

Form **W-2 Wage and Tax Statement** 2023

c Employer's name, address, and ZIP code  
 OPTUM SERVICES, INC  
 ATTN--OPERATIONS MN008-B213  
 9900 BREN ROAD EAST  
 MINNETONKA MN 55343

e Employee's name, address, and ZIP code  
 Suff. ABDUL JAWAD MOHAMMED  
 507 MATHESON PLACE  
 CARY NC 27511

15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NC	600927919	15702.90	661.00			

**Copy B To Be Filed With Employee's FEDERAL Tax Return** This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS**  
 Visit the IRS Web Site at [www.irs.gov/efile](http://www.irs.gov/efile)

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.

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**Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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**Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return** L87 OMB No. 1545-0008 5206 **Dept. of the Treasury - IRS**

7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld
	15702.90	1520.77
8 Allocated tips	3 Social security wages	4 Social security tax withheld
	15887.48	985.02
9	5 Medicare wages and tips	6 Medicare tax withheld
	15887.48	230.37
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
		C 19.92
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b D 184.58
b Employer identification number (EIN) 45-4683454		12c DD 6.60
a Employee's social security no. XXX-XX-7296		12d

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