Copy B - For Employee's Federal Income Tax Return 2023 OMB No. 1545-0008										
security number		577	es, tips, other comp. 57718.23		2 Federal income tax withheld 3 6 1 7 . 0 5					
760-41-7617 3 b Employer ID number		Social security wages 59518.21		4 Social security tax withheld 3690.14						
36-4400066 5 Me		edicare wages an 595	id tips 518.21	6 Medicare tax withheld 863.02						
c Employer's name, address, and ZIP code Millennium Trust Company LLC 2001 Spring Road Oak Brook, IL 60523										
d Control number B7253 6539										
Shashidhar Puthani 12216 Charles Plz Apt 9 Omaha, NE 68154 7 Social security tips 8 Allocated tips 19 Advance EIC payment										
, ,		·								
10 Dependent care benefits		11 Nonqualified	plans							
^{12a} C		29.05		13 Statutory employee Retirement plan 3rd-party sick pay X						
12b D	1799.98		14 Other							
12c DD		907.13								
12d W	' W 144		9.90							
N/A		1	N/A		N/A					
15 State Employer's State ID# 18 Local wages, tips, etc.			16 State wages, tips, etc.		17 State income tax 20 Locality name					
N/A		1	N/A		N/A					

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service

Dept. of the Treasury - IRS

Copy 2 - For Employee's State Income Tax Return OMB No. 1545-0008 2023 [NE] security number 57718.23 3617.05 760-41-7617 curity wages 59518.21 withheld 3690.14 b Employer ID number 36-4400066 59518.21 863.02 c Employer's name, address, and ZIP code Millennium Trust Company LLC 2001 Spring Road Oak Brook, IL 60523 Control number B7253 6539 Employee's name, address, and ZIP code Shashidhar Puthani 12216 Charles Plz Apt 9 Omaha, NE 68154 7 Social security tips 8 Allocated tips 9 Advance EIC payment 10 Dependent care benefits 1 Nonqualified plans 13 Statutory employee 12a Retirement plan 3rd-party sick pay C 29.05 Х D 1799.98 DD 10907.13 1449.90 W NE 14988941 57718.23 2906.53 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 N/A N/A N/A

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

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a Employee's social security number		1 Wage	1 Wages, tips, other comp. 57718.23		2 Federal income tax withheld 3617.05			
760-41-7617		3 Social security wages			4 Social security tax withheld			
b Employer ID number		59518.21			3690.14			
36-4400066		5 Medicare wages and tips 59518.21			6 Medicare tax withheld 863.02			
Miller 2001	name, address, and nnium True Spring Roe rook, IL	st C ad	ompany	LLC				
d Control nun B7253	nber 6539							
Shash 12216 Apt 9	name, address, and idhar Puti Charles , NE 6815	hani Plz	ode					
7 Social security tips		8 /	8 Allocated tips			9 Advance EIC payment		
10 Dependent care benefits		11	11 Nonqualified plans					
^{12a} C		29.05		13 Statutory employee Retirement plan 3rd-party sick p				
12b D		1799.98		14 Other				
12c DD		10907.13						
12d W		1449.90						
NE 14988941		57718.23			2906.53			
15 State Employer's State ID#			16 State wages, tips, etc.		17	17 State income tax		
18 Local wages, tips, etc.		19 Local income tax		20	20 Locality name			
N/A			N/A			N/A		

Form W-2 Wage and Tax Statement

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