

Form **W-2 Wage and Tax Statement** 2023

**c** Employer's name, address, and ZIP code  
 OPTUM SERVICES, INC  
 ATTN--OPERATIONS MN008-B213  
 9900 BREN ROAD EAST  
 MINNETONKA MN 55343

**e** Employee's name, address, and ZIP code  
 Suff. SHRUTHI CHADA  
 7928 N MACARTHUR BLVD  
 APT 3098  
 IRVING TX 75063

7 Social security tips	1 Wages, tips, other comp. 108229.05	2 Federal income tax withheld 16233.58
8 Allocated tips	3 Social security wages 124937.33	4 Social security tax withheld 7746.11
9	5 Medicare wages and tips 124937.33	6 Medicare tax withheld 1811.59
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 180.44
13 Statutory employee Retirement plan Third-party sick pay 13	14 Other	12b D 16708.28
b Employer identification number (EIN) 45-4683454		12c W 2800.00
a Employee's social security no. XXX-XX-5659		12d DD 7441.56
15 State Employer's state ID no.	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

**Copy B To Be Filed With Employee's FEDERAL Tax Return** This information is being furnished to the Internal Revenue Service. **Dept. of the Treasury - IRS**  
 OMB No. 1545-0008 Visit the IRS Web Site at [www.irs.gov/efile](http://www.irs.gov/efile)

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.

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**Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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