						Federal Box 1	Soc. S	ec. Box 3 & 7	Medicare Box	5	
To the right is information which shows your total wages by				Gross Wages		104900.45	10	04900.45	104900.4	5	
W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total				Txbl Benefits							
wages to arrive at your W-2 wages.				Group Term Life Adoption		29.40		29.40	29.40)	
General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.				Deferred Comp Section 125		(1939.00)		1939 00)	(1030.00	`	
separate document.				Other Pretax/Wag	ge Limit	(1838.00)	(.	1838.00)	(1838.00)	
				W-2 Wages		103091.85	10	3091.85	103091.8	5	
a Employe	e's social security number	b Employer identification number (EIN	l)	d Control number							
	(X-7290	94-2841595		000057685401						3 No. 1545-0008	
51 150	's name, address, and ZIP co	de			1 Wages, tip	s, other compensation 103	on 091.85	2 Federal incom	ne tax withheld	9689.80	
Credit One Bank NA 6801 S. Cimarron Road Las Vegas NV 89113					3 Social sec		004.05	4 Social securit	y tax withheld	6204.60	
Las V	egas NV 09113				5 Medicare v	vages and tips	091.85	6 Medicare tax v	withheld	6391.69	
Employee's first name and initial Last name Su				ff.	103091.85			8 Allocated tips		1494.83	
Bharg		Kadaru		7 Social security tips			6 Allocated tips				
Apt 2:				9			10 Dependent care benefits				
USA					11 Nonqualified plans		12a See instructions for box 12				
	s's address and ZIP code						ad mande.	Code C		29.40	
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State ii	ncome tax	13 Statut	ory Retirement Thin	rd-party R Pay	Code DD	1	11573.10	
1011		19 Local income tax	201					12c Code	Ī		
IS Local Wa	ages, tips, etc.	19 Local Income tax	20 Localit	y name	14 Other MOVE		5000.00	12d Code	1		
	Wage and Tax Statemen r EMPLOYEE'S RECORDS	t		2023	r	This information is bein negligence penalty or oth	g furnished to th	he Internal Revenue		ired to file a tax return	
a Employee's social security number b Employer identification number (EIN) d Control number XXX-XX-7290 94-2841595 000057685401						AUA V. ITITAAN					
Employer's name, address, and ZIP code					1 Wages, tips, other compensation 2 Federal income tax wi				3 No. 1545-0008		
Credit One Bank NA							091.85	4 Casial associa		9689.80	
6801 S. Cimarron Road Las Vegas NV 89113						3 Social security wages 103091.85			y tax withheld	6391.69	
					5 Medicare v	wages and tips		6 Medicare tax v	withheld		
Employee's first name and initial Last name Suf				ff.	7 Social sec		091.85	8 Allocated tips		1494.83	
Bhargav Kadaru 7000 Paradise Rd Apt 2120					9			10 Dependent care benefits			
Apt 2120 Las Vegas NV 89119 USA					9			To Dependent C	are penents		
Employee's address and ZIP code					11 Nonqualit	fied plans		12a See instru Code C	ctions for box 12	29.40	
iovainte routeroon	Employer's state ID Number	16 State wages, tips, etc.	17 State in	ncome tax	13 Statut	ory Retirement Thir	rd-party Ray	12b Code DD	1	11573.10	
	·							12c		113/3.10	
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other			Code 12d			
					MOVE		5000.00	Code			
	Wage and Tax Statemen Be Filed With Employee's FE			2023			Depa	artment of the T	reasury - Interna	Revenue Servi	
	e's social security number (X-7290	b Employer identification number (EIN 94-2841595	1)	d Control number 000057685401					OME	3 No. 1545-0008	
Employer	's name, address, and ZIP co	de			1 Wages, tip	s, other compensation	on 091.85	2 Federal incom		9689.80	
Credit One Bank NA 6801 S. Cimarron Road					3 Social sec		091.05	4 Social security	y tax withheld	9009.00	
	egas NV 89113						091.85		V-	6391.69	
				5 Medicare v	vages and tips 103	091.85	6 Medicare tax v	withheld	1494.83		
Employee Bharg	e's first name and initial pav	Last name Kadaru	ff.	7 Social security tips			8 Allocated tips				
Apt 2:				9			10 Dependent c	are benefits			
Las Vegas NV 89119 USA					11 Noneus "	Flod plans		42a Bo - 1	allama far b 4°		
Employee's address and ZIP code					11 Nonqualit	neu piails		Code C	ctions for box 12	29.40	
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State in	ncome tax	13 Statut emplo	ory Retirement Thir	rd-party CPay	12b Code DD	ī	11573.10	
								12c Code	ī		
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other MOVE		5000.00	12d Code	<u> </u>		
		l	r		1			- COULD			