									Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5	
		explanation of the Gross amount					Gross Wage		177021. 557.			
								1				
							Group Term	n Life	107.	28 107.2	28 107.28	
							Adoption					
							Deferred Co	omp	(8924.2	20)		
							Section 125	5	(6624.7	72) (6624.7	2) (6624.72)	
							Other Preta	x/Wage Limit		(33361.4	9)	
							W-2 Wages		162137.	.29 137700.0	00 171061.49	
D. CONTROL 001748372	This information is being furnished ONAP NO. 1E4E 0009					1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 162137.29			2. FEDERAL INCOME TAX WITHHELD 17986.59		
		TION NUMBER	A. EMPLOYEE'S		IRITY NI IMBE	:P	3 SOCIAL SE	CURITY WAGES	,,,_,	4. SOCIAL SECURITY TAX WITHHELD		
13-313349		TION NOWIDER	491-63-7088	JOCIAL JECO	MITT NOWIDE		J. JOCIAL JE	13770	00.00	8537.40		
C EMPLOYER	R'S NAME AI	DDRESS, AND ZIP C	ODE				5 MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WITH	HEID	
American E	xpress Tra	vel Related Serv		Inc.			01111211011112	17106	51.49		2480.39	
MC 24-02-: 2401 W Be Phoenix AZ	hrend Dr. S	Suite 55					7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS		
T HOCHIX AZ	03027						9.			10. DEPENDENT CARE B	ENEFITS	
		IE AND INITIAL	LAST NA			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	107.28	
Prabhu Lak	kshmi Srika	inth	Sunka	ra						D	8924.20	
610 rivend							14. OTHER NY FL 196.72		196.72	W	800.00	
Edison NJ (USA	08817						N)	/ DI	31.20	DD	21956.04	
F. EMPLOYEE	E'S ADDRESS	AND ZIP CODE								13. STATUTORY RETIR PLAN	EMENT X THIRD PARTY SICK PAY	
15. STATE EMPLOYER'S STATE I.D. NO. 16. STATE WAGES, TIPS, ETC. 17. STATE INCOME TAX 133-133-497/000 169562.01 17. STATE INCOME TAX						122.63	18. LOCAL WAGES,	TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME		

D. CONTRO	L NUMBER	This Information is	being furnished		ONAR	NO 1	T4F 0000	1. WAGES, TI	PS, OTHER COMPENSA	TION	2. FEDERAL INCOME TA	AX WITHHELD	
00174837	2401	to the Internal Rev	enue Service	2020	OIVIB	NO. I	545-0008		162137	'.29		17986.59	
B. EMPLOYE	ER IDENTIFICA	TION NUMBER	A. EMPLOYEE'S	SOCIAL SEC	URITY NU	UMBER		3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD	
13-31334	97		491-63-7088						137700	0.00		8537.40	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE								5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD	
		vel Related Serv	ices Company,	Inc.					171061	.49		2480.39	
MC 24-02- 2401 W Bo Phoenix A	ehrend Dr. S	Suite 55						7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS		
I Hoenix A	2 03027							9.			10. DEPENDENT CARE	BENEFITS	
E. EMPLOYE	EE'S FIRST NAN	ME AND INITIAL	LAST NA	AME			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	107.28	
Prabhu La	akshmi Srika	inth	Sunka	ra							D	8924.20	
610 riven	dell wav							14. OTHER NY	'FL	196.7	2 W	800.00	
Edison NJ USA	08817							NY	' DI	31.2	0 DD	21956.04	
F. EMPLOYEE'S ADDRESS AND ZIP CODE										13. STATUTORY RETI	REMENT X THIRD PARTY SICK PAY		
15. STATE	EMPLOYER'S	STATE I.D. NO.	16. STATE WAG	ES, TIPS, E	TC.	17. STAT	TE INCOME T	AX	18. LOCAL WAGES, T	IPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	
NJ	133-133-	497/000		169562	2.01			122.63					

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2020

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 001748372401	This Information is to the Internal Rev		2020	омв по	. 1545-0008	1. WAGES, TI	PS, OTHER COMPENSA 162137		2. FEDERAL INCOME T	AX WITHHELD 17986.59		
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER						3. SOCIAL SE	3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD		
13-3133497 491-63-7088							137700.00			8537.40		
C. EMPLOYER'S NAME, A	DDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD			
American Express Tr	avel Related Serv	ices Company,	Inc.			171061	1.49		2480.39			
MC 24-02-11 2401 W Behrend Dr. Suite 55						7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	8. ALLOCATED TIPS		
Phoenix AZ 85027						9.			10. DEPENDENT CARE	BENEFITS		
E. EMPLOYEE'S FIRST NA	ME AND INITIAL	LAST NA	ME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	107.28		
Prabhu Lakshmi Srik	anth	Sunka	ra						D	8924.20		
610 rivendell way						14. OTHER NY	′ FL	196.7	2 W	800.00		
Edison NJ 08817 USA							' DI	31.2		21956.04		
E. EMPLOYEE'S ADDRESS AND ZIP CODE									13. STATUTORY RET PLA	REMENT X THIRD PARTY N SICK PAY		
15. STATE EMPLOYER	'S STATE I.D. NO.	16. STATE WAG	ES, TIPS, ET	C. 17.	STATE INCOME T	AX	18. LOCAL WAGES, T	IPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		
NJ 133-133	497/000		169562.	01		122.63						

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2020

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMB 001748372401	This Information is to the Internal Rev	•	2020	OMB NO. 1	1545-0008	1. WAGES, TI	PS, OTHER COMPENSAT 162137.		2. FEDERAL INCOME TA	AX WITHHELD 17986.59	
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER						3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD	
13-3133497		491-63-7088					137700.	00		8537.40	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE							WAGES AND TIPS		6. MEDICARE TAX WI	THHELD	
American Express Travel Related Services Company, Inc.							171061.	49		2480.39	
MC 24-02-11 2401 W Behrend Phoenix AZ 8502	2401 W Behrend Dr. Suite 55						7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS	
THOCHIX AZ 030Z	,					9.			10. DEPENDENT CARE	BENEFITS	
E. EMPLOYEE'S FIRS	T NAME AND INITIAL	LAST NA	AME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	107.28	
Prabhu Lakshmi	Srikanth	Sunka	ra						D	8924.20	
610 rivendell wa	V					14. OTHER NY	'FL	196.72	w	800.00	
Edison NJ 08817 USA						NY	DI	31.20	DD	21956.04	
F. EMPLOYEE'S ADDRESS AND ZIP CODE									13. STATUTORY RETI	REMENT X THIRD PARTY SICK PAY	
	OYER'S STATE I.D. NO.	16. STATE WAG			ATE INCOME T		18. LOCAL WAGES, TIF	S, ETC. 1	9. LOCAL INCOME TAX	20. LOCALITY NAME	
NJ 133-	133-497/000		169562	.01		122.63					

D. CONTROL		This Information is		₂₀₂₀ C	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD
B. EMPLOYE	R IDENTIFICA	to the Internal Rev TION NUMBER	A. EMPLOYEE'S		ITY NUMBER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY T	AX WITHHELD
C. EMPLOYE		DDRESS, AND ZIP (491-63-7088 CODE			5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WI	THHELD
American E MC 24-02- 2401 W Be Phoenix AZ	11 hrend Dr.	avel Related Serv Suite 55	vices Company,	Inc.		7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS	
						9.		10. DEPENDENT CARE	BENEFITS
E. EMPLOYE Prabhu Lal		ME AND INITIAL	LAST NA		SUFF.	11. NONQUAL	IFIED PLANS	12.a-d	
610 rivend Edison NJ USA	iell way					14. OTHER			
F. EMPLOYE 15. STATE		S STATE I.D. NO.	16. STATE WAG	ES TIPS ETC	. 17. STATE INCOME T	AX	18. LOCAL WAGES, TIPS, ETC. :	13. STATUTORY RETI	THIRD PARTY SICK PAY
NY	13313349		10. STATE WAG	162137.2		10112.39	18. LOCAL WAGES, HES, LTC.	13. LOCAL INCOME TAX	20. EGCAETT NAIVIE
D. CONTROL		This Information is	s being furnished		OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD
001748372 B. EMPLOYE		to the Internal Rev TION NUMBER	A. EMPLOYEE'S	2020		3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY T	AX WITHHELD
13-313349 C. EMPLOYE		DDRESS, AND ZIP (491-63-7088			5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WI	THHELD
MC 24-02-	11	avel Related Serv	vices Company,	Inc.		7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS	
2401 W Be Phoenix AZ		Suite 55				9.		10. DEPENDENT CARE	DENICEITE
									DENEFIIS
E. EMPLOYE Prabhu Lal		ME AND INITIAL anth	LAST NA Sunka		SUFF.	11. NONQUAL	IFIED PLANS	12.a-d	
610 riveno Edison NJ						14. OTHER			
USA	E'S ADDRESS	AND ZIP CODE						13. STATUTORY RET	REMENT X THIRD PARTY N SICK PAY
15. STATE NY		S STATE I.D. NO.	16. STATE WAG	ES, TIPS, ETC. 162137.2		AX 10112.39	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME
Сору 2 То	be filed	with Employe				2020	Dept. of	the Treasury - Inte	rnal Revenue Service
		e and Tax S							
D. CONTROL 001748372	2402	This Information is						T	
B. EMPLOYE 13-313349	D IDENTIFICA	to the Internal Rev	enue Service	2020	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD
10 0100 .5		to the Internal Rev TION NUMBER		SOCIAL SECUR			IPS, OTHER COMPENSATION CURITY WAGES	FEDERAL INCOME T. SOCIAL SECURITY T	
C. EMPLOYE	97 R'S NAME, A	DDRESS, AND ZIP (A. EMPLOYEE'S 491-63-7088	SOCIAL SECUR		3. SOCIAL SE			AX WITHHELD
C. EMPLOYE	97 R'S NAME, A Express Tra 11	DDRESS, AND ZIP (avel Related Serv	A. EMPLOYEE'S 491-63-7088	SOCIAL SECUR		3. SOCIAL SE	CURITY WAGES WAGES AND TIPS	4. SOCIAL SECURITY T	AX WITHHELD
C. EMPLOYE American E MC 24-02-	97 R'S NAME, A Express Tra 11 ehrend Dr.	DDRESS, AND ZIP (avel Related Serv	A. EMPLOYEE'S 491-63-7088	SOCIAL SECUR		3. SOCIAL SE	CURITY WAGES WAGES AND TIPS	4. SOCIAL SECURITY T	THHELD
C. EMPLOYE American E MC 24-02- 2401 W Be Phoenix AZ	R'S NAME, A Express Tra 11 Ehrend Dr. Z 85027	TITION NUMBER DDRESS, AND ZIP (avel Related Serv Suite 55	A. EMPLOYEE'S 491-63-7088 CODE vices Company,	SOCIAL SECUR Inc.		3. SOCIAL SE	CURITY WAGES WAGES AND TIPS EURITY TIPS	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS	THHELD
C. EMPLOYE American E MC 24-02- 2401 W Be Phoenix AZ E. EMPLOYE Prabhu Lal	er's NAME, A Express Tra 11 Ehrend Dr. Z 85027 E'S FIRST NAMES SHING SRIKA	TITION NUMBER DDRESS, AND ZIP (avel Related Serv Suite 55	A. EMPLOYEE'S 491-63-7088 CODE vices Company,	SOCIAL SECUR Inc.	ITY NUMBER	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE 9.	CURITY WAGES WAGES AND TIPS EURITY TIPS	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE	THHELD
C. EMPLOYE American E MC 24-02- 2401 W Be Phoenix AZ	er's NAME, A Express Tra 11 Ehrend Dr. Z 85027 E'S FIRST NAME kshmi Srika dell way	TITION NUMBER DDRESS, AND ZIP (avel Related Serv Suite 55	A. EMPLOYEE'S 491-63-7088 CODE vices Company,	SOCIAL SECUR Inc.	ITY NUMBER	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE 9. 11. NONQUAL	CURITY WAGES WAGES AND TIPS EURITY TIPS	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d	AX WITHHELD THHELD BENEFITS
C. EMPLOYE American E MC 24-02- 2401 W Be Phoenix AZ E. EMPLOYE Prabhu Lal 610 riveno Edison NJ USA F. EMPLOYE	R'S NAME, A Express Tra 11 Ehrend Dr. Z 85027 E'S FIRST NAME kshmi Srika dell way 08817	TION NUMBER DDRESS, AND ZIP C avel Related Serv Suite 55 ME AND INITIAL anth	A. EMPLOYEE'S A. EMPLOYEE'S 491-63-7088 ODE rices Company, LAST N. Sunka	Inc.	SUFF.	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE 9. 11. NONQUAL 14. OTHER	CURITY WAGES WAGES AND TIPS CURITY TIPS IFIED PLANS	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETI	AX WITHHELD THHELD BENEFITS REMENT X THIRD PARTY N
C. EMPLOYE American E MC 24-02- 2401 W Be Phoenix A2 E. EMPLOYE Prabhu Lal 610 rivenc Edison NJ USA F. EMPLOYE NY	R'S NAME, A Express Tra 11 11-thrend Dr. 2 85027 E'S FIRST NAME Kshmi Sriki dell way 08817 E'S ADDRESS EMPLOYER' 13313344	TION NUMBER DDRESS, AND ZIP CO avel Related Services Suite 55 ME AND INITIAL anth AND ZIP CODE S STATE I.D. NO. 97	A. EMPLOYEE'S 491-63-7088 :ODE rices Company, LAST N. Sunka	SOCIAL SECUR Inc. AME ra ES, TIPS, ETC. 162137.2	SUFF. 17. STATE INCOME T	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE 9. 11. NONQUAL 14. OTHER	CURITY WAGES WAGES AND TIPS EURITY TIPS JEFIED PLANS 18. LOCAL WAGES, TIPS, ETC. 2	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETERMINED PLAY 19. LOCAL INCOME TAX	REMENT X THIRD PARTY SICK PAY
C. EMPLOYE American I MC 24-02- 2401 W Be Phoenix A2 E. EMPLOYE Prabhu Lal 610 rivenc Edison NJ USA F. EMPLOYE NY Copy 2 To	R'S NAME, A Express Trail 11 thrend Dr. 2 85027 E'S FIRST NAI Kshmil Srik- dell way 08817 E'S ADDRESS EMPLOYER' 1331334' 0 be filed	TION NUMBER DDRESS, AND ZIP C avel Related Services Suite 55 ME AND INITIAL anth	A. EMPLOYEE'S 491-63-7088 ODE rices Company, LAST N. Sunka	SOCIAL SECUR Inc. AME ra ES, TIPS, ETC. 162137.2	SUFF. 17. STATE INCOME T	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE 9. 11. NONQUAL 14. OTHER	CURITY WAGES WAGES AND TIPS EURITY TIPS JEFIED PLANS 18. LOCAL WAGES, TIPS, ETC. 2	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETERMINED PLAY 19. LOCAL INCOME TAX	AX WITHHELD THHELD BENEFITS REMENT X THIRD PARTY N
C. EMPLOYE American Is MC 24-02-2 2401 W Be Phoenix AZ E. EMPLOYE Prabhu Lal 610 rivenc Edison NJ USA F. EMPLOYE 15. STATE NY D. CONTROL D. CONTROL	PAR'S NAME, A RESUPERS Trail 11 September 2 & 85027 E'S FIRST NAME (SECTION OF THE PARENT OF THE PA	DDRESS, AND ZIP C avel Related Serv Suite 55 ME AND INITIAL anth AND ZIP CODE S STATE I.D. NO. 97 with Employe e and Tax S This Information is	A. EMPLOYEE'S A. EMPLOYEE'S 491-63-7088 ODE rices Company, LAST N. Sunka 16. STATE WAG e'S STATE, CI statement being furnished	SOCIAL SECUR Inc. AME ra ES, TIPS, ETC. 162137.2 TY, or LOC	SUFF. 17. STATE INCOME T	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE 9. 11. NONQUAL 14. OTHER AX 10112.39	CURITY WAGES WAGES AND TIPS EURITY TIPS JEFIED PLANS 18. LOCAL WAGES, TIPS, ETC. 2	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETERMINED PLAY 19. LOCAL INCOME TAX	REMENT X THIRD PARTY N SICK PAY 20. LOCALITY NAME 20. LOCALITY NAME
C. EMPLOYE American Is MC 24-02-2 2401 W Be Phoenix AZ E. EMPLOYE Prabhu Lal 610 rivenc Edison NJ USA F. EMPLOYE 15. STATE NY Copy 2 To FORM W D. CONTROL 00174837; B. EMPLOYE	NOTE OF THE PROPERTY OF THE PR	DDRESS, AND ZIP COAVELED TO THE COAVELED TO TH	A. EMPLOYEE'S A. EMPLOYEE'S A91-63-7088 A91-63-7088 A91-63-7088 ASTATE WAG ASTATE WAG	Inc. AME Fra ES, TIPS, ETC. 162137.2 TY, or LOC	SUFF. 17. STATE INCOME T 9 PAL tax return DMB NO. 1545-0008	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SEG 9. 11. NONQUAL 14. OTHER AX 10112.39 2020	CURITY WAGES WAGES AND TIPS EURITY TIPS IFIED PLANS 18. LOCAL WAGES, TIPS, ETC	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETILEMPLOYEE PLAI 19. LOCAL INCOME TAX f the Treasury - Interpretation of the treasury - Interpretation - Interpret	REMENT X THIRD PARTY N SICK PAY 20. LOCALITY NAME PER REVENUE SERVICE
C. EMPLOYE American Is MC 24-02-2 2401 W Be Phoenix A2 E. EMPLOYE Prabhu Lal 610 rivenc Edison NJ USA F. EMPLOYE NY Copy 2 To FORM W D. CONTROL 001748372 B. EMPLOYE C. EMPLOY C. EMPLOYE C. EMPLOYE C. EMPLOYE C. EMPLOYE C. EMPLOYE C. EMPLOY	NOTE OF THE PROPERTY OF THE PR	TION NUMBER DDRESS, AND ZIP CODE S STATE I.D. NO. 97 with Employee and Tax S This Information is to the Internal Rev. CTION NUMBER DDRESS, AND ZIP CODE S STATE I.D. NO. 97	A. EMPLOYEE'S A. EMPLOYEE'S A91-63-7088 ODE Prices Company, LAST N. Sunka 16. STATE WAG e's STATE, CI statement being furnished enue Service A. EMPLOYEE'S A91-63-7088	SOCIAL SECUR Inc. AME ra ES, TIPS, ETC. 162137.2 TY, or LOC	SUFF. 17. STATE INCOME T 9 PAL tax return DMB NO. 1545-0008	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE(9. 11. NONQUAL 14. OTHER AX 10112.39 2020 1. WAGES, T 3. SOCIAL SE	CURITY WAGES WAGES AND TIPS EURITY TIPS IFIED PLANS 18. LOCAL WAGES, TIPS, ETC	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETEMPLOYEE PLAY 19. LOCAL INCOME TAX f the Treasury - Interest of the Treasur	BENEFITS REMENT X THIRD PARTY N SICK PAY 20. LOCALITY NAME ernal Revenue Service AX WITHHELD AX WITHHELD
C. EMPLOYE American Is MC 24-02-2401 W Be Phoenix AZ E. EMPLOYE Prabhu Lai 610 rivenc Edison NJ USA F. EMPLOYE 15. STATE NY D. CONTROI. 001748377. D. CONTROI. 001748372. E. EMPLOYE 13-3133495. C. EMPLOYE American Is MC 24-02-2	NOT THE STANDARD AND TH	TION NUMBER DDRESS, AND ZIP COANNEL AND ZIP CODE S STATE L.D. NO. 97 with Employee and Tax S This Information is to the Internal Rev. LITION NUMBER DDRESS, AND ZIP COANNEL AND ZIP COANNE	A. EMPLOYEE'S A. EMPLOYEE'S A91-63-7088 ODE Prices Company, LAST N. Sunka 16. STATE WAG e's STATE, CI statement being furnished enue Service A. EMPLOYEE'S A91-63-7088	SOCIAL SECUR Inc. AME ra ES, TIPS, ETC. 162137.2 TY, or LOC	SUFF. 17. STATE INCOME T 9 PAL tax return DMB NO. 1545-0008	3. SOCIAL SE 5. MEDICARE 7. SOCIAL SE(9. 11. NONQUAL 14. OTHER AX 10112.39 2020 1. WAGES, T 3. SOCIAL SE	CURITY WAGES WAGES AND TIPS EURITY TIPS IFIED PLANS 18. LOCAL WAGES, TIPS, ETC	4. SOCIAL SECURITY T 6. MEDICARE TAX WI 8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETILEMPLOYEE PLAI 19. LOCAL INCOME TAX The Treasury - Interest of the Treasury - Interest of the Treasury T 4. SOCIAL SECURITY T	BENEFITS REMENT X THIRD PARTY N SICK PAY 20. LOCALITY NAME ernal Revenue Service AX WITHHELD AX WITHHELD
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