

1 Wages, tips, other compensation		2 Federal Income tax withheld	
92344.27		14525.79	
3 Social security wages		4 Social security tax withheld	
100983.07		6260.95	
5 Medicare wages and tips		6 Medicare tax withheld	
100983.07		1464.25	
a Employee's SSA number		Employer use only	
XXX-XX-9118			
b Employer's FED ID number		d Control number	
23-2172299		00764516	
c Employer's name, address, and ZIP code			
COPA Exec Off - Bur of Comm Pay Op P.O. Box 8006 Harrisburg PA 17105-8006			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 24095.37	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>			
14 Other OPT-LST 156.00		12c	
		12d	
e Employee's first name and initial Last name Suff.			
Venugopal Kancherla 496 Joel Dr Mechanicsburg PA 17050			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
PA 13567078		100983.07	
16 State wages, tips, etc.		19 Local income tax	
100983.07		1716.64	
17 State income tax		20 Locality name	
3100.08		22	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy C for Employee's records			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
92344.27		14525.79	
3 Social security wages		4 Social security tax withheld	
100983.07		6260.95	
5 Medicare wages and tips		6 Medicare tax withheld	
100983.07		1464.25	
a Employee's SSA number		Employer use only	
XXX-XX-9118			
b Employer's FED ID number		d Control number	
23-2172299		00764516	
c Employer's name, address, and ZIP code			
COPA Exec Off - Bur of Comm Pay Op P.O. Box 8006 Harrisburg PA 17105-8006			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 24095.37	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>			
14 Other OPT-LST 156.00		12c	
		12d	
e Employee's first name and initial Last name Suff.			
Venugopal Kancherla 496 Joel Dr Mechanicsburg PA 17050			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
PA 13567078		100983.07	
16 State wages, tips, etc.		19 Local income tax	
100983.07		1716.64	
17 State income tax		20 Locality name	
3100.08		22	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
92344.27		14525.79	
3 Social security wages		4 Social security tax withheld	
100983.07		6260.95	
5 Medicare wages and tips		6 Medicare tax withheld	
100983.07		1464.25	
a Employee's SSA number		Employer use only	
XXX-XX-9118			
b Employer's FED ID number		d Control number	
23-2172299		00764516	
c Employer's name, address, and ZIP code			
COPA Exec Off - Bur of Comm Pay Op P.O. Box 8006 Harrisburg PA 17105-8006			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 24095.37	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>			
14 Other OPT-LST 156.00		12c	
		12d	
e Employee's first name and initial Last name Suff.			
Venugopal Kancherla 496 Joel Dr Mechanicsburg PA 17050			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
PA 13567078		100983.07	
16 State wages, tips, etc.		19 Local income tax	
100983.07		1716.64	
17 State income tax		20 Locality name	
3100.08		22	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
92344.27		14525.79	
3 Social security wages		4 Social security tax withheld	
100983.07		6260.95	
5 Medicare wages and tips		6 Medicare tax withheld	
100983.07		1464.25	
a Employee's SSA number		Employer use only	
XXX-XX-9118			
b Employer's FED ID number		d Control number	
23-2172299		00764516	
c Employer's name, address, and ZIP code			
COPA Exec Off - Bur of Comm Pay Op P.O. Box 8006 Harrisburg PA 17105-8006			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 24095.37	
13 Statutory Employee Retirement plan Third-Party Sick pay		12b	
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>			
14 Other OPT-LST 156.00		12c	
		12d	
e Employee's first name and initial Last name Suff.			
Venugopal Kancherla 496 Joel Dr Mechanicsburg PA 17050			
f Employee's address and ZIP code			
15 State Employer's state ID		18 Local wages, tips, etc	
PA 13567078		100983.07	
16 State wages, tips, etc.		19 Local income tax	
100983.07		1716.64	
17 State income tax		20 Locality name	
3100.08		22	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			