

a Employee's SSN 707-20-4045		b Employer identification number (EIN) 73-1628499			OMB No. 1545-0008	
c Employer's name, address, and ZIP code LIBERTYCOM LLC 303 WEST CAPITOL SUITE 330 LITTLE ROCK AR 72201		1 Wgs, tips, other compn 15792.00	2 Fed inc tax withheld 1126.00	3 Social security wages		
		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld		
		7 Social security tips	8 Allocated tips	9		
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a		
e Employee's name, address, and ZIP code Suff. VENKATA YASHWANTH GALLA 8216 PRINCE WALES CT PLANO TX 75025		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other	12b		
				12c		
				12d		
15 State	Employer's state ID number	16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name

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

Copy B To Be Filed with Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service.

REV 12/19/23 QBDT

Department of the Treasury — IRS

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				12c		
				12d		
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

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

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

REV 12/19/23 QBDT

a Employee's SSN 707-20-4045		b Employer identification number (EIN) 73-1628499			OMB No. 1545-0008	
c Employer's name, address, and ZIP code LIBERTYCOM LLC 303 WEST CAPITOL SUITE 330 LITTLE ROCK AR 72201		This information is being furnished to the IRS. 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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Form **W-2**
Wage and Tax Statement
2023

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee.)

REV 12/19/23 QBDT