

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

2020

OMB No. 1545-0008 Department of the Treasury—Internal Revenue Service

c Employer's name, address, and ZIP code		d Control number G1019	1 Wages, tips, other compensation 52231.02	2 VI income tax withheld 7311.28
NAN, INC. 636 LAUMAKA STREET HONOLULU HI 96819		7 Social security tips 0.00	3 Social security wages 0.00	4 Social security tax withheld 0.00
		8	5 Medicare wages and tips 0.00	6 Medicare tax withheld 0.00
		9	10	11 Nonqualified plans 0.00
e Employee's name, address, and ZIP code Suff.		12a See instructions for box 12 DD 3549.15	12b	12c
SATISH KAKKERA PO BOX 315391 TAMUNING GU 96931		12d	13 Statutory employee Retirement plan Third-party sick pay	14 Other
		a Employee's social security number 090-37-7674	b Employer identification number 99-0317519	

Copy B To Be Filed With Employee's Guam Tax Return

This information is being furnished to the Guam Department of Revenue and Taxation.

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Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

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Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

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