To the right is information which shows your total wages by W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total wages to arrive at your W-2 wages. General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.			Gross Wages Txbl Benefits Group Term Life Adoption Deferred Comp Section 125 Other Pretax/Wa W-2 Wages	ge Limit	93053. 411. 24. (6500.4 (3728.4 83260.	17 48 49) 40)	93053.45 411.17 24.48 (3728.40) 89760.70	93053.45 411.17 24.48 (3728.40) 89760.70	3
a Employee's social security number 129-23-6866	b Employer identification number (EII	N)	d Control number 003434803701					OMP	3 No. 1545-0008
c Employer's name, address, and ZIP code					other compe		2 Federal income		
American Express Company MC 24-02-11 2401 W Behrend Dr. Suite 55 Phoenix AZ 85027					ity wages	83260.21	4 Social security	tax withheld	10572.34
					ges and tips	89760.70	6 Medicare tax w	Jakk - Ld	5565.16
e Employee's first name and initial	#	5 Medicare wa	ges and tips	89760.70		itiliela	1301.53		
e Employee's first name and initial Last name Suff. Divya Krishna Golla 3352 E Branham Ln				7 Social secur	ity tips		8 Allocated tips		
Phoenix AZ 85042 USA							10 Dependent ca	re benefits	
					d plans		12a See instruc	tions for box 12	
f Employee's address and ZIP code 15 State Employee's state ID Number 16 State wages, tips, etc. 17 State income tax					y Retiremen	t Third-party	Code C		24.48
AZ 0134922250	83260.21	17 State	1664.67	13 Statutor	e plan	sick Pay	Code D		6500.49
18 Local wages, tips, etc.	19 Local income tax	20 Locali	ty name	14 Other			Code W		1500.00
	-	}					Code DD		15511.80
Form W-2 Wage and Tax Statemer Copy C—For EMPLOYEE'S RECORDS	_	ļ.	2023			is being furnished t	partment of the Tr to the Internal Revenue S nay be imposed on you it	Service. If you are requi	ired to file a tax return,
a Employee's social security number 129-23-6866	b Employer identification number (Elf 13-4922250	N)	d Control number 003434803701					OMB	3 No. 1545-0008
c Employer's name, address, and ZIP co	ode		•	1 Wages, tips,	other compe	nsation 83260.21	2 Federal income	a tax withheld	10572.34
American Express Company MC 24-02-11					ity wages	03200.21	4 Social security	tax withheld	10372.34
2401 W Behrend Dr. Suite Phoenix AZ 85027	55			5 Medicare wa	ges and tips	89760.70	6 Medicare tax w	vithheld	5565.16
e Employee's first name and initial Last name Suff. Divya Krishna Golla 3352 E Branham Ln Phoenix AZ 85042 USA						89760.70			1301.53
					ity tips		8 Allocated tips		
							10 Dependent ca	re benefits	
				11 Nonqualifie	d plans		12a See instruc	tions for box 12	24.40
f Employee's address and ZIP code 15 State Employer's state ID Numbe	r 16 State wages, tips, etc.	17 State i	ncome tax		y Retiremen		Code C		24.48
AZ 0134922250	83260.21		1664.67	employe	e plan	sick Pay	Code D 12c		6500.49
18 Local wages, tips, etc.	19 Local income tax	20 Locali	ty name	14 Other			Code W		1500.00
	-	}					Code DD		15511.80
Form W-2 Wage and Tax Statemer Copy B—To Be Filed With Employee's Fi			2023			De	partment of the Tr	easury - Internal	Revenue Service
a Employee's social security number 129-23-6866	b Employer identification number (Elf 13-4922250	N)	d Control number 003434803701					OMB	3 No. 1545-0008
c Employer's name, address, and ZIP code				1 Wages, tips,	other compe	nsation 83260.21	2 Federal income		10572.34
American Express Company MC 24-02-11					ity wages	03200.21	4 Social security	tax withheld	10372.34
2401 W Behrend Dr. Suite 55 Phoenix AZ 85027				5 Medicare wa	nes and tins	89760.70	6 Medicare tax w	ithheld	5565.16
e Employee's first name and initial	Last name	Su	ff.			89760.70			1301.53
Divya Krishna Golla 3352 E Branham Ln				7 Social secur	ity tips		8 Allocated tips		
Phoenix AZ 85042 USA				9			10 Dependent ca	re benefits	
Company of the second was a second se					d plans		12a See instruc	tions for box 12	24.40
f Employee's address and ZIP code 15 State Employer's state ID Number 16 State wages, tips, etc. 17 State income tax				13 Statutor	y Retiremen	t Third-party	Code C		24.48
AZ 0134922250	83260.21	ļ	1664.67	employe	ee plan	sick Pay	Code D 12c		6500.49
18 Local wages, tips, etc.	19 Local income tax	20 Locali	ty name	14 Other			Code W		1500.00
	-	ļ					Code DD		15511.80
Form W-2 Wage and Tax Statemer Copy 2—To Be Filed With Employee's St			2023			De	partment of the Tr	easury - Internal	Revenue Service