DMB No. 1545-0008 Il Control Number	1 Wages, tips, other compensation 34877.3	2 Federal income tax withheld 3910.69	OMB No. 1545-0008 d Control Number	1 Wages, tips, other compensation 34877.30	2 Federal income tax withheld 3910.69
Employer identification number (EIN) 20 - 5716594		4 Social security tax withheld	b Employer identification number (Ell 20 - 5716594		4 Social security tax withheld 2363.23
Employee's social security number 515 - 75 - 0347	5 Medicare wages and tips 38116.6	6 Medicare tax withheld 552.69	a Employee's social security number 515-75-0347	5 Medicare wages and tips 38116.66	6 Medicare tax withheld 552.69
Employer's name, address and ZIP of CHANGE HEALTHCARE 3055 LEBANON PIKE SUITE 1000 NASHVILLE TN 37214	SOLUTIONS, LLC		c Employer's name, address and ZIP CHANGE HEALTHCARE 3055 LEBANON PIKE SUITE 1000 NASHVILLE TN 3721	SOLUTIONS, LLC	-
7 Social security tips	8 Allocated tips	9	7 Social security tips	8 Allocated tips	9
0 Dependent care benefits	11 Nonqualified plans	12a	10 Dependent care benefits	11 Nonqualified plans	12a
2b	12c	8 C 21.60 12d See instructions for box 12	126	12c	8 C 21.60
D 3239.36 3 Statutory Retirement Third-pai		4 8	D 3239.3		3
employee plan sick pay X Employee's name, address and ZIP		3426.99	employee plan sick p		3426.99
MAHESH YALLAREDDY 2037 ELK SPRINGS D HERMITAGE TN 37076	RIVE		MAHESH YALLAREDDY 2037 ELK SPRINGS HERMITAGE TN 3707	DRIVE	
2023 15 State Empl	loyer's state I.D. no.	16 State wages, tips, etc.	2023 15 State Em	nployer's state I.D. no.	16 State wages, tips, etc.
[W-2			₩-2		
Wage and Tax Statement	17 State income tax	18 Local wages, tips, etc.	Wage and Tax Statement	17 State income tax 18	B Local wages, tips, etc.
Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)			Copy B - To Be Filed With Employee's FEDERAL Tax Return.		
This information is being furnished to the Internal Revenue Service. If you are require 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.		20 Locality name	This information is being furnished to the Internal Revenue Service	19 Local income tax 20	Locality name
Department of the Treasury – Internal Revenue Service			Department of the Treasury – Internal Revenue Service		
OMB No. 1545-0008 d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld	OMB No. 1545-0008 d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld
a Control Number	34877.3			34877.30	3910.69
b Employer identification number (EIN) 20-5716594	3 Social security wages 38116.6	4 Social security tax withheld 2363.23	b Employer identification number (EIN 20-5716594	N) 3 Social security wages 38116.66	4 Social security tax withheld 2363.23
Employee's social security number 515 - 75 - 0347	5 Medicare wages and tips 38116.6	6 Medicare tax withheld 5 52.69	a Employee's social security number 515 - 75 - 0347	5 Medicare wages and tips 38116.66	6 Medicare tax withheld 552.69
c Employer's name, address and ZIP of CHANGE HEALTHCARE 3055 LEBANON PIKE SUITE 1000 NASHVILLE TN 37214	SOLUTIONS, LLC		c Employer's name, address and ZIP CHANGE HEALTHCARE 3055 LEBANON PIKE SUITE 1000 NASHVILLE TN 3721	SOLUTIONS, LLC	
7 Social security tips	8 Allocated tips	9	7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a 8 C 21.60	10 Dependent care benefits	11 Nonqualified plans	12a 3 C 21.60
12b	12c	12d	12b	12c	12d
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employée plan sick pa		3426.99	employee plan sick pa	STOCK	3426.99
Employee's name, address and ZIP MAHESH YALLAREDDY 2037 ELK SPRINGS D HERMITAGE TN 37076	RIVE		Employee's name, address and ZIF MAHESH YALLAREDDY 2037 ELK SPRINGS HERMITAGE TN 3707	DRIVE	
2023 15 State Emp	loyer's state I.D. no.	16 State wages, tips, etc.	2023 15 State Emp	ployer's state I.D. no.	16 State wages, tips, etc.
Wage and Tax Statement	17 State income tax	18 Local wages, tips, etc.	Wage and Tax Statement	17 State income tax 18	Local wages, tips, etc.
Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.			Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.	10	
	19 Local income tax	20 Locality name		19 Local income tax 20	Locality name

Department of the Treasury – Internal Revenue Service