome tax | | 20 Locality name |
| Copy 2 To Be Filed With Employee's State, City | | | | OM | MB No. 1545-0008 | 5206 | De | ept. of the | ne Treasury - IRS |
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