

Copy B-To Be Filed With Payee's FEDERAL Tax Return.		Tax Year 2023 OMB No. 1545-0008	
a. Payee's social security number XXX-XX-2448	1 Wages, tips, other compensation 148,476.18	2 Federal income tax withheld 25,071.47	
b. Payor ID number 91-1983600	3 Social security wages 160,200.00	4 Social security tax withheld 9,932.40	
d. Control number	5 Medicare wages and tips 160,902.72	6 Medicare tax withheld 2,333.09	
7 Social security tips	8 Allocated tips		
c. Payor's name, address, and ZIP code T-MOBILE USA INC 12920 SE 38TH STREET BELLEVUE, WA 98006			
e. Payee's name, address, and ZIP code JYOTHI KIRAN NANDANAMUDI 1970 MANDAN CT FREMONT, CA 94539			
10 Dependent care benefits	11 Nonqualified plans	See instructions for box 12	
13 Statutory payee <input type="checkbox"/>	14 Other CASDI 1,378.48 RSU 21,127.55	12a C 82.94	
Retirement plan <input checked="" type="checkbox"/>		12b D 13,071.21	
Third-party sick pay <input type="checkbox"/>		12c W 3,228.74	
		12d DD 6,222.59	
		12e	
		12f	
15 State/Payor's state ID CA 456-2913-6	16 State wages, tips, etc. 151,060.25	17 State income tax 11,211.49	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement Department of the Treasury - Internal Revenue Service
This information is being furnished to the Internal Revenue Service.

Copy 2-To Be Filed With Payee's State, City, or Local Income Tax Return.		Tax Year 2023 OMB No. 1545-0008	
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Form W-2 Wage and Tax Statement Department of the Treasury - Internal Revenue Service

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Form W-2 Wage and Tax Statement Department of the Treasury - Internal Revenue Service
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.

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