

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. BABUL REDDY CHINTALA
 1085 MANORHAVEN DR
 DURHAM NC 27703

7 Social security tips	1 Wages, tips, other comp. 124798.89	2 Federal income tax withheld 11595.49
8 Allocated tips	3 Social security wages 133375.54	4 Social security tax withheld 8269.28
9	5 Medicare wages and tips 133375.54	6 Medicare tax withheld 1933.95
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 205.40
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b D 8576.65
b Employer identification number (EIN) 45-4683454		12c W 3150.00
a Employee's social security no. XXX-XX-9809		12d DD 15611.64
15 State Employer's state ID no. NC 600927919	16 State wages, tips, etc. 124798.89	17 State income tax 6227.00
	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. OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS Web Site at 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.

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. BABUL REDDY CHINTALA
 1085 MANORHAVEN DR
 DURHAM NC 27703

7 Social security tips	1 Wages, tips, other comp. 124798.89	2 Federal income tax withheld 11595.49
8 Allocated tips	3 Social security wages 133375.54	4 Social security tax withheld 8269.28
9	5 Medicare wages and tips 133375.54	6 Medicare tax withheld 1933.95
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 205.40
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b D 8576.65
b Employer identification number (EIN) 45-4683454		12c W 3150.00
a Employee's social security no. XXX-XX-9809		12d DD 15611.64
15 State Employer's state ID no. NC 600927919	16 State wages, tips, etc. 124798.89	17 State income tax 6227.00
	18 Local wages, tips, etc.	19 Local income tax
		20 Locality name

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

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. BABUL REDDY CHINTALA
 1085 MANORHAVEN DR
 DURHAM NC 27703

7 Social security tips	1 Wages, tips, other comp. 124798.89	2 Federal income tax withheld 11595.49
8 Allocated tips	3 Social security wages 133375.54	4 Social security tax withheld 8269.28
9	5 Medicare wages and tips 133375.54	6 Medicare tax withheld 1933.95
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 205.40
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b D 8576.65
b Employer identification number (EIN) 45-4683454		12c W 3150.00
a Employee's social security no. XXX-XX-9809		12d DD 15611.64
15 State Employer's state ID no. NC 600927919	16 State wages, tips, etc. 124798.89	17 State income tax 6227.00
	18 Local wages, tips, etc.	19 Local income tax
		20 Locality name

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

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. BABUL REDDY CHINTALA
 1085 MANORHAVEN DR
 DURHAM NC 27703

7 Social security tips	1 Wages, tips, other comp. 124798.89	2 Federal income tax withheld 11595.49
8 Allocated tips	3 Social security wages 133375.54	4 Social security tax withheld 8269.28
9	5 Medicare wages and tips 133375.54	6 Medicare tax withheld 1933.95
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 205.40
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b D 8576.65
b Employer identification number (EIN) 45-4683454		12c W 3150.00
a Employee's social security no. XXX-XX-9809		12d DD 15611.64
15 State Employer's state ID no. NC 600927919	16 State wages, tips, etc. 124798.89	17 State income tax 6227.00
	18 Local wages, tips, etc.	19 Local income tax
		20 Locality name

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return L87 OMB No. 1545-0008 5206 **Dept. of the Treasury - IRS**