I The second second			L		
Copy B—To Be Filed With Employee's FEDERAL Tax Return.			OMB No. 1545-0008		
a Employee's soc. sec. no.		1 Wages, tips, other comp.	2 Federal income tax withheld		
XXX-XX-363	9	71399.10	5073.91		
THE R AS	D. Jair	3 Social security wages	4 Social security tax withheld		
b Employer ID number (EIN) 232798598		75954.78	4709.20		
		5 Medicare wages and tips	6 Medicare tax withheld		
c Employer's name, ac	ddaaaa	75954.78	1101.34		
Renal Treat	ment	Centers - Illino	is, Inc.		
3201 South	3231	rd Street			
Federal Way					
roublul may	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 30001			
e Employee's name, a Ganga Dadi					
48420 field	isto	ne dr			
Northville,	MI	48168			
7 Social security tips		8 Allocated tips	9		
Dependent care benefits					
		11 Nonqualified plans	12a Code See inst. for box 12 C 29.12		
3 Statutory employee 14 Oth Retirement plan X Third-party sick pay		her	12b Code		
			D 4555.68		
			12c Code		
			12d Code		
			200		

71399.10

Form W-2 Wage and Tax Statement 2023
This information is being furnished to the Internal Revenue Service.

Copy C-For EMPLOYEE'S RECORDS (See

Notice to Employee on the back of Copy B.)

15 State Employer's state ID number 16 State wages, tips, etc.

19 Local income tax

1 Wages, tips, other comp.

MI 23-2798598

18 Local wages, tips, etc.

a Employee's soc. sec. no.

Dept. of the Treasury - IRS

OMB No. 1545-0008

2 Federal income tax withheld

17 State income tax

20 Locality name

2933.88

a Linployee 3 300. 300. 110.	i vages, ups, outer comp.	Z i edelai income tax withine	
XXX-XX-3639	71399.10	5073.91	
MM-M-3033	3 Social security wages	4 Social security tax withhele	
b Employer ID number (EIN	75954.78	4709.20	
232798598	5 Medicare wages and tips	6 Medicare tax withheld	
232190590	75954.78	1101.34	
c Employer's name, addres			
Renal Treatmer	nt Centers - Illino	is, Inc.	
3201 South 323	3rd Street		
Federal Way, W	VA 98001		
d Control - makes			
d Control number			
e Employee's name, addres	s. and 7IP code		
Ganga Dadi	s, and zir bode		
48420 fieldst	one dr		
Northville, M			
NOICHVIIIe, M.	1 48168		
7 Social security tips	8 Allocated tips	9	
		Total	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
		C 29.12	
13 Statutory employee 14 (	Other	12b Code	
		D 4555.68	
Retirement plan X		12c Code	
Third-party sick pay			
Third-party sick pay		12d Code	
MI 23-2798598	71399.10	2933.88	
15 State Employer's state ID	number 16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
		1	

City, or Local Incon	d With Employee's State, ne Tax Return	OMB No. 1545-0008	
a Employee's soc. sec. n		2 Federal income tax withhek	
XXX-XX-3639	71399.10	5073.91	
	3 Social security wages	4 Social security tax withheld	
b Employer ID number (E	, , , , , , , , , , , , , , , , , , , ,		
232798598	5 Medicare wages and tips 75954.78	6 Medicare tax withheld 1101.34	
c Employer's name, addr Renal Treatm 3201 South 3 Federal Way,	ent Centers - Illin 23rd Street	ois, Inc.	
e Employee's name, add Ganga Dadi	ress, and ZIP code		
48420 fields			
		9	
48420 fields Northville, 7 Social security tips	MI 48168  8 Allocated tips	12a Code C 29.12	
48420 fields Northville,  7 Social security tips  10 Dependent care benefit	MI 48168  8 Allocated tips	12a Code	
48420 fields Northville,  7 Social security tips  10 Dependent care benefit	MI 48168  8 Allocated tips  11 Nonqualified plans	12a Code C 29.12 12b Code	
48420 fields Northville,  7 Social security tips  10 Dependent care benefit  13 Statutory employee  Retirement plan	MI 48168  8 Allocated tips  11 Nonqualified plans	12a Code C 29.12 12b Code D 4555.68	

Copy 2—To Be Filed Wi City, or Local Income T	OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld
XXX-XX-3639	71399.10	5073.91
	3 Social security wages	4 Social security tax withheld
b Employer ID number (EIN)	75954.78	4709.20
232798598	5 Medicare wages and tips	6 Medicare tax withheld
232198398	75954.78	1101.34

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Renal Treatment Centers - Illinois, Inc. 3201 South 323rd Street
Federal Way, WA 98001

## d Control number

e Employee's name, address, and ZIP code Ganga Dadi 48420 fieldstone, dr Northville, MI 48168

Form W-2 Wage and Tax Statement

7 Social security tips 10 Dependent care benefits 13 Statutory employee		8 /	Allocated tips	9		
		efits 11 h	Nonqualified plans	12a Code C	12a Code C 29.12	
		14 Other		12b Code D	4555.68	
					12c Code	
				12d Code		
MI 15 State	23 - 27989 Employer's sta		71399,1 16 State wages, tips, etc.	17000000000000000000000000000000000000	2933.88	
18 Loca	al wages, tips, et	c. 19 L	ocal income tax	20 Locality	name	

Form W-2 Wage and Tax Statement

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