

To the right is an explanation of the contents of the wage boxes on your W-2. Please note that the Gross amount shown may include adjustments.				Federal Box 1	Soc. Sec. Box 3 & 7	Medicare Box 5	
				Gross Wages	177021.19	177021.19	177021.19
				Txbl Benefits	557.74	557.74	557.74
				Group Term Life	107.28	107.28	107.28
				Adoption			
				Deferred Comp	(8924.20)		
				Section 125	(6624.72)	(6624.72)	(6624.72)
				Other Pretax/Wage Limit		(33361.49)	
				W-2 Wages	162137.29	137700.00	171061.49
D. CONTROL NUMBER 001748372401	This Information is being furnished to the Internal Revenue Service	2020	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 162137.29	2. FEDERAL INCOME TAX WITHHELD 17986.59		
B. EMPLOYER IDENTIFICATION NUMBER 13-3133497	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 491-63-7088			3. SOCIAL SECURITY WAGES 137700.00	4. SOCIAL SECURITY TAX WITHHELD 8537.40		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE American Express Travel Related Services Company, Inc. MC 24-02-11 2401 W Behrend Dr. Suite 55 Phoenix AZ 85027				5. MEDICARE WAGES AND TIPS 171061.49	6. MEDICARE TAX WITHHELD 2480.39		
				7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS		
				9.	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL Prabhu Lakshmi Srikanth				LAST NAME Sunkara	SUFF.	11. NONQUALIFIED PLANS	
610 rivendell way Edison NJ 08817 USA				14. OTHER NY FL NY DI		12.a-d C D W DD	107.28 8924.20 800.00 21956.04
F. EMPLOYEE'S ADDRESS AND ZIP CODE				196.72 31.20	13. STATUTORY EMPLOYEE <input type="checkbox"/> RETIREMENT PLAN <input checked="" type="checkbox"/> THIRD PARTY SICK PAY <input type="checkbox"/>		
15. STATE NJ	EMPLOYER'S STATE I.D. NO. 133-133-497/000	16. STATE WAGES, TIPS, ETC. 169562.01	17. STATE INCOME TAX 122.63	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

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FORM W-2 Wage and Tax Statement

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