

Form **W-2 Wage and Tax Statement** 2023

**c** Employer's name, address, and ZIP code  
 HEALTH & HUMAN SERVICES COMM  
 P.O. BOX 149030  
 AUSTIN TX 78714-9030

**e** Employee's name, address, and ZIP code  
 PALLAVI REDDY BURUGULA  
 3304 PRENTISS LANE  
 LEANDER TX 78641

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
----------	-------------------------	----------------------------	---------------------	----------------------------	---------------------	------------------

**Copy B To Be Filed With Employee's FEDERAL Tax Return** This information is being furnished to the Internal Revenue Service. **Dept. of the Treasury - IRS**  
 OMB No. 1545-0008 Visit the IRS Web Site at [www.irs.gov/efile](http://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 imposed on you if this income is taxable and you fail to report it.

Form **W-2 Wage and Tax Statement** 2023

**c** Employer's name, address, and ZIP code  
 HEALTH & HUMAN SERVICES COMM  
 P.O. BOX 149030  
 AUSTIN TX 78714-9030

**e** Employee's name, address, and ZIP code  
 PALLAVI REDDY BURUGULA  
 3304 PRENTISS LANE  
 LEANDER TX 78641

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
----------	-------------------------	----------------------------	---------------------	----------------------------	---------------------	------------------

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

Form **W-2 Wage and Tax Statement** 2023

**c** Employer's name, address, and ZIP code  
 HEALTH & HUMAN SERVICES COMM  
 P.O. BOX 149030  
 AUSTIN TX 78714-9030

**e** Employee's name, address, and ZIP code  
 PALLAVI REDDY BURUGULA  
 3304 PRENTISS LANE  
 LEANDER TX 78641

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
----------	-------------------------	----------------------------	---------------------	----------------------------	---------------------	------------------

**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

Form **W-2 Wage and Tax Statement** 2023

**c** Employer's name, address, and ZIP code  
 HEALTH & HUMAN SERVICES COMM  
 P.O. BOX 149030  
 AUSTIN TX 78714-9030

**e** Employee's name, address, and ZIP code  
 PALLAVI REDDY BURUGULA  
 3304 PRENTISS LANE  
 LEANDER TX 78641

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
----------	-------------------------	----------------------------	---------------------	----------------------------	---------------------	------------------

**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** L87 OMB No. 1545-0008 5206 **Dept. of the Treasury - IRS**