

**Copy B -- To Be Filed With Employee's FEDERAL Tax Return.** OMB No. 1545-0008

a Employee's soc. sec. no. 475-97-5686	1 Wages, tips, other comp. 113887.40	2 Federal income tax withheld 18060.44
b Employer ID number (EIN) 35-1835818	3 Social security wages 121387.49	4 Social security tax withheld 7526.02
	5 Medicare wages and tips 121387.49	6 Medicare tax withheld 1760.12
c Employer's name, address, and ZIP code The Elevance Health Companies, Inc. An Affiliate of Elevance Health, Inc. 220 Virginia Avenue Indianapolis, IN 46204		
d Control number		
e Employee's name, address, and ZIP code Murugeshran Ranadev 555 Bottlebrush Loop Sanford, FL 32771		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12 D 7500.09
13 Statutory employee Retirement plan X Third-party sick pay	14 Other	12b Code DD 25342.72
		12c Code
		12d Code
		15 State Employer's state ID number
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2022 Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service.

**Copy 2 -- To Be Filed With employee's state, City, or Local income Tax Return.** OMB No. 1545-0008

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Form W-2 Wage and Tax Statement 2022 Dept. of the Treasury - IRS

**Copy C -- For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)** OMB No. 1545-0008

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7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12 D 7500.09
13 Statutory employee Retirement plan X Third-party sick pay	14 Other	12b Code DD 25342.72
		12c Code
		12d Code
		15 State Employer's state ID number
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2022 Dept. of the Treasury - IRS  
This information is being furnished to the IRS. 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.

**Copy 2 -- To Be Filed With Employee's State, City, or Local income Tax Return.** OMB No. 1545-0008

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