	a Employee's social security number	1						
Import Code: V5AZCV68	***-**-5265	OMB No. 1545-0008						
b Employer identification number (EIN)			1 Wag	ges, tips, other compensation	2 Federal income tax withheld			
71-0794409				7.74	23610.55			
c Employer's name, address, and ZIP code				cial security wages	4 Social security tax withheld			
WAL-MART ASSOCIATES, INC.			15060	5.79	9337.56			
				dicare wages and tips	6 Medicare tax withheld			
				5.79	2183.78			
702 SW 8TH STREET BENTONVILLE, AR 72716-0135				cial security tips	8 Allocated tips			
DENIONVILLE, AR 72/10-0155								
d Control number			9		10 Dependent care benefits			
e Employee's first name and initial Last name Suff.			<b>11</b> No	nqualified plans	12a See instructions for box 12			
00000010334 1 of 1					DD 4416.66			
MAHESH PAKIRU			13 Statu	itory Retirement Third-party oyee plan sick pay	12b			
				X	d D	8108.05		
790 DIXON ST				er	12c			
CENTERTON, AR 72719					8 W 3850.00			
					12d			
					o d			
f Employee's address and ZIP cod								
15 State Employer's state ID number 16 State wages, tips, etc. 17 State incor		ne tax 18 Local wages, tips, etc.		19 Local income tax 20 Locality name				
AR 12286157WHW	142497.74	6572.49						

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

2023

Department of the Treasury-Internal Revenue Service

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

This information is being furnished to the Internal Revenue Service.

		a Employe	e's social security number								
Import C	ode: V5AZCV68	***-**-5265	;	OMB No. 154	OMB No. 1545-0008						
b Employer identification number (EIN)				1 Wages, tips, other compensation			2 Federal income tax withheld				
71-0794409				142497.74			23610.55				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
WAL-MART ASSOCIATES, INC.				150605.79			9337.56				
				5 Medicare wages and tips			6 Medicare tax withheld				
TO A CALL OFFICE				150605.79			2183.78				
702 SW 8TH STREET				7 Social security tips			8 Allocated tips				
BENTONVILLE, AR 72716-0135							· ·				
d Control number			9			10 Dependent care benefits					
e Employee's first name and initial Last name Suff.			11 Nonqualified plans			12a					
000000	0000010334 1 of 1						<sup>3</sup> DD 4416.66				
					13 Statu	utory Retirement loyee plan	Third-party sick pay	12b			
MAHESH PAKIRU			X			d D	8108.05				
					<b>14</b> Oth	er		12c	'		
790 DIXON ST							d W	w 3850.00			
CENTERTON, AR 72719						12d					
								o d e			
f Employee's address and ZIP code								_			
15 State	Employer's state ID numb	er	16 State wages, tips, etc.	17 State incor	ne tax	18 Local wage	s, tips, etc.	19 Local in	come tax	20 Locality name	
AR	12286157WHW		142497.74	6572.49							
						T					

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

2023

Department of the Treasury-Internal Revenue Service