					100			
CONTROL NUMBER								
01743799602	This Information is to the Internal Rev	enue Service	2020	OMB NO. 1545-00	08 1. WAGES, 1	TIPS, OTHER COMPENSATION	2. FEDERAL INC	OME TAX WITHHELD
3-4922250		A. EMPLOYEE'S 663-42-4999		RITY NUMBER	3. SOCIAL SI	ECURITY WAGES	4. SOCIAL SECI	JRITY TAX WITHHELD
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE American Express Company					5. MEDICARI	E WAGES AND TIPS	6. MEDICARE	TAX WITHHELD
IC 24-02-11 401 W Behrend Dr.					7. SOCIAL SE	CURITY TIPS	8. ALLOCATED	TIPS
hoenix AZ 85027	. Suite 55				9.		10. DEPENDENT	CARE BENEFITS
EMPLOYEE'S FIRST NA	ME AND INITIAL	LAST NA		SUF	F. 11. NONQUA	LIFIED PLANS	12.a-d	
7030 N 49th St		Tripati	hi		14. OTHER			
142 cottsdale AZ 8525	4							
SAIPLOYEE'S ADDRESS	S AND ZIP CODE	16 57475 1114					13. STATUTORY EMPLOYEE	
134-922	2-250/000	16. STATE WAG	18538.	The second secon	700.49	18. LOCAL WAGES, TIPS,	ETC. 19, LOCAL INCOME	TAX 20. LOCALITY NAME
01743799602	This Information is	is being furnished		OMB NO. 1545-00	1, WAGES, T	TIPS, OTHER COMPENSATION	2.FEDERAL INC	OME TAX WITHHELD
EMPLOYER IDENTIFICATION OF THE PROPERTY OF T	to the Internal Re	A. EMPLOYEE'S	SOCIAL SECU			ECURITY WAGES		JRITY TAX WITHHELD
. EMPLOYER'S NAME,	ADDRESS, AND ZIP (	1 CET 42 4000			1000	E WAGES AND TIPS	6. MEDICARE 1	
American Express Company MC 24-02-11								
401 W Behrend Dr hoenix AZ 85027	r. Suite 55					CURITY TIPS	8. ALLOCATED	TIPS
EMPLOYEE'S FIRST NA	AME AND INITIAL				9.		10, DEPENDENT	CARE BENEFITS
Anubhav Tripathi						The second secon		
		Tripat		SUF	F. 11. NONQUA	LIFIED PLANS	12.a-d	
17030 N 49th St 2142		Tripat		SUF	14. OTHER	LIFIED PLANS	12.a-d	
17030 N 49th St 2142 Scottsdale AZ 8525		Tripat		SUF		LIFIED PLANS	12.a-d	RETIREMENT ( THIRD PARTY
17030 N 49th St 2142 Scottsdale AZ 8525 USAPLOVEE'S ADDRES 15. STATE EMPLOYEE 13. 44-922	SS AND ZIP CODE R'S STATE I.D. NO. 2-250/000	16. STATE WAG	ES, TIPS, ET	C. 17. STATE INCOM	14. OTHER			RETIREMENT X THURD PARTY PLAN SICK PAY TAX 20. LOCALITY NAME
17030 N 49th St 2142 Scottsdale AZ 8525 USAPLOVEE'S ADDRES 15. STATE EMPLOYEE NJ 134-922 Opy 2 To be filed	SS AND ZIP CODE R'S STATE I.D. NO. 2-250/000 d with Employe	16. STATE WAG	ES, TIPS, ET	C. 17. STATE INCOM	14. OTHER	18.LOCAL WAGES, TIPS,	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME	TAX 20. LOCALITY NAME
17030 N 49th St 2142 Scottsdale AZ 8525 Scottsdale AZ 8525 Scottsdale AZ 8525 Stare Employer 134-922 Opy 2 To be filed ORM W-2 Wag D. CONTROL NUMBER	SS AND ZIP CODE B'S STATE LD. NO. 2-250/000 d with Employe ge and Tax S	16. STATE WAG De's STATE, CI Statement	ES, TIPS, ET	C. 17. STATE INCOM	14. OTHER  14. OTHER  700.49  2020	18.LOCAL WAGES, TIPS, Dej	13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME of the Treasury	PLAN SICK PAY
A7030 N 49th St 2142 Scottsdale AZ 8525 ISARPLOVE'S ADDRES IJ 134-922 DDY 2 To be filer DRM W-2 Wag D. CONTROL NUMBER 101743799602	SS AND ZIP CODE BYS STATE I.D. NO. 2-250/000 d with Employe ge and Tax S  This Information i to the Internal Re-	16. STATE WAG ee's STATE, Co Statement is being furnished wenue Service	ES, TIPS, ET 18538. TY, or LO	CC. 17. STATE INCOM 33 ICAL tax return	14, OTHER 14, OTHER 700.49 2020 08	18.LOCAL WAGES, TIPS,  Dep	13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME Dt. of the Treasury	TAX 20. LOCALITY NAME
17030 N 49th St 12142 COOTSTAND AZ 8525 15. STATE EMPLOYEE'S ADDRES 13. STATE EMPLOYEE'S 134-922 DOPY 2 TO be filed DRM W-2 Wag 0. CONTROL NUMBER 1017/43799602 0. EMPLOYER IDENTIFIC 3-4922250	55 AND ZIP CODE RS STATE LO. NO. 2-250/000 d with Employe ge and Tax 5  This Information is to the Internal Re- CATION NUMBER	16. STATE WAG ee's STATE, Cl Statement is being furnished venue Service A. EMPLOYEE'S	ES, TIPS, ET 18538. TY, or LO	CC. 17. STATE INCOM 33 ICAL tax return	14, OTHER 14, OTHER 700.49 2020 08	18.LOCAL WAGES, TIPS, Dej	13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME at. of the Treasury  2. FEDERAL INC	TAX 20.LOCALITY NAME Internal Revenue Sen
17030 N 49th St 12142 Coottsdale AZ 8525 USANPLOVEE'S ADDRES US 134922 DDPY 2 To be filed DRM W-2 Wag D. CONTROL NUMBER 101743799602 L. EMPLOYER IDENTIFIC 3-4922250 L. EMPLOYER IDENTIFIC 3-4922250 L. EMPLOYER'S NAME, L. MERICAN EXPERS NAME, L. ME	SS AND ZIP CODE BYS STATE I.O. NO. 2-250/000 d with Employe ge and Tax S  This Information is to the Internal Re- AATION NUMBER  ADDRESS, AND ZIP	16. STATE WAG ee's STATE, Cl Statement is being furnished venue Service A. EMPLOYEE'S	ES, TIPS, ET 18538. TY, or LO	CC. 17. STATE INCOM 33 ICAL tax return	14, OTHER  700,49  2020  1, WAGES, 1  3, SOCIAL SI	18.LOCAL WAGES, TIPS,  Dep	13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME at. of the Treasury  2. FEDERAL INC	TAX 20.LOCALITY NAME Internal Revenue Sen OMETAX WITHHELD
27030 N 49th St 2142 Coottsdale AZ 8525 Coottsdale AZ 8525 S 514TE EMPLOYEE'S ADDRESS S 514TE EMPLOYEE'S ADDRESS DO CONTROL NUMBER 01743799602 L CONTROL NUMBER 01743799602 L EMPLOYER IDENTIFIC 3-4922250 EMPLOYER'S NAME, MICHIGAN EMPLOYER S NAME, COTC 24-02-11 401 W Behrend Dr	55 AND ZIP CODE BYS STATE LO. NO. 2-250/000 d with Employe ge and Tax 5  This Information to the Internal Re- CATION NUMBER ADDRESS, AND ZIP Company	16. STATE WAG ee's STATE, Cl Statement is being furnished venue Service A. EMPLOYEE'S	ES, TIPS, ET 18538. TY, or LO	CC. 17. STATE INCOM 33 ICAL tax return	14. OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SI  5. MEDICARI	18.LOCAL WAGES, TIPS,  Dep  TIPS, OTHER COMPENSATION  ECURITY WAGES	13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME Dt. of the Treasury  4. 2. FEDERAL INC 4. SOCIAL SECU	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  AX WITHHELD
27030 N 49th St 2142 Scottsdale AZ 8525 SCOTTSDAIN STATE DEMPLOYER'S ADDRESS S. STATE EMPLOYER 134-922 DOPY 2 TO be filter DRM W-2 Wag DRM W-2 Wag 0. CONTROL NUMBER 01743799602 LEMPLOYER IDENTIFIC 3-4922250 EMPLOYER'S NAME, merican Express C 1024-02-11 401 W Behrend Di hoenix AZ 85027	55 AND ZIP CODE 88 STATE LD. NO. 2-250/000 d with Employe ge and Tax ( This Information to the Internal Re- CATION NUMBER ADDRESS, AND ZIP Company r. Suite 55	16. STATE WAG ee's STATE, Cl Statement is being furnished venue Service A. EMPLOYEE'S	ES, TIPS, ET 18538. TY, or LO	CC. 17. STATE INCOM 33 ICAL tax return	14. OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SI  5. MEDICARI	18. LOCAL WAGES, TIPS,  Dep  TIPS, OTHER COMPENSATION  ECURITY WAGES  E WAGES AND TIPS	13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME Dt. of the Treasury  4. 2. FEDERAL INC 4. SOCIAL SECU 6. MEDICARE T  8. ALLOCATED	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  AX WITHHELD  TIPS
27030 N 49th St 2142 COOTSdale AZ 8525 SSAPIOVEE'S ADDRESS S STATE EMPLOYEE U 134-922 DDP 2 TO be filed DRM W-2 Wag 0.1743799602 LEMPLOYER IDENTIFIC 3-492250 EMPLOYER S NAME, merican Express C IC 24-02-11 401 W Behrend Dr hoenix AZ 85027	55 AND ZIP CODE 88 STATE LD. NO. 2-250/000 d with Employe ge and Tax ( This Information to the Internal Re- CATION NUMBER ADDRESS, AND ZIP Company r. Suite 55	16. STATE WAG Dee's STATE, Ci Statement Is being furnished venue service A. EMPLOYEE'S 663-42-4999 CODE	hi ES, TIPS, ET 18538. TTY, or LO 2020 SOCIAL SECU	CC. 17. STATE INCOM 33 ICAL tax return	14, OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SI  7. SOCIAL SE	18. LOCAL WAGES, TIPS,  Dep  TIPS, OTHER COMPENSATION  ECURITY WAGES  E WAGES AND TIPS	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  Dt. of the Treasury  2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  8. ALLOCATED  10. DEPENDENT	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  AX WITHHELD
LT030 N 49th St	55 AND ZIP CODE 88 STATE LD. NO. 2-250/000 d with Employe ge and Tax ( This Information to the Internal Re- CATION NUMBER ADDRESS, AND ZIP Company r. Suite 55	16. STATE WAG  16. STATE, CI  Statement  S being furnished evenue Service  A. EMPLOYEE'S  663-42-4995	hi ES, TIPS, ET 18538. TTY, or LO 2020 SOCIAL SECU	CC. 17. STATE INCOM 33 PCAL tax return OMB NO. 1545-00 JRITY NUMBER	14, OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SI  7. SOCIAL SE	18. LOCAL WAGES, TIPS,  Dep  TIPS, OTHER COMPENSATION  ECURITY WAGES  E WAGES AND TIPS  CURITY TIPS	13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME Dt. of the Treasury  4. 2. FEDERAL INC 4. SOCIAL SECU 6. MEDICARE T  8. ALLOCATED	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  AX WITHHELD  TIPS
17030 N 49th St 2142 Coottsdale AZ 8525	55 AND ZIP CODE 88 STATE LD. NO. 2-259/000 d with Employe ge and Tax 5 This Information is to the Internal Re- ACTION NUMBER ADDRESS, AND ZIP Company r. Suite 55	16. STATE WAG Dee's STATE, Ci Statement Is being furnished venue service A. EMPLOYEE'S 663-42-4999 CODE	hi ES, TIPS, ET 18538. TTY, or LO 2020 SOCIAL SECU	CC. 17. STATE INCOM 33 PCAL tax return OMB NO. 1545-00 JRITY NUMBER	14, OTHER  700.49  2020  1. WAGES, T  3. SOCIAL SI  5. MEDICARI  7. SOCIAL SE  9.	18. LOCAL WAGES, TIPS,  Dep  TIPS, OTHER COMPENSATION  ECURITY WAGES  E WAGES AND TIPS  CURITY TIPS	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  Dt. of the Treasury  2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  8. ALLOCATED  10. DEPENDENT	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  AX WITHHELD  TIPS
27030 N 49th St 2142 Coottsdale AZ 8525 Coottsdale AZ 8525 Coottsdale AZ 8525 S. STATE EMPLOYEE 134-922 DPY 2 TO be filet DRM W-2 Wag D. CONTROL NUMBER 01743799602 D. EMPLOYER DENTIFIC 3-4922250 EMPLOYER'S NAME, merican Express C 10C 24-02-11 401 W Behrend DI hoenix AZ 85027 EMPLOYEE'S FIRST NA INUBHAY 7030 N 49th St 142 COOTTSdale AZ 8525 S. STATE EMPLOYEE EMPLOYEE S. STATE EMPLOYEE EMPLOYEE S. STATE EMPLOYEE	SS AND ZIP CODE  RS STATE LD. NO.  2-250/000  d with Employe  ge and Tax S  This Information i  to the Internal Re  ADDRESS, AND ZIP  Company  r. Suite 55	16. STATE WAG Dee's STATE, Ci Statement Is being furnished venue service A. EMPLOYEE'S 663-42-4999 CODE	18538. TY, or LO  2020 SOCIAL SECT  AME hi	CC. 17. STATE INCOM 33 CCAL tax return  OMB NO. 1545-00  PRITY NUMBER  SUF	14. OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SI  7. SOCIAL SE  9.  11. NONQUA  14. OTHER	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  14. 2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  10. DEPENDENT  12.8-d	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETREMENT X THIRD PARTY  PLAN  OFF PRANTY  OFF P
27030 N 49th St 2142  COUNTS ALL PROPERTY ADDRESS S. STATE EMPLOYEE  DEMPLOYEE S. ADDRESS S. STATE EMPLOYEE  DEMPLOYEE S. ADDRESS S. STATE EMPLOYEE  DEMPLOYEE DEMPLOYEE  DEMPLOYEE DEMPLOYEE  DEMPLOYEE S NAME, Merican Express C  DEMPLOYEE S FIRST NAME  DEMPLOYEE S FIRST	25 AND ZIP CODE RS STATE LD. NO.	16. STATE WAG  Pee's STATE, Cl  Statement  Is being furnished  Yerus Service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAG  22'S STATE, Cl	ES, TIPS, ET 18538. TY, or LO  2020 2020 SOCIAL SECT	CC. 17. STATE INCOM  OMB NO. 1545-00  JRITY NUMBER  SUI	14. OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SI  7. SOCIAL SE  9.  11. NONQUA  14. OTHER	18. LOCAL WAGES, TIPS,  Dep  TIPS, OTHER COMPENSATION  ECURITY WAGES  E WAGES AND TIPS  CURITY TIPS  LIFIED PLANS  18. LOCAL WAGES, TIPS,	13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME  14. SOCIAL SECULAR  15. ALLOCATED  10. DEPENDENT  12.a-d  13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETREMENT X THIRD PARTY PLAN 20.LOCALITY NAME
7030 N 49th St 1142 COUTSdale AZ 8525 SSAPE EMPLOYEE'S ADDRESS S. STATE EMPLOYEE'S DPY 2 TO be filter DRM W-2 Wag OPY 2 TO be filter OPEN M-2 WAG OPY 2 WAG	25 AND ZIP CODE RS STATE LD. NO.	16. STATE WAG  Pee's STATE, Cl  Statement  Is being furnished  Service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAG  22'S STATE, Cl	ES, TIPS, ET 18538. TY, or LO  2020 2020 SOCIAL SECT	CC. 17. STATE INCOM  OMB NO. 1545-00  JRITY NUMBER  SUI	14. OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SI 5. MEDICARI 7. SOCIAL SE 9. 11. NONQUA 14. OTHER	18. LOCAL WAGES, TIPS,  Dep  TIPS, OTHER COMPENSATION  ECURITY WAGES  E WAGES AND TIPS  CURITY TIPS  LIFIED PLANS  18. LOCAL WAGES, TIPS,	13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME  14. SOCIAL SECULAR  15. ALLOCATED  10. DEPENDENT  12.a-d  13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME	TAX 20.LOCALITY NAME  Internal Revenue Ser  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT X THIRD PARTY PLAN 20.LOCALITY NAME
27030 N 49th St 2142 COOTSdale AZ 8525 SSAPEOVEE'S ADDRESS S. STATE EMPLOYEE' J 134-922 DPY 2 TO be filed DRM W-2 Wage CONTROL NUMBER 01743799602 EMPLOYER IDENTIFIC 3-4922250 EMPLOYER IDENTIFIC 3-4922250 EMPLOYER S NAME, merican Express C IC 24-02-11 401 W Behrend Dr hoenix AZ 85027 EMPLOYEE'S FIRST NA nubhav 7030 N 49th St 142 CONTROL NUMBER 134-922 DPY 2 TO be filed DRM W-2 Wage CONTROL NUMBER	SS AND ZIP CODE R'S STATE LD. NO. 2-250/000 d with Employe ge and Tax S  This Information i to the Internal Re CATION NUMBER ADDRESS, AND ZIP Company r. Suite 55  AME AND INITIAL  SS AND ZIP CODE R'S STATE LD. NO. 2-250/000 d with Employe ge and Tax S  This Information is	16. STATE WAG  16. STATE WAG  Statement  S being furnished  A EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAG  CODE  LAST N  Tripat  16. STATE WAG  Statement  s being furnished	AME  18538. TY, or LO  2020  SOCIAL SECT  18538. TY, or LO	CC. 17. STATE INCOM  OMB NO. 1545-00  JRITY NUMBER  SUI  CC. 17. STATE INCOM  SUI  CC. 17. STATE  CC. 17. STATE  CC. 17. STATE  SUI  CC. 17. STATE  CC. 17. STATE  SUI  CC. 17	14. OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SE  5. MEDICARI  7. SOCIAL SE  5.  F. 11. NONQUA  14. OTHER  700.49  2020	18. LOCAL WAGES, TIPS,  Deprive of the compensation of the compens	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  12. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  9. ALLOCATED  10. DEPENDENT  12.a-d  13. STATUTORY (MPLOYEE  ETC. 19. LOCAL INCOME	TAX 20.LOCALITY NAME  Internal Revenue Ser  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT THIRD PAINT  PLAN SICK PAY  TAX 20.LOCALITY NAME  - Internal Revenue Se
7030 N 49th St 142 cottsdale AZ 8525 SSAIPLOVEE'S ADDRESS 5. STATE EMPLOYEE 134-922 ppy 2 To be filter 02RM W-2 Wag CONTROL NUMBER 1743799602 EMPLOYER'S NAME, merican Express C C 24-02-11 401 W Behrend Di noenix AZ 85027 EMPLOYEE'S FIRST NA nubhav 7030 N 49th St 142 cottsdale AZ 8525 SAIPLOVEE'S ADDRESS S	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re ADDRESS, AND ZIP Company r. Suite 55  AME AND INITIAL  SA AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re	16. STATE WAG  16. STATE WAG  Statement  S being furnished  A EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAG  CODE  LAST N  Tripat  16. STATE WAG  Statement  s being furnished	2020 2020 2020 2020 2020 2020 2020 202	OMB NO. 1545-00  CC. 17. STATE INCOM  OMB NO. 1545-00  SUI  CC. 12. STATE INCOM  SUI  CC. 12. STATE INCOM  OCAL tax return  OMB NO. 1545-00	14. OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SE 5. MEDICARI 7. SOCIAL SE 5. 11. NONQUA 14. OTHER  700.49 2020	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  12. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  9. ALLOCATED  10. DEPENDENT  12.a-d  13. STATUTORY (MPLOYEE  ETC. 19. LOCAL INCOME	TAX 20.LOCALITY NAME  Internal Revenue Ser  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT X THIRD PARTY PLAN 20.LOCALITY NAME
7030 N 49th St 142 cottsdale AZ 8525 SAIPLOVEE'S ADDRESS 5. STATE 134-922 py 2 To be filter 134-922 py 2 To be filter 13743799602 EMPLOVER IDENTIFIC 3-4922250 EMPLOVER IDENTIFIC EMPLOVE S FIRST NA DISTRICT STATE 1401 W Behrend Dr DOORIN AZ 85027 EMPLOVEE'S FIRST NA DISTRICT STATE 142 DISTRICT STATE 144 DISTRICT STATE 145 DISTRICT STATE 146 DISTRICT STATE 147 DISTRICT STAT	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- CATION NUMBER ADDRESS, AND ZIP COMPANY r. Suite 55 AME AND INITIAL SA AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER	16. STATE WAGE  Pee's STATE, CI  Statement  Is being furnished venue service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAGE  LAST N  Tripat  4. STATE, CI  Statement  4. SEMPLOYEE'S  663-42-4999  663-42-4999	AME hi  ES, TIPS, ET  18538. TY, or LO  2020  SOCIAL SECT  18538. TY, or LO  2020  SOCIAL SECT  2020  SOCIAL SECT	OMB NO. 1545-00  CC. 17. STATE INCOM  OMB NO. 1545-00  SUI  CC. 12. STATE INCOM  SUI  CC. 12. STATE INCOM  OCAL tax return  OMB NO. 1545-00	14, OTHER  700.49  2020  1. WAGES, 1  3. SOCIAL SI  7. SOCIAL SE  9.  14. OTHER  700.49  2020  1. WAGES, 2  2020	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME  2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  8. ALLOCATED  10. DEPENDENT  12.8-d  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  ept. of the Treasury  N 2. FEDERAL INC  12. FEDERAL INC  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME	TAX 20.LOCALITY NAME  Internal Revenue Ser  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT THIRD PAINT  PLAN SICK PAY  TAX 20.LOCALITY NAME  - Internal Revenue Se
7030 N 49th St 142 cottsdale AZ 8525 SSAPLOVEE'S ADDRESS 5. STATE EMPLOYEE'  J 134-922 ppy 2 To be filed ORM W-2 Wage CONTROL NUMBER 01743799602 EMPLOYER IDENTIFICA 401 W Behrend Dr Hobenix AZ 85027  EMPLOYEE'S FIRST NA HOBEN 142 cottsdale AZ 8525 SSAPLOVEE'S ADDRESS STATE EMPLOYEE'S APPLOYEE'S ADDRESS STATE EMPLOYEE'S COTTROL NUMBER 134-922 ppy 2 To be filed RM W-2 Wage CONTROL NUMBER 1743799602 EMPLOYER IDENTIFICA 14922250 EMPLOYEE'S NAME, A HOBEN W-19492250 EMPLOYER'S NAME, A HOBEN W-194920250 EMPLOYER'S NAME, A H	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- CATION NUMBER ADDRESS, AND ZIP COMPANY r. Suite 55 AME AND INITIAL SAND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ADDRESS, AND ZIP CODE ATION NUMBER	16. STATE WAGE  Pee's STATE, CI  Statement  Is being furnished venue service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAGE  LAST N  Tripat  4. STATE, CI  Statement  4. SEMPLOYEE'S  663-42-4999  663-42-4999	AME hi  ES, TIPS, ET  18538. TY, or LO  2020  SOCIAL SECT  18538. TY, or LO  2020  SOCIAL SECT  2020  SOCIAL SECT	OMB NO. 1545-00  CC. 17. STATE INCOM  OMB NO. 1545-00  SUI  CC. 12. STATE INCOM  SUI  CC. 12. STATE INCOM  OCAL tax return  OMB NO. 1545-00	14. OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SE 5. MEDICARI 14. OTHER  14. OTHER  14. OTHER  15. MEDICARI 15. SOCIAL SE 16. S. MEDICARI 16. OTHER  17. SOCIAL SE 18. S. MEDICARI 18. OTHER  18. S. MEDICARI 18. SOCIAL SE 18. S. MEDICARI 18. SOCIAL SE 18. S. MEDICARI 18. SOCIAL SE	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME  2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  8. ALLOCATED  10. DEPENDENT  12.8-d  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  ept. of the Treasury  N 2. FEDERAL INC  12. FEDERAL INC  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETHREMENT THOROPANTY  TAX 20.LOCALITY NAME  - Internal Revenue Se  OME TAX WITHHELD  OME TAX WITHHELD
7030 N 49th St 142 cottsdale AZ 8525 SSAMPLOVEE'S ADDRESS 5. STATE EMPLOVEE J 34-922 DPY 2 TO be filter ORM W-2 Wag CONTROL NUMBER TO STATE EMPLOVER IDENTIFIC 3-4922250 EMPLOVEE'S NAME, FROM W-2 WERE STATE EMPLOYER 1401 W Behrend DI NOBEL STATE EMPLOYEE 142 cottsdale AZ 85027 EMPLOYEE'S ADDRESS SAMPLOVEE'S ADDRESS SAMPLOVEE'S ADDRESS STATE EMPLOYEE 134-922 PY 2 TO be filter ORM W-2 Wag CONTROL NUMBER DI743799602 EMPLOYER IDENTIFIC BAR W-2 WAG CONTROL NUMBER DI743799602	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- LATION NUMBER ADDRESS, AND ZIP Company r. Suite 55  AME AND INITIAL  SS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- LATION NUMBER ADDRESS, AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ADDRESS, AND ZIP COMPANY ADDRESS, AND ZIP COMPANY	16. STATE WAGE  Pee's STATE, CI  Statement  Is being furnished venue service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAGE  LAST N  Tripat  4. STATE, CI  Statement  4. SEMPLOYEE'S  663-42-4999  663-42-4999	AME hi  ES, TIPS, ET  18538. TY, or LO  2020  SOCIAL SECT  18538. TY, or LO  2020  SOCIAL SECT  2020  SOCIAL SECT	OMB NO. 1545-00  CC. 17. STATE INCOM  OMB NO. 1545-00  SUI  CC. 12. STATE INCOM  SUI  CC. 12. STATE INCOM  OCAL tax return  OMB NO. 1545-00	14. OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SE 5. MEDICARI 14. OTHER  14. OTHER  14. OTHER  15. MEDICARI 15. SOCIAL SE 16. S. MEDICARI 16. OTHER  17. SOCIAL SE 18. S. MEDICARI 18. OTHER  18. S. MEDICARI 18. SOCIAL SE 18. S. MEDICARI 18. SOCIAL SE 18. S. MEDICARI 18. SOCIAL SE	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYSE  ETC. 19. LOCAL INCOME  12. FEDERAL INC 4. SOCIAL SECU 6. MEDICARE T 8. ALLOCATED 10. DEPENDENT 12.a-d  13. STATUTORY EMPLOYSE  ETC. 19. LOCAL INCOME  24. SOCIAL SECU 4. SOCIAL SECU	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT X THIRD PARTY PLAN SICK PAY  TAX 20.LOCALITY NAME  - Internal Revenue Se  OME TAX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD
7030 N 49th St 142 cottsdale AZ 8525 SSAIPLOVEE'S ADDRESS 5. STATE EMPLOYER 134-922 PDY 2 TO be filled PRM W-2 Wag CONTROL NUMBER 1743799602 EMPLOVER'S NAME, A EMPLOYER 17030 N 49th St 17030	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- LATION NUMBER ADDRESS, AND ZIP Company r. Suite 55  AME AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- ATION NUMBER ADDRESS, AND ZIP CODE STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP COMPANY Company S. Suite 55	16. STATE WAG  De's STATE, CI  Statement  S being furnished venue Service  A. EMPLOYEE'S  663-42-4999  CODE  16. STATE WAG  16. STATE WAG  LAST N  Tripat  16. STATE WAG  A. EMPLOYEE'S  663-42-4999  CODE	AME  18538. TY, or LO  2020  SOCIAL SECT  18538. TY, or LO  2020  SOCIAL SECT  2020  SOCIAL SECT  2020  SOCIAL SECT  2020	OMB NO. 1545-00  CC. 17. STATE INCOM  OMB NO. 1545-00  SUI  CC. 12. STATE INCOM  SUI  CC. 12. STATE INCOM  OCAL tax return  OMB NO. 1545-00	14. OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SE 5. MEDICARI 14. OTHER  14. OTHER  14. OTHER  15. MEDICARI 15. SOCIAL SE 16. S. MEDICARI 16. OTHER  17. SOCIAL SE 18. S. MEDICARI 18. OTHER  18. S. MEDICARI 18. SOCIAL SE 18. S. MEDICARI 18. SOCIAL SE 18. S. MEDICARI 18. SOCIAL SE	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  12. FEDERAL INC 4. SOCIAL SECU 6. MEDICARE T 9. ALLOCATED  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  ETC. 19. LOCAL INCOME  2. FEDERAL INC 4. SOCIAL SECU 6. MEDICARE T 8. ALLOCATED  8. ALLOCATED  8. ALLOCATED	TAX 20.LOCALITY NAME  Internal Revenue Ser  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT T THIRD PANTY  TAX 20.LOCALITY NAME  - Internal Revenue Se  OME TAX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD
27030 N 49th St 2142 COUTSdale AZ 8525 SSAPIOVEE'S ADDRESS S. STATE EMPLOYEE  DPY 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVER'S NAME, PROPOSE STATE EMPLOYEE'S PROPOSE CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 2 TO be filler DRM W-2 Wag CONTROL NUMBER DIVASTOPPO 6 TO CONTROL NUMBER DIVASTOPPO	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- LATION NUMBER ADDRESS, AND ZIP Company r. Suite 55  AME AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- ATION NUMBER ADDRESS, AND ZIP CODE STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP COMPANY Company S. Suite 55	16. STATE WAGE  Pee's STATE, CI  Statement  Is being furnished venue service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAGE  LAST N  Tripat  4. STATE, CI  Statement  4. SEMPLOYEE'S  663-42-4999  663-42-4999	AME  AME  AME	OMB NO. 1545-00  CC. 17. STATE INCOM  OMB NO. 1545-00  SUI  CC. 12. STATE INCOM  SUI  CC. 12. STATE INCOM  OCAL tax return  OMB NO. 1545-00	14. OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SE 5. MEDICARI 14. OTHER  7. SOCIAL SE 7. 11. NONQUA 14. OTHER  14. OTHER  15. MEDICAR  7. SOCIAL SE 8. S. MEDICAR 7. SOCIAL SE 9. 9.	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  12. FEDERAL INC 4. SOCIAL SECU 6. MEDICARE T 9. ALLOCATED  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  ETC. 19. LOCAL INCOME  2. FEDERAL INC 4. SOCIAL SECU 6. MEDICARE T 8. ALLOCATED  8. ALLOCATED  8. ALLOCATED	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT X THIRD PARTY PLAN SICK PAY  TAX 20.LOCALITY NAME  - Internal Revenue Se  OME TAX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD
1930 N 49th St 1142 COUTSdale AZ 8525 SSAPIC EMPLOYER 134-922 DPY 2 TO be filler ORM W-2 Wag 0. CONTROL NUMBER 0.1743799602 EMPLOYER IDENTIFIC 3-4922250 EMPLOYER IDENTIFIC 3-4922250 EMPLOYER SNAME, merican Express C C 24-02-11 401 W Behrend Dr hoenix AZ 85027 EMPLOYEES FIRST NA nubhav 7030 N 49th St 122 DPY 2 TO be filler DRM W-2 Wag CONTROL NUMBER 0.51ATE EMPLOYEE DRM W-2 Wag CONTROL NUMBER 0.743799602 EMPLOYER IDENTIFIC 0.3-4922250 EMPLOYER IDENTIFIC 0.3-492250 EMPLOYER	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- LATION NUMBER ADDRESS, AND ZIP Company r. Suite 55  AME AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information i to the Internal Re- ATION NUMBER ADDRESS, AND ZIP CODE STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP COMPANY Company S. Suite 55	16. STATE WAG  Dee's STATE, Ci  Statement  S being furnished evenue Service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAG  16. STATE WAG  LAST N  S being furnished evenue Service  A. EMPLOYEE'S  663-42-4999  CODE	AME  AME  AME	OCAL tax return  OMB NO. 1545-00  JRITY NUMBER  SUI  OCAL tax return  OMB NO. 1545-00  JRITY NUMBER	14. OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SE 5. MEDICARI 14. OTHER  7. SOCIAL SE 7. 11. NONQUA 14. OTHER  14. OTHER  15. MEDICAR  7. SOCIAL SE 8. S. MEDICAR 7. SOCIAL SE 9. 9.	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME  14. 2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  10. DEPENDENT  12.8-d  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  8. ALLOCATED  10. DEPENDENT  10. DEPENDENT	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT T THERO PARTY  TAX 20.LOCALITY NAME  - Internal Revenue Se  OME TAX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD
27030 N 49th St 2142 200ttsdale AZ 8525 2534PLOVEE'S ADDRESS 3. STATE EMPLOVEE DPY 2 TO be filter DRM W-2 Wag DPY 2 TO be filter DRM W-2 Wag 0. CONTROL NUMBER 0. CONTROL NUMBER 0. EMPLOVEE'S NAME, MORE AZ 85027  EMPLOVEE'S FIRST NA MULTIPLE EMPLOVEE'S ADDRESS STATE EMPLOVEE'S ADDRESS STATE EMPLOVEE'S ADDRESS STATE EMPLOVEE'S ADDRESS STATE EMPLOYEE'S ADDRESS ORM W-2 Wag 0. CONTROL NUMBER	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP Company r. Suite 55  AME AND INITIAL  SA AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP COMPANY SUITE SS  AME AND INITIAL	16. STATE WAG  Dee's STATE, Ci  Statement  S being furnished evenue Service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAG  16. STATE WAG  LAST N  S being furnished evenue Service  A. EMPLOYEE'S  663-42-4999  CODE	AME  AME  AME	OCAL tax return  OMB NO. 1545-00  JRITY NUMBER  SUI  OCAL tax return  OMB NO. 1545-00  JRITY NUMBER	14, OTHER  700.49 2020  1. WAGES, 1 3. SOCIAL SE 3. SOCIAL SE 4. OTHER  7. SOCIAL SE 4. OTHER  14. OTHER  15. MEDICAR  7. SOCIAL SE 5. MEDICAR 7. SOCIAL SE	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYE  ETC. 19. LOCAL INCOME  14. 2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  10. DEPENDENT  12.8-d  13. STATUTORY EMPLOYEE  ETC. 19. LOCAL INCOME  2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  8. ALLOCATED  10. DEPENDENT  10. DEPENDENT	TAX 20.LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  RETIREMENT T THERO PARTY  TAX 20.LOCALITY NAME  - Internal Revenue Se  OME TAX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD  AX WITHHELD
27030 N 49th St 2142 200ttsdale AZ 8525 25APILOYEE'S ADDRESS 2. STATE EMPLOYEE' 3. STATE 134-922 2019 2 To be filter 2. CONTROL NUMBER 201743799602 2. EMPLOYER IDENTIFIC 34922250 2. EMPLOYER S NAME, 34922250 2. EMPLOYEE'S FIRST NA 1. STATE EMPLOYEE'S 2. STATE EMPLOYEE'S 3. STATE EM	SS AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP Company r. Suite 55  AME AND INITIAL  SA AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP CODE RS STATE LD. NO. 2-250/000 d with Employe ge and Tax S This Information is to the Internal Re- ATION NUMBER ADDRESS, AND ZIP COMPANY SUITE SS  AME AND INITIAL	16. STATE WAG  Dee's STATE, Ci  Statement  S being furnished evenue Service  A. EMPLOYEE'S  663-42-4999  CODE  LAST N  Tripat  16. STATE WAG  16. STATE WAG  LAST N  S being furnished evenue Service  A. EMPLOYEE'S  663-42-4999  CODE	AME	CC. 17. STATE INCOM OMB NO. 1545-00 OMB NO. 1545-00 OWITY NUMBER SUIT OMB NO. 1545-00 OMB NO. 1545-00 OMB NO. 1545-00 OMB NO. 1545-00 SUITY NUMBER	14. OTHER  700.49 2020  8 1. WAGES, 1  7. SOCIAL SE  9.  11. NONQUA  14. OTHER  7. SOCIAL SE  9.  1. WAGES, 1  1. NONQUA  14. OTHER  7. SOCIAL SE  9.  1. WAGES, 1  1. NONQUA  14. OTHER	18. LOCAL WAGES, TIPS,  Department of the compensation of the comp	13. STATUTORY EMPLOYE ETC. 19. LOCAL INCOME Dt. of the Treasury  1 2. FEDERAL INC  4. SOCIAL SECU  6. MEDICARE T  10. DEPENDENT  12.a-d  13. STATUTORY EMPLOYEE ETC. 19. LOCAL INCOME PPL. of the Treasury  14. SOCIAL SECU  6. MEDICARE T  8. ALLOCATED  10. DEPENDENT  11. STATUTORY  12. FEDERAL INC  13. STATUTORY  14. SOCIAL SECU  15. ALLOCATED  16. MEDICARE T  17. DEPENDENT  18. ALLOCATED  19. DEPENDENT  19. DEPENDENT	TAX 20. LOCALITY NAME  Internal Revenue Sen  OME TAX WITHHELD  OME TAX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS  TAX 20. LOCALITY NAME  - Internal Revenue Sen  OME TAX WITHHELD  AX WITHHELD  PRITY TAX WITHHELD  AX WITHHELD  AX WITHHELD  TIPS  CARE BENEFITS