

<small>PAYER'S name, street address, city, state, and ZIP code, and telephone no.</small> <b>NEW JERSEY DEPARTMENT OF LABOR UNEMPLOYMENT INSURANCE PO BOX 916 TRENTON, NJ 08625-0916</b>		<small>1 Unemployment compensation</small> <b>\$18,021.00</b> <small>2 State or local income tax refunds, credits, or offsets</small> \$	<small>OMB No. 1545-0120</small> <b>2020</b> <small>Form 1099-G</small>	<b>Certain Government Payments</b>
<small>PAYER'S Federal Identification number</small> <b>22-2481818</b>	<small>RECIPIENT'S identification number</small> <b>477-87-3886</b>	<small>3 Box 2 amount is for tax year</small>	<small>4 Federal income tax withheld</small> <b>\$0.00</b>	
<small>RECIPIENT'S Name</small> <b>RASHMI KUMARI</b>		<small>5 ATAA payments</small> \$	<small>6 Taxable grants</small> \$	
<small>Street address (including apt. no.)</small> <b>873 MAIN ST APT 2F</b>		<small>7 Agriculture payments</small> \$	<small>8 If checked, box 2 is trade or business income</small> <input type="checkbox"/>	
<small>City, state, and ZIP code</small> <b>HACKENSACK NJ 07601-4960</b>		<b>Unemployment Insurance</b>		
<small>Account number (see instructions)</small>				