

# 2023 W-2 and EARNINGS SUMMARY

Employee Reference Copy			
W-2		2023	
Wage and Tax Statement			
Copy C for employee's records. OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only
0000000114 WMG		LGL0	C S 13337
c Employer's name, address, and ZIP code			
ADVANCED NEUROMODULATION SYSTEMS INC ONE LILLEHEI PLAZA ST PAUL, MN 55117			
e/f Employee's name, address, and ZIP code			
ARIF Q MOHIUDDIN 4533 RED BARN RICHARDSON, TX 75082			
b Employer's FED ID number	a Employee's SSA number		
75-1646002	XXX-XX-7006		
1 Wages, tips, other comp.	2 Federal income tax withheld		
28403.46	1727.93		
3 Social security wages	4 Social security tax withheld		
30560.59	1894.76		
5 Medicare wages and tips	6 Medicare tax withheld		
30560.59	443.13		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	D   2157.13		
14 Other	12b DD		20353.08
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
	X		
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		

ARIF Q MOHIUDDIN  
4533 RED BARN  
RICHARDSON, TX 75082

Social Security Number: XXX-XX-7006



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Federal Filing Copy  
**W-2** Wage and Tax Statement **2023**  
OMB No. 1545-0008  
Copy B to be filed with employee's Federal Income Tax Return.

State Filing Copy  
**W-2** Wage and Tax Statement **2023**  
OMB No. 1545-0008  
Copy 2 to be filed with employee's State Income Tax Return.

City or Local Filing Copy  
**W-2** Wage and Tax Statement **2023**  
OMB No. 1545-0008  
Copy 2 to be filed with employee's City or Local Income Tax Return.