

d Control number 124436	1 Wages, tips, other compensation 52023.99	2 Federal income tax withheld 2593.01
OMB NO 1545-0008	3 Social security wages 52216.31	4 Social security tax withheld 3237.43
	5 Medicare wages and tips 52216.31	6 Medicare tax withheld 757.13

c Employer's name, address and ZIP code  
**PRIME HEALTHCARE MANAGEMENT**  
 3300 EAST GUASTI  
 ONTARIO CA 91761

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 19.67
12b D 192.32	12c DD 7287.12	12d

b Employer identification number (EIN) 20-3952701	a Employee's social security number 479-77-1658
13 Statutory employee Retirement plan Third-party sick pay 14 Other	
X	

e Employee's name, address and ZIP code  
**NALLAMANI, ULAGANATHAN**  
 1300 N. CUSTER RD  
 APT F6112  
 ALLEN TX 75013

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.

2023	15 State Employer's state I.D. No.	16 State wages, tips, etc.
Form <b>W-2</b> Wage and Tax Statement Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)	17 State income tax	18 Local wages, tips, etc.
	19 Local income tax	20 Locality name

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2023	15 State Employer's state I.D. No.	16 State wages, tips, etc.
Form <b>W-2</b> Wage and Tax Statement Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return	17 State income tax	18 Local wages, tips, etc.
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