

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	
a Employee's SSA number 378-83-6671		Employer use only	
b Employer's FED ID number 84-0273800		d Control number 00700209	
c Employer's name, address, and ZIP code Qwest Corporation 100 CenturyLink Drive Monroe LA 71203			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 23727.60	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. VIMAL KUMAR PANT 358 W BURGUNDY ST UNIT 317 HIGHLANDS RANCH CO 80129			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 <small>OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service</small> <small>Copy C for Employee's records</small>			

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	
a Employee's SSA number 378-83-6671		Employer use only	
b Employer's FED ID number 84-0273800		d Control number 00700209	
c Employer's name, address, and ZIP code Qwest Corporation 100 CenturyLink Drive Monroe LA 71203			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 23727.60	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. VIMAL KUMAR PANT 358 W BURGUNDY ST UNIT 317 HIGHLANDS RANCH CO 80129			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 <small>OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service</small> <small>Copy 2 To Be Filed With Employee's STATE Income Tax Return</small>			

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	
a Employee's SSA number 378-83-6671		Employer use only	
b Employer's FED ID number 84-0273800		d Control number 00700209	
c Employer's name, address, and ZIP code Qwest Corporation 100 CenturyLink Drive Monroe LA 71203			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 23727.60	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. VIMAL KUMAR PANT 358 W BURGUNDY ST UNIT 317 HIGHLANDS RANCH CO 80129			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 <small>OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service</small> <small>Copy B To Be Filed With Employee's FEDERAL Tax Return</small>			

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	
a Employee's SSA number 378-83-6671		Employer use only	
b Employer's FED ID number 84-0273800		d Control number 00700209	
c Employer's name, address, and ZIP code Qwest Corporation 100 CenturyLink Drive Monroe LA 71203			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12 DD 23727.60	
13 Statutory Employee Retirement plan Third-Party Sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b	
14 Other		12c	
		12d	
e Employee's first name and initial Last name Suff. VIMAL KUMAR PANT 358 W BURGUNDY ST UNIT 317 HIGHLANDS RANCH CO 80129			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
16 State wages, tips, etc.		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 <small>OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service</small> <small>Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return</small>			