

Import Code: B3BN45RZ		<b>a</b> Employee's social security number ***-**-4480		OMB No. 1545-0008		
<b>b</b> Employer identification number (EIN) 71-0794409			<b>1</b> Wages, tips, other compensation 153555.69		<b>2</b> Federal income tax withheld 25803.17	
<b>c</b> Employer's name, address, and ZIP code WAL-MART ASSOCIATES, INC.  702 SW 8TH STREET BENTONVILLE, AR 72716-0135			<b>3</b> Social security wages 160192.74		<b>4</b> Social security tax withheld 9931.95	
			<b>5</b> Medicare wages and tips 160192.74		<b>6</b> Medicare tax withheld 2322.79	
			<b>7</b> Social security tips		<b>8</b> Allocated tips	
<b>d</b> Control number			<b>9</b>		<b>10</b> Dependent care benefits	
<b>e</b> Employee's first name and initial 01107410564		Last name 1 of 1		Suff.		
PRUDVI TEJA KONDAPARTHI  3750 ANDOVER ST CUMMING, GA 30028			<b>11</b> Nonqualified plans		<b>12a</b> See instructions for box 12 DD   3723.70	
			<b>13</b> Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		<b>12b</b> D   6637.05	
			<b>14</b> Other		<b>12c</b> W   510.00	
					<b>12d</b>	
<b>f</b> Employee's address and ZIP code						
<b>15</b> State	Employer's state ID number	<b>16</b> State wages, tips, etc.	<b>17</b> State income tax	<b>18</b> Local wages, tips, etc.	<b>19</b> Local income tax	<b>20</b> Locality name
AR	12286157WHW	12561.81	615.43			
GA	1974510ZI	140993.88	7687.39			

Form **W-2** Wage and Tax Statement **2023** Department of the Treasury—Internal Revenue Service  
**Copy B—To Be Filed With Employee's FEDERAL Tax Return.**  
This information is being furnished to the Internal Revenue Service.

Import Code: B3BN45RZ		<b>a</b> Employee's social security number ***-**-4480		OMB No. 1545-0008		
<b>b</b> Employer identification number (EIN) 71-0794409			<b>1</b> Wages, tips, other compensation 153555.69		<b>2</b> Federal income tax withheld 25803.17	
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<b>e</b> Employee's first name and initial 01107410564		Last name 1 of 1		Suff.		
PRUDVI TEJA KONDAPARTHI  3750 ANDOVER ST CUMMING, GA 30028			<b>11</b> Nonqualified plans		<b>12a</b> See instructions for box 12 DD   3723.70	
			<b>13</b> Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		<b>12b</b> D   6637.05	
			<b>14</b> Other		<b>12c</b> W   510.00	
					<b>12d</b>	
<b>f</b> Employee's address and ZIP code						
<b>15</b> State	Employer's state ID number	<b>16</b> State wages, tips, etc.	<b>17</b> State income tax	<b>18</b> Local wages, tips, etc.	<b>19</b> Local income tax	<b>20</b> Locality name
AR	12286157WHW	12561.81	615.43			
GA	1974510ZI	140993.88	7687.39			

Form **W-2** Wage and Tax Statement **2023** Department of the Treasury—Internal Revenue Service  
**Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return**

Import Code: B3BN45RZ		a Employee's social security number ***-**-4480		OMB No. 1545-0008			
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d Control number			9		10 Dependent care benefits		
e Employee's first name and initial 01107410564		Last name 1 of 1 PRUDVI TEJA KONDAPARTHI		Suff.		11 Nonqualified plans	
f Employee's address and ZIP code 3750 ANDOVER ST CUMMING, GA 30028		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12a DD   3723.70		12b D   6637.05	
				12c W   510.00		12d	
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.	
AR   12286157WHW		12561.81		615.43			
GA   1974510ZI		140993.88		7687.39			

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

**2023**

Department of the Treasury—Internal Revenue Service

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

Import Code: B3BN45RZ		a Employee's social security number ***-**-4480		OMB No. 1545-0008				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.			
b Employer identification number (EIN) 71-0794409			1 Wages, tips, other compensation 153555.69		2 Federal income tax withheld 25803.17						
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AR   12286157WHW		12561.81		615.43							
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Form **W-2** Wage and Tax Statement

**2023**

Department of the Treasury—Internal Revenue Service

Copy C—For EMPLOYEE'S RECORDS

(See Notice to Employee on the back of Copy B.)