

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

c Employer's name, address, and ZIP code UNITED HEALTHCARE SERVICES INC ATTN--OPERATIONS MN008-B213 9900 BREN ROAD EAST MINNETONKA MN 55343		7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld		
e Employee's name, address, and ZIP code ANUJ GARG 400 PALMER POINTE WAY HOLY SPRINGS NC 27540		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 employee Retirement plan Third-party sick pay b Employer identification number (EIN) 41-1289245 a Employee's social security no. XXX-XX-1690		14 Other		12b		
		FED W-2 DATA IS ON SEPARATE W-2		12c		
		12d				
15 State NC 054005881	Employer's state ID no.	16 State wages, tips, etc. 3469.44	17 State income tax 152.00	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.)** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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