

d Control number	1 Wages, tips, other compensation	2 Federal income tax withheld
78650	96582.10	8123.13
OMB NO. 1545-0008	3 Social security wages	4 Social security tax withheld
	97388.24	6037.99
	5 Medicare wages and tips	6 Medicare tax withheld
	97388.24	1412.22

c Employer's name, address and ZIP code
PRIME HEALTHCARE MANAGEMENT
 3300 EAST GUASTI
 ONTARIO CA 91761

7 Social security tips	8 Allocated tips	9

10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
		AA 1020.00

12b	12c	12d
C 39.13	D 806.14	DD 6101.25

b Employer identification number (EIN)	a Employee's social security number
20-3952701	747-22-8789

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		

e Employee's name, address and ZIP code
KAUSHIK BINDU YELISETTI
 23412 W Pearson Dr
 Plainfield IL 60585

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.

2023	15 State	Employer's state I.D. No.	16 State wages, tips, etc.
	IL	20-3952701-000	96582.10

Form W-2 Wage and Tax Statement	17 State income tax	18 Local wages, tips, etc.
	4661.17	

Copy C For
EMPLOYEE'S RECORDS
 (See Notice to Employee on back of Copy B.)

19 Local income tax
 20 Locality name

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Form W-2 Wage and Tax Statement	17 State income tax	18 Local wages, tips, etc.
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Copy B To Be Filed
 With Employee's
FEDERAL Tax Return

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 Plainfield IL 60585

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

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 20 Locality name

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