Form W-2	™ W-2 Wage and Tax Statement 2016		7 Social security tips		1 Wages, tips, other compensation 67545.90		2 Federal income tax withheld 12404.02		
c Employer's name, address, and ZIP code OPTUM SERVICES INC			8 Allocated tips		3 Social security wages 69678.25		4 Social se	ecurity tax withheld 4320.05	
ATTNOPERATIONS MN008-B213			9		5 Medicare wages and tips 69678.2		6 Medicare	e tax withheld	
_	OX 1459			10 Dependent care benefits		11 Nonqualified plans	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	c	structions for box 12
	EAPOLIS MN 55440-1459 's name, address, and ZIP code			13 Statutory Retirement Third-sick p	-party ay	14 Other		12b	145.20
BRYAI	N JOSEPH NIEZNAJKO			b Employer identification number	r (EIN)	-		12c	2132.35
311 HUNTER HILLS CIRCLE			45-4683454 a Employee's social security number		1		AA 12d	2132.35	
CHEL	SEA AL 35043			593-50-3509		ļ		DD	4723.10
15 State AL	Employer's state ID number R008756445	16 State wages, tips, etc 67545		17 State income tax 2575.17	18 Lo	cal wages, tips, etc.	19 Local in	come tax	20 Locality name
Сору В-	To Be Filed With Employee's FED	DERAL Tax Return	1	This information is being furnished t	o the Inte	ernal Revenue Service. OMB No. 1545-0008			of the Treasury - IRS IRS website at www.irs.gov/efil
					This in	formation is being furnished to the	e Internal Revenu	e Service. If you	are required to file a tax return, a
_ \\/	Wage and Tay Statement	5076		7 Social security tips	neglige	1 Wages, tips, other comp	ensation		ne is taxable and you fail to report it.
c Employer	2 Wage and Tax Statement s name, address, and ZIP code			8 Allocated tips		3 Social security wages	545.90	4 Social se	12404.02 ecurity tax withheld
OPTUM SERVICES INC ATTNOPERATIONS MN008-B213			9		69678.25 5 Medicare wages and tips		6 Medicare	4320.05 e tax withheld	
PO BOX 1459			10 Dependent care benefits		69678.25		12a See in	1010.33	
	EAPOLIS MN 55440-1459 's name, address, and ZIP code				-narty			[©] C 12b	145.20
	N JOSEPH NIEZNAJKO			X		14 Other		g D	2132.35
311 HUNTER HILLS CIRCLE			b Employer identification number (EIN) $45-4683454$				12c ^ℂ AA	2132.35	
CHEL	SEA AL 35043			a Employee's social security nur 593-50-3509	mber			12d DD	4723.10
15 State	Employer's state ID number	16 State wages, tips, etc	· · · · · · · · · · · · · · · · · · ·	17 State income tax	18 Lo	cal wages, tips, etc.	19 Local in	come tax	20 Locality name
AL	R008756445	6754		2575.17					
	2 Wage and Tax Statement	5076		7 Social security tips		ļ	pensation 545.90		income tax withheld 12404.02
c Employer's name, address, and ZIP code OPTUM SERVICES INC			8 Allocated tips		3 Social security wages 69678.25			ecurity tax withheld 4320.05	
ATTNOPERATIONS MN008-B213			9		5 Medicare wages and tips 69678.25		6 Medicare	e tax withheld 1010.33	
PO BOX 1459 MINNEAPOLIS MN 55440-1459			10 Dependent care benefits		11 Nonqualified plans		12a c C	145.20	
e Employee	s's name, address, and ZIP code			13 Statutory Retirement Sick p	-party ay	14 Other		12b [©] D	2132.35
BRYAN JOSEPH NIEZNAJKO 311 HUNTER HILLS CIRCLE			b Employer identification number (EIN) $45-4683454$				12c AA	2132.35	
CHELSEA AL 35043			a Employee's social security nur	mber			12d © DD	4723.10	
				593-50-3509				e e	
15 State AL	Employer's state ID number R008756445	16 State wages, tips, etc 6754		17 State income tax 2575.17	18 Lo	cal wages, tips, etc.	19 Local in	come tax	20 Locality name
Copy 2-	To Be Filed With Employee's Stat	 te, City, or Local I	ncome	Tax Return	ON	MB No. 1545-0008		Dept. o	of the Treasury - IRS
		-							
				7 Social security tips		1 Wages, tips, other comp	nensation	2 Federal i	income tax withheld
Form W-2 Wage and Tax Statement 2016 c Employer's name, address, and ZIP code			8 Allocated tips		67545.90 3 Social security wages		12404.02 4 Social security tax withheld		
OPTUM SERVICES INC					69678.25		4320.05		
ATTNOPERATIONS MN008-B213 PO BOX 1459			9		5 Medicare wages and tips 69678.25			tax withheld 1010.33	
MINNEAPOLIS MN 55440-1459				10 Dependent care benefits		11 Nonqualified plans		12a c C	145.20
e Employee's name, address, and ZIP code				13 Statutory Retirement Third-party sick pay		14 Other		12b © D	2132.35
BRYAN JOSEPH NIEZNAJKO 311 HUNTER HILLS CIRCLE				b Employer identification number (EIN) $45-4683454$		1		12c S AA	2132.35
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15 State AL	Employer's state ID number R008756445	16 State wages, tips, etc 6754		17 State income tax 2575.17	18 Lo	cal wages, tips, etc.	19 Local in	come tax	20 Locality name
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