

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  
 ROHAN KATARIA  
 1855 ST FRANCIS ST  
 APT-209  
 RESTON VA 20190

7 Social security tips	1 Wages, tips, other comp. 138878.88	2 Federal income tax withheld 23291.11
8 Allocated tips	3 Social security wages 144617.24	4 Social security tax withheld 8966.27
9	5 Medicare wages and tips 144617.24	6 Medicare tax withheld 2096.95
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 165.62
13 Statutory employee Retirement plan Third-party sick pay Suff. <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	14 Other	12b D 5738.36
b Employer identification number (EIN) 45-4683454		12c W 2600.00
a Employee's social security no. XXX-XX-9810		12d DD 8173.56
15 State Employer's state ID no. VA 30454683454F001	16 State wages, tips, etc. 138878.88	17 State income tax 7267.71
	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](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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