

a Employee's social security number XXX-XX-6528		b Employer identification number 52-6002033		Copy B To Be Filed With Employee's FEDERAL Tax Return				OMB No. 1545-0008			
c Employer's name, address and ZIP code STATE OF MARYLAND CENTRAL PAYROLL BUREAU P.O. BOX 2396 ANNAPOLIS, MD 21404-2396 S.S.# 69-0520001L				3,840.17		1 Wages, tips, other compensation					
						2 Federal income tax withheld					
						3 Social security wages					
						4 Social security tax withheld					
				5 Medicare wages and tips		6 Medicare tax withheld					
				7 Social security tips		8 Allocated tips		9			
d Control number MD134915				10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12			
				12b Code		12c Code		12d Code			
e Employee's first name and initial, last name and suffix f Employee's address and ZIP code MD134915 UM ZE MOHIT SANJAY PATIL 5003 WESTLAND BLVD UNIT A BALTIMORE MD 21227				13		14 Other					
				Statutory employee							
				Retirement plan							
				Third-party sick pay							
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	
MD 52-6002033		3,840.17		156.90							

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

Department of the Treasury - Internal Revenue Service

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c Employer's name, address and ZIP code STATE OF MARYLAND CENTRAL PAYROLL BUREAU P.O. BOX 2396 ANNAPOLIS, MD 21404-2396 S.S.# 69-0520001L				3,840.17		1 Wages, tips, other compensation					
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c Employer's name, address and ZIP code STATE OF MARYLAND CENTRAL PAYROLL BUREAU P.O. BOX 2396 ANNAPOLIS, MD 21404-2396 S.S.# 69-0520001L				3,840.17		1 Wages, tips, other compensation					
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