Copy B - To Be Filed With Employee's FEDERAL Tax Return.		OMB No. 1545-0	8000	
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax v	withheld	
709-24-1714	3 Social security wages	Social security tax w	vithheld	
b Employer ID number (EIN)	5 Madicara wagon and tine	2 Madiaara tax withha	ld	
39-1263473	5 Medicare wages and tips	6 Medicare tax withheld		
c Employer's name, address, a				
500 West Main S	the sale			
Louisville, KY				
d Control number			MC-PARTITION OF COLUMN STREET	
Bin Azeem Syed 1617 Hunnington Apt # 07 Louisville, KY 4				
7 Social security tips	8 Allocated tips			
10 Dependent care benefits	11 Nonqualified plans 12	2a Code See inst. for	box 12	
13 Statutory employee 14 Oth	er 12	2b Code	ANG PERVENING MERSENJAHAN KETANGAN-KANA PRANSING	
Retirement plan	12	2c Code		
Third-party sick pay	12	2d Code		
VA 30-391263473F-001	677.10	1	3.05	
15 State Employer's state ID nu		17 State income tax		
18 Local wages, tips, etc.	19 Local income tax) Locality name		
Form W-2 Wage and Tax Sta This information is being furnished	divinio divinia distanti dizansi	Dept. of the Treas	ury - IRS	

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return			OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other	comp.	2 Federal income tax withhe	
709-24-1714	3 Social security wa	iges 4	4 Social security tax withheld	
b Employer ID number (EIN)				
39-1263473	5 Medicare wages a	and tips	6 Medicare tax withheld	
c Employer's name, address Humana Insuran		The Andrews of Control		
500 West Main				
Louisville, KY				
	10202			
d Control number				
1617 Hunnington Apt # 07 Louisville, KY	40220			
7 Social security tips	8 Allocated tips			
10 Dependent care benefits	11 Nonqualified plans	s 12	2a Code	
13 Statutory employee 14 Other		12	2b Code	
Retirement plan	etirement plan		12c Code	
Third-party sick pay			2d Code	
VA 30-391263473F-001		677.10	13.05	
15 State Employer's state ID n	umber 16 State wages,	tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20	D Locality name	
Form W-2 Wage and Tax St	atement 7 [22	Dept. of the Treasury - IF	

Copy C-For EMPLOYI Notice to Employee on t	· · · · · · · · · · · · · · · · · · ·	OMB No. 1545-0008			
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld			
709-24-1714					
h Employer ID number (EIN)	3 Social security wages	4 Social security tax withheld			
b Employer ID number (EIN)	5 Medicare wages and tips	6 Medicare tax withheld			
39-1263473	o Medicare wages and tips	o Medicare tax Withheld			
c Employer's name, address,					
Humana Insuranc	ce Company				
500 West Main S	Street				
Louisville, KY	40202				
d Control number					
e Employee's name, address,	and ZIP code				
Bin Azeem Syed 1617 Hunnington	n 7				
Apt # 07	P_T				
Louisville, KY	10220				
7 Social security tips	8 Allocated tips	9			
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12			
13 Statutory employee 14 Ott	ner	12b Code			
Retirement plan		12c Code			
Third north, sick now		10d Codo			
Third-party sick pay		12d Code			
30-391263473F-001					
VA	677.1				
15 State Employer's state ID nu					
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
Form W-2 Wage and Tax Sta	itement 2022	Dept. of the Treasury - IRS			
This information is being furnished	to the IRS. If you are required to fi	le 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.					

39-1263473		iviedicare wages and tips	0	iviedicare tax withheld		
c Employer's name, address, and ZIP code						
Humana Insurance Company						
500 West Main Street						
Louisville, KY 40202						
d Control number						
e Employee's name, addr Bin Azeem Sye	_	d ZIP code				
1617 Hunningt						
Apt # 07						
Louisville, KY 40220						
7 Social security tips	8	Allocated tips	9			
10 Dependent care benefit	s 1 1	Nonqualified plans	12	a Code		
13 Statutory employee 14	4 Other		12	b Code		
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		er 16 State wages, tips, etc.	management of	17 State income tax		
18 Local wages, tips, etc.	19	Local income tax	20	Locality name		
		- Many front wash week				

1 Wages, tips, other comp.

5 Medicare wages and tips

3 Social security wages

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS CUCC

OMB No. 1545-0008

2 Federal income tax withheld

4 Social security tax withheld

6 Medicare tax withheld

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

a Employee's soc. sec. no.

709-24-1714

b Employer ID number (EIN)