

Form <b>W-2 Wage and Tax Statement</b> <b>2023</b>		7 Social security tips		1 Wages, tips, other comp. 92304.16	2 Federal income tax withheld 12567.50	
c Employer's name, address, and ZIP code DOMINO'S PIZZA LLC 30 FRANK LLOYD WRIGHT DR. P.O. BOX 997 ANN ARBOR MI 48106-0997		8 Allocated tips		3 Social security wages 102890.70	4 Social security tax withheld 6379.22	
		9		5 Medicare wages and tips 102890.70	6 Medicare tax withheld 1491.92	
		10 Dependent care benefits		11 Nonqualified plans	12a See instructions for box 12 C 43.16	
e Employee's name, address, and ZIP code HARSHA PALADUGU 2636 HAMMOCK LAKE DR LITTLE ELM TX 75068		Suff. 13 Statutory employee Retirement plan Third-party sick pay 13 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	14 Other		12b D 10586.54	
		b Employer identification number (EIN) 38-3495003		12c DD 8087.76		
		a Employee's social security no. 712-27-5075		12d		
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

**Copy B To Be Filed With Employee's FEDERAL Tax Return** This information is being furnished to the Internal Revenue Service. **Dept. of the Treasury - IRS**  
OMB No. 1545-0008 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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