Form W-2 Wage and Tax Statement 2023		7 Social security tips		1 Wages, tips, other co 1	omp. 13379.54		income tax withheld 17264.46
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 Suff. RAMA ANUSHA ADAPA 7075 W GOWAN RD APT #2061 LAS VEGAS NV 89129		8 Allocated tips 9 10 Dependent care benefits f. 13 Statutory plan b Employer identification number (EIN) 45-4683454 a Employee's social security no. XXX-XX-0561		3 Social security wages 113379.54 5 Medicare wages and tips 113379.54 11 Nonqualified plans 14 Other		6 Medicare tax withheld	
						12b DD 13076.88 12c 00 12d 012d 00	
						15 State Employer's state ID no. 16 State wages, tips	, etc.
Copy B To Be Filed With Employee's FEDERAL Tax Return		This information is being fur		Internal Revenue Service IB No. 1545-0008).).		ept. of the Treasury - IRS Web Site at 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 impos	sed on you if this income is ta	axable and you fail to report it
Form W-2 Wage and Tax State	ement 2023	7 Social security tips	1 Wages, tips, other comp. 113379.54	2 Federal income	tax withheld 17264.46
c Employer's name, address, and ZIP code OPTUM SERVICES, INC		8 Allocated tips	3 Social security wages 113379.54	4 Social security tax withheld 7029.53	
ATTNOPERATIONS MN003 9900 BREN ROAD EAST	8-в213	9	5 Medicare wages and tips 113379.54	6 Medicare tax withheld 1644.00	
MINNETONKA MN 55343		10 Dependent care benefits	11 Nonqualified plans	12a See instructio	ons for box 12 157.56
e Employee's name, address, and ZIP code RAMA ANUSHA ADAPA 7075 W GOWAN RD	Su	ff. 13 Statutory Plan Price Plan Third-part Sick Pay		12b 2 DD 12c 2	13076.88
APT #2061 LAS VEGAS NV 89129		a Employee's social security no. XXX-XX-0561		12d Generation	
Initial of the second	16 State wages, tips, etc.	17 State income tax 18	Local wages, tips, etc. 19 Local in	come tax t	20 Locality name
Copy C For EMPLOYEE'S RECORDS (See	e Notice to Employee on back of	Сору В.)	OMB No. 1545-0008	Dept. of the	e Treasury - IRS

Form W-2 Wage and Tax Statement	2023	7 Social security tips	1 Wages, tips, other comp. 113379.54	2 Federal income tax withheld 17264.46	
c Employer's name, address, and ZIP code OPTUM SERVICES, INC ATTNOPERATIONS MN008-B213 9900 BREN ROAD EAST		8 Allocated tips	3 Social security wages 113379.54	4 Social security tax withheld 7029.53	
		9	5 Medicare wages and tips 113379.54	6 Medicare tax withheld 1644.00	
MINNETONKA MN 55343		10 Dependent care benefits	11 Nonqualified plans	12a [§] C 157.56	
e Employee's name, address, and ZIP code RAMA ANUSHA ADAPA 7075 W GOWAN RD APT #2061	Suff.	13 Statutory employee Referement plan Third-party sickpay b Employer identification number (EIN 45-4683454 a Employee's social security no.	14 Other	12b DD 13076.88 12c 12d	
LAS VEGAS NV 89129		XXX-XX-0561	_	e e	
15 State Employer's state ID no. 16 S	State wages, tips, etc.	17 State income tax 18 Lo	cal wages, tips, etc. 19 Local inc	20 Locality name	
Copy 2 To Be Filed With Employee's State, City, or L	ocal Income Tax Return	1 0	MB No. 1545-0008	Dept. of the Treasury - IRS	

Form W-2 Wage and Tax Statement	2023	7 Social security tips	1 Wages, tips, other comp. 113379.54	2 Federal income tax withheld 17264.46
c Employer's name, address, and ZIP code OPTUM SERVICES, INC		8 Allocated tips	3 Social security wages 113379.54	4 Social security tax withheld
ATTNOPERATIONS MN008-B213 9900 BREN ROAD EAST		9	5 Medicare wages and tips 113379.54	6 Medicare tax withheld 1644.00
MINNETONKA MN 55343		10 Dependent care benefits	11 Nonqualified plans	12a ਊ C 157.56
e Employee's name, address, and ZIP code RAMA ANUSHA ADAPA 7075 W GOWAN RD	Suff.	13 Statutory Petrement Third-plan Third-plan the plan the		12b DD 13076.88 12c 2 2 2
APT #2061		a Employee's social security no.		≗ 12d ç
LAS VEGAS NV 89129		XXX-XX-0561		ude
15 State Employer's state ID no. 16 Sta	ate wages, tips, etc.	17 State income tax 1	8 Local wages, tips, etc. 19 Local ind	come tax 20 Locality name
Copy 2 To Be Filed With Employee's State, City, or Lo	cal Income Tax Return	L87	OMB No. 1545-0008 5206	Dept. of the Treasury - IRS

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