

OMB No. 1545-0008

REISSUED STATEMENT

Table with 6 columns: Control Number, Wages, tips, other compensation, Federal income tax withheld, Employer identification number (EIN), Social security wages, Social security tax withheld, Employee's social security number, Medicare wages and tips, Medicare tax withheld.

Employee's name, address and ZIP code: MED3000 HEALTH SOLUTIONS SOUTHEAST, 100 AIRPARK CENTER DRIVE E, NASHVILLE TN 37217

Table with 12 columns: Social security tips, Allocated tips, Dependent care benefits, Nonqualified plans, Statutory employee, Retirement plan, Third-party sick pay, Other.

Employee's name, address and ZIP code: ABDUL J MOHAMMED, 507 MATHESON PLACE, CARY NC 27511

Form W-2 header: 2023, State Employer's state I.D. no. NC 600524826, State wages, tips, etc. 21319.71

Wage and Tax Statement Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)

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Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

Department of the Treasury - Internal Revenue Service

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Wage and Tax Statement Copy B - To Be Filed With Employee's FEDERAL Tax Return.

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Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

Department of the Treasury - Internal Revenue Service