

Copy B To Be Filed With Employee's FEDERAL Tax Return		2019 OMB No. 1545-0008	
a Employee's social security number 277-06-3251	1 Wages, tips, other comp. 24308.17	2 Federal income tax withheld 2424.56	
	3 Social security wages 24308.17	4 Social security tax withheld 1507.11	
b Employer ID number 81-1332196	5 Medicare wages and tips 24308.17	6 Medicare tax withheld 352.46	
	c Employer's name, address, and ZIP code Q POINT HEALTH LLC 521 S. 3rd St PHOENIX, AZ 85004		
d Control Number 37005 168			
e Employee's name, address, and ZIP code RATNA S AKULA 1851 KNIGHTSBRIDGE ROAD APT 4318 DALLAS, TX 75234-1307			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
10 Dependent care benefits	11 Nonqualified plans	12a Code AA 3906.00	
13 Statutory employee Retirement plan X 3rd party sick pay	14 Other	12b Code C 32.46	
		12c Code DD 2306.19	
		12d Code W 1615.38	
		AZ 81-1332196 24308.17 194.22	
15 State Empl.'s state I.D. #	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)		2019 OMB No. 1545-0008	
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Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

Copy 1 To Be Filed With Employee's State, City, or Local Income Tax Return		2019 OMB No. 1545-0008	
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