/					Federal Box 1	Soc.	Sec. Box 3 & 7	Medicare Box 5	
To the	e right is information v	which shows your total wages	by	Gross Wages	108890.08	1	.08890.08	108890.08	
W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total wages to arrive at your W-2 wages.  General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.				Txbl Benefits	147.84		147.84	147.84	
				Group Term Life Adoption	56.16		56.16	56.16	
				Deferred Comp	(7001.57)				
				Section 125	(4424.24)		(4424.24)	(4424.24)	
1				Other Pretax/Wa	ge Limit				
				W-2 Wages	97668.27	1	104669.84	104669.84	
	e's social security number X-7133	b Employer identification number (EIN 20-3469219	1)	d Control number 000538023801				OMB	N= 4545.000
	's name, address, and ZIP co			000330023001	1 Wages, tips, other compensa	tion	2 Federal income		No. 1545-000
	t (US), LLC					7668.27			13735.19
13560 Morris Road Suite 4100					3 Social security wages		4 Social security	tax withheld	
	retta GA 30004				5 Medicare wages and tips	4669.84	6 Medicare tax w	dthhold	6489.53
						4669.84	o medicale tax w	numera	1517.71
e Employee's first name and initial Last name Suf Khursheed Alam 33111 DEER TRL ALPHARETTA GA 30004			ff.	7 Social security tips		8 Allocated tips			
					9		10 Danandant ea	na hanafita	
USA	IKETTA GA 30004				5		10 Dependent ca	ire perients	
					11 Nonqualified plans		12a See instruc	tions for box 12	
f Employee	's address and ZIP code						Code C		56.16
15 State GA	Employer's state ID Number 3073982-OP	16 State wages, tips, etc. 97668.27	17 State i	ncome tax 5129.68	13 Statutory Retirement T employee plan si	hird-party ck Pay	12b Code D	1	7001.57
<u> </u>	3073902-01	37000.27	}	3129.00	X		12c		
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	ty name	14 Other		Code W		4090.80
			<b>}</b> -		1		Code DD		9552.00
<b>14/</b> 0	11/	<u> </u>				Don	artmont of the Tr	aggung Internal	Dovonuo Con
	Wage and Tax Statemen r EMPLOYEE'S RECORDS	t		2023	This information is be	eing furnished to	artment of the Tro the Internal Revenue S	Service. If you are requi	red to file a tax retu
					negligence penalty or o	ther sanction ma	ay be imposed on you it	f this income is taxable	and you fail to repo
a Employee	e's social security number	b Employer identification number (EIN	1)	d Control number	I				
	X-7133	20-3469219	-,	000538023801	,			OMB	No. 1545-000
c Employer	's name, address, and ZIP co	de			1 Wages, tips, other compensa		2 Federal income	e tax withheld	
	t (US), LLC					7668.27	4 Capial as society	. 4	13735.19
13560 Suite	Morris Road 4100				3 Social security wages	4669.84	4 Social security	tax withheid	6489.53
Alphai	retta GA 30004				5 Medicare wages and tips		6 Medicare tax w	vithheld	
e Employee's first name and initial Last name Suff Khursheed Alam				ff	10	4669.84			1517.71
						7 Social security tips		8 Allocated tips	
	DEER TRL				7 Social security tips		8 Allocated tips		
USA	RETTA GA 30004				7 Social security tips 9		8 Allocated tips  10 Dependent ca	are benefits	
								are benefits	
f Form laws	ARETTA GA 30004						10 Dependent ca		56.16
	RETTA GA 30004 's address and ZIP code	Les Sur Land	Lez out		9 11 Nonqualified plans	hird-party	10 Dependent ca		56.16
	ARETTA GA 30004	16 State wages, tips, etc. 97668.27	17 State i	ncome tax 5129.68	9 11 Nonqualified plans 13 Statutory Retirement Temployee plan si	hird-party ck Pay	10 Dependent ca  12a See instruct Code C  12b Code D		56.16 7001.57
15 State	RETTA GA 30004 's address and ZIP code  Employer's state ID Number			5129.68	9 11 Nonqualified plans 12 Statutory Retirement T		12a See instruc Code C 12b Code D 12c		7001.57
15 State GA	RETTA GA 30004 's address and ZIP code  Employer's state ID Number		17 State i	5129.68	9 11 Nonqualified plans 13 Statutory Retirement Temployee plan si		10 Dependent ca 12a See instruc Code C 12b Code D 12c Code W		7001.57 4090.80
15 State GA	RETTA GA 30004  's address and ZIP code  Employer's state ID Number  3073982-OP	97668.27		5129.68	9 11 Nonqualified plans 13 Statutory Retirement Temployee plan si		10 Dependent ca  12a See instruc Code C  12b Code D  12c Code W		7001.57
15 State GA 18 Local wa	's address and ZIP code Employer's state ID Number3073982-OP uges, tips, etc.	97668.27 19 Local income tax		5129.68 ty name	9 11 Nonqualified plans 13 Statutory Retirement Temployee plan si	ck Pay	10 Dependent ca 12a See instruc Code C 12b Code D 12c Code W	ctions for box 12	7001.57 4090.80 9552.00
15 State GA 18 Local wa	RETTA GA 30004  's address and ZIP code  Employer's state ID Number  3073982-OP	97668.27  19 Local income tax		5129.68	9 11 Nonqualified plans 13 Statutory Retirement Temployee plan si	ck Pay	10 Dependent ca 12a See instructode C 12b Code D 12c Code W 12d Code DD	ctions for box 12	7001.57 4090.80 9552.00
15 State GA 18 Local wa	's address and ZIP code  Employer's state ID Number	97668.27  19 Local income tax		5129.68 ty name	9 11 Nonqualified plans 13 Statutory Retirement Temployee plan si	ck Pay	10 Dependent ca 12a See instructode C 12b Code D 12c Code W 12d Code DD	ctions for box 12	7001.57 4090.80 9552.00
15 State GA 18 Local wa Form W-2 Copy B—To	's address and ZIP code  Employer's state ID Number	97668.27  19 Local income tax	20 Localii	5129.68 ty name	9 11 Nonqualified plans 13 Statutory Retirement Temployee plan si	ck Pay	10 Dependent ca 12a See instructode C 12b Code D 12c Code W 12d Code DD	ctions for box 12	7001.57 4090.80 9552.00
15 State GA  18 Local wa  Form W-2 Copy B—To a Employer XXX-X	s address and ZIP code Employer's state ID Number	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219	20 Localii	5129.68 by name	9 11 Nonqualified plans  13 Statutory Retirement T employee plan si	Dep	10 Dependent ca  12a See instructode C  12b Code D  12c Code W  12d Code D  12d T2d Code D  artment of the Tr	tions for box 12	7001.57 4090.80 9552.00
15 State GA  18 Local wa  Form W-2 Copy B—To a Employer XXX-X	s address and ZIP code Employer's state ID Number3073982-OP ges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219	20 Localii	5129.68 by name  2023	9 11 Nonqualified plans  13 Statutory Retirement Temployee plan si	Dep	10 Dependent ca 12a See instructode C 12b Code D 12c Code W 12d Code DD	tions for box 12	7001.57 4090.80 9552.00 Revenue Sen
15 State GA  18 Local water Form W-2 Copy B—To a Employer XXX-X c Employer	's address and ZIP code  Employer's state ID Number  3073982-OP  leges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE  2's social security number  X-7133  's name, address, and ZIP co	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219	20 Localii	5129.68 by name  2023	9 11 Nonqualified plans  13 Statutory Retirement Temployee plan si	Dep	10 Dependent ca  12a See instruc Code C  12b Code D  12c Code D  12d Code DD  artment of the Tr	reasury - Internal	7001.57 4090.80 9552.00 Revenue Sen
15 State GA  18 Local water Form W-2 Copy B—To a Employer XXX-X c Employer INFOR 13560 Suite	's address and ZIP code  Employer's state ID Number3073982-OP ges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE 's social security number X-7133 s name, address, and ZIP co	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219	20 Localii	5129.68 by name  2023	9 11 Nonqualified plans 13 Statutory Retirement T employee plan si  X 14 Other  1 Wages, tips, other compensa:	Dep	10 Dependent ca  12a See instructode C  12b Code D  12c Code W  12d Code D  12d T2d Code D  artment of the Tr	reasury - Internal	7001.57 4090.80 9552.00 Revenue Sen
15 State GA  18 Local water Form W-2 Copy B—To a Employer XXX-X c Employer INFOR 13560 Suite	"s address and ZIP code Employer's state ID Number3073982-0P ges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE  2's social security number X-7133 's name, address, and ZIP co	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219	20 Localii	5129.68 by name  2023	9 11 Nonqualified plans  13 Statutory Retirement T employee plan X  14 Other  1 Wages, tips, other compensa 9 3 Social security wages  10 5 Medicare wages and tips	Dep	10 Dependent ca  12a See instruc Code C  12b Code D  12c Code D  12d Code DD  artment of the Tr	reasury - Internal	7001.57 4090.80 9552.00 Revenue Sen No. 1545-000
15 State GA 18 Local wa 18 Local wa 18 Local wa 26 Copy B—To a Employer XXX-X c Employer INFOR 13560 Suite Alphan	's address and ZIP code  Employer's state ID Number3073982-OP ges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE 's social security number X-7133 s name, address, and ZIP co	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219	20 Localii	5129.68 by name  2023 d Control number 000538023801	9 11 Nonqualified plans  13 Statutory Retirement Temployee plan Si  X  14 Other  1 Wages, tips, other compenses 9 3 Social security wages 10 5 Medicare wages and tips	Dep	10 Dependent ca  12a See instructode C  12b Code D  12c Code W  12d Code DD  artment of the Tr  2 Federal income  4 Social security  6 Medicare tax w	reasury - Internal	7001.57 4090.80 9552.00 Revenue Sen No. 1545-000
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15 State GA  18 Local water Form W-2 Copy B—To  a Employee XXX-X c Employee INFOR 13560 Suite Alphai e Employee Khursi 33111 ALPHA	's address and ZIP code  Employer's state ID Number  3073982-OP  ges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE  's's social security number  X-7133 's name, address, and ZIP co  It (US), LLC  Morris Road  4100  etta GA 30004	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219) de	20 Localii	5129.68 by name  2023 d Control number 000538023801	9 11 Nonqualified plans  13 Statutory Retirement Temployee plan Si  X  14 Other  1 Wages, tips, other compenses 9 3 Social security wages 10 5 Medicare wages and tips	Dep	10 Dependent ca  12a See instructode C  12b Code D  12c Code W  12d Code DD  artment of the Tr  2 Federal income  4 Social security  6 Medicare tax w	reasury - Internal  OMB  e tax withheld	7001.57 4090.80 9552.00 Revenue Sen No. 1545-000 13735.19 6489.53
15 State GA  18 Local water Form W-2 Copy B—To  a Employee XXX-X c Employer 13560 Suite Alphai e Employee Khursi 33111	's address and ZIP code  Employer's state ID Number  3073982-OP  Iges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE  's's social security number  X-7133  Is name, address, and ZIP co  (US), LLC  Morris Road  4100  Ys first name and initial heed  DEER TRL	97668.27  19 Local income tax  t DERAL Tax Return.  b Employer identification number (EIN 20-3469219) de	20 Localii	5129.68 by name  2023 d Control number 000538023801	9 11 Nonqualified plans  13 Statutory Retirement T employee plan X  14 Other  1 Wages, tips, other compensa 9 3 Social security wages  5 Medicare wages and tips  7 Social security tips  9	Dep	10 Dependent ca  12a See instruc Code C  12b Code D  12c Code W  12d Code DD  arriment of the Tr  2 Federal income 4 Social security 6 Medicare tax w  8 Allocated tips	citions for box 12	7001.57 4090.80 9552.00 Revenue Sen No. 1545-000 13735.19 6489.53
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15 State GA  18 Local water a Employee XXX-X c Employee INFOR 13560 Suite Alphai e Employee Khursi 33111 ALPHA USA	"s address and ZIP code Employer's state ID Number	97668.27  19 Local income tax  t EDERAL Tax Return.  b Employer identification number (EIN 20-3469219) de  Last name Alam	20 Localii	5129.68 by name  2023 d Control number 000538023801	9 11 Nonqualified plans  13 Statutory Retirement T employee plan    14 Other  1 Wages, tips, other compensacy    3 Social security wages    5 Medicare wages and tips    7 Social security tips    9 11 Nonqualified plans  13 Statutory Retirement T employee plan    si	Dep	10 Dependent ca  12a See instruc Code C  12b Code D  12c Code W  12d Code DD  Deartment of the Tr  2 Federal income 4 Social security 6 Medicare tax w  8 Allocated tips  10 Dependent ca  12a See instruc Code C  12b Code D	citions for box 12	7001.57 4090.80 9552.00 Revenue Sen No. 1545-000 13735.19 6489.53 1517.71
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