							F	ederal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5	
To the right is an Please note that t				nents.	Gross Wages 65342.2 Txbl Benefits			26 65342.:	26 65342.26		
required to file a tax return, a negligence penalty or other sanction may be							Life	30.0	05 30.0	05 30.05	
imposed on you i	this income is t	axable and yo	ou fail to	report it.		Deferred Co	omp	(2863.2	8)		
Form W-2 Wage a						Section 125		(1480.4	8) (1480.4	8) (1480.48)	
Сору С—гог ЕМР	LOTEE 5 RECORI	)5				Other Preta	x/Wage Limit				
						W-2 Wages		61028.	55 63891.	33 63891.83	
D. CONTROL NUMBER				ONAR NO	). 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION			2. FEDERAL INCOME TAX WITHHELD		
000073356101			2022			61028.55			5154.30		
B. EMPLOYER IDENTIFICA	TION NUMBER (EIN)	A. EMPLOYEE'S	SOCIAL SEC	URITY NUMB	BER	3. SOCIAL SE	3. SOCIAL SECURITY WAGES 4. SOCIAL SECURITY TAX V				
47-0428274		XXX-XX-5951					63891.83 3961.29				
C. EMPLOYER'S NAME, A	,	ODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT		
Nebraska Furniture M	art, Inc.						63891.8	33		926.43	
700 S 72nd Street Omaha NE 68114						7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS		
						9.			10. DEPENDENT CARE E	ENEFITS	
E. EMPLOYEE'S FIRST NAM	ME AND INITIAL	LAST NA			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d See instructions fo	box 12 30.05	
Mohan Prasanna		Seedal	bathula						D	2863.28	
1608 N 175th Plz						14. OTHER			w	615.36	
Omaha NE 68118 USA									DD	8126.88	
F. EMPLOYEE'S ADDRESS AND ZIP CODE									13. STATUTORY RETIRE	EMENT X THIRD-PARTY SICK PAY	
15. STATE EMPLOYER'S STATE ID NUMBER 16. STATE WAGES, TIPS, ETC. 17. STATE INCOME TO							18. LOCAL WAGES, TIP	S, ETC. 19.	LOCAL INCOME TAX	20. LOCALITY NAME	
NE 21-00032	2857		61028	.55		3521.54					

D. CONTROL	. NUMBER					1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME TA	AX WITHHELD		
000073356	5101		2022	OMB	B NO. 1545-0008		61028.55		5154.30		
B. EMPLOYER IDENTIFICATION NUMBER (EIN)   A. EMPLOYEE'S SOCIAL SECURITY NUMBER						3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
47-0428274 XXX-XX-5951							63891.83		3961.29		
C. EMPLOYER	R'S NAME, ADDRESS, AN	D ZIP CODE				5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WI	6. MEDICARE TAX WITHHELD		
	Furniture Mart, Inc.						63891.83		926.43		
	700 S 72nd Street Omaha NE 68114						CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
						9.		10. DEPENDENT CARE	BENEFITS		
E. EMPLOYER	E'S FIRST NAME AND INIT	AL LAST N	AME		SUFF.	11. NONQUAL	IFIED PLANS	12.a-d			
Mohan Pras	sanna	Seeda	abathula					С	30.05		
1608 N 17	5th Diz					14. OTHER		D	2863.28		
Omaha NF								W	615.36		
USA	. 00110							DD	8126.88		
	E'S ADDRESS AND ZIP COI	ne.						13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY		
15. STATE	EMPLOYER'S STATE ID N		ES. TIPS. F	TC.	17. STATE INCOME	TAX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		
NE	21-000322857		61028			3521.54					

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2022

Department of the Treasury - Internal Revenue Service

## FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER			2022	OMB	NO. 1545-0008	1. WAGES, TI	PS, OTHER COMPENSATION		2. FEDERAL INCOME TA		
000073356101			2022	CIVID IV	10. 1545 0000	61028.55			5154.30		
B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER						3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD		
47-0428274 XXX-XX-5951						63891.83			3961.29		
C. EMPLOYER'S NAME, ADDRE	SS, AND ZIP CO	DDE				5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD		
Nebraska Furniture Mart,	Inc.						63891.83		926.43		
700 S 72nd Street Omaha NE 68114						7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS		
						9.			10. DEPENDENT CARE	BENEFITS	
E. EMPLOYEE'S FIRST NAME AI	ND INITIAL	LAST NA	AME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d		
Mohan Prasanna		Seeda	bathula						С	30.05	
1600 N 175H N-						14. OTHER			D	2863.28	
1608 N 175th Plz Omaha NF 68118						14. 0111610			W	615.36	
USA									DD	8126.88	
F. EMPLOYEE'S ADDRESS AND	ZIP CODE								13. STATUTORY RETII	REMENT X THIRD-PARTY SICK PAY	
15. STATE EMPLOYER'S STA	ATE ID NUMBER	16. STATE WAG	ES, TIPS, ET	TC.	17. STATE INCOME	TAX	18. LOCAL WAGES, TIPS,	ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	
NE 21-00032285	7		61028	.55		3521.54					

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2022

Department of the Treasury - Internal Revenue Service

## FORM W-2 Wage and Tax Statement

D. CONTROL	NUMBER				1 WAGES T	PS, OTHER COMPENSA	TION	2. FEDERAL INCOME TA	X WITHHELD	
000073356			2022 OM	IB NO. 1545-0008	1. 11/1023, 11	61028		2. TEDERAL INCOME IA	5154.30	
B. EMPLOYE	R IDENTIFICATION NUMBER (EIN)	NUMBER	3. SOCIAL SE	3. SOCIAL SECURITY WAGES 4. SOCIAL SECURITY TAX WITHHELD			AX WITHHELD			
47-0428274 XXX-XX-5951						63891.83 3961.29			3961.29	
C. EMPLOYE	R'S NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	'HHELD	
Nebraska F	Furniture Mart, Inc.					63891	.83	926.43		
700 S 72nd Street Omaha NE 68114						7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	
					9. 10.			10. DEPENDENT CARE I	10. DEPENDENT CARE BENEFITS	
E. EMPLOYE	E'S FIRST NAME AND INITIAL	LAST NAN	ΛE	SUFF.	11. NONQUALIFIED PLANS 12.a-d See instructions for box 12					
Mohan Pra	sanna	Seedaba	athula					С	30.05	
1608 N 17	7E+h DI=				14. OTHER			D	2863.28	
Omaha NE								W	615.36	
USA	00110					DD	8126.88			
OSA									REMENT X THIRD-PARTY	
F. EMPLOYE	E'S ADDRESS AND ZIP CODE							EMPLOYEE PLAN	SICK PAY	
15. STATE	15. STATE   EMPLOYER'S STATE ID NUMBER   16. STATE WAGES, TIPS, ETC.   17. STATE INCOME				AX	18. LOCAL WAGES, T	IPS, ETC. 1	9. LOCAL INCOME TAX	20. LOCALITY NAME	
NE	21-000322857		61028.55		3521.54					