

| Copy B - To Be Filed With Employee's<br>FEDERAL Tax Return.                                                                                   |                                        | OMB No. 1545-0008                        |                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|------------------------------------------|-----------------------------------|
| a Employee's soc. sec. no.<br>134-79-0050                                                                                                     | 1 Wages, tips, other comp.<br>11060.70 | 2 Federal income tax withheld<br>1419.12 |                                   |
| b Employer ID number (EIN)<br>39-0273710                                                                                                      | 3 Social security wages<br>11395.32    | 4 Social security tax withheld<br>706.51 |                                   |
| c Employer's name, address, and ZIP code<br>American Family Mutual Insurance Company, S.I.<br>6000 American Parkway<br>Madison, WI 53783-0001 |                                        | 5 Medicare wages and tips<br>11395.32    | 6 Medicare tax withheld<br>165.23 |
| d Control number                                                                                                                              |                                        |                                          |                                   |
| e Employee's name, address, and ZIP code<br>Prudhvi Chode<br>1320 Okeeffe Ave<br>208<br>Sun Prairie, WI 53590                                 |                                        |                                          |                                   |
| 7 Social security tips                                                                                                                        | 8 Allocated tips                       | 9                                        |                                   |
| 10 Dependent care benefits                                                                                                                    | 11 Nonqualified plans                  | 12a Code See inst. for box 12<br>C 18.32 |                                   |
| 13 Statutory employee<br>Retirement plan<br>X                                                                                                 | 14 Other                               | 12b Code<br>D 334.62                     |                                   |
| Third-party sick pay                                                                                                                          |                                        | 12c Code<br>DD 1245.56                   |                                   |
| WI 036-0000572635-01                                                                                                                          | 11060.70                               | 641.17                                   |                                   |
| 15 State Employer's state ID number                                                                                                           | 16 State wages, tips, etc.             | 17 State income tax                      |                                   |
| 18 Local wages, tips, etc.                                                                                                                    | 19 Local income tax                    | 20 Locality name                         |                                   |

Form W-2 Wage and Tax Statement 2020 Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service

| Copy 2 - To Be Filed With Employee's State,<br>City, or Local Income Tax Return                                                               |                                        | OMB No. 1545-0008                        |                                   |
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| a Employee's soc. sec. no.<br>134-79-0050                                                                                                     | 1 Wages, tips, other comp.<br>11060.70 | 2 Federal income tax withheld<br>1419.12 |                                   |
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| d Control number                                                                                                                              |                                        |                                          |                                   |
| e Employee's name, address, and ZIP code<br>Prudhvi Chode<br>1320 Okeeffe Ave<br>208<br>Sun Prairie, WI 53590                                 |                                        |                                          |                                   |
| 7 Social security tips                                                                                                                        | 8 Allocated tips                       | 9                                        |                                   |
| 10 Dependent care benefits                                                                                                                    | 11 Nonqualified plans                  | 12a Code<br>C 18.32                      |                                   |
| 13 Statutory employee<br>Retirement plan<br>X                                                                                                 | 14 Other                               | 12b Code<br>D 334.62                     |                                   |
| Third-party sick pay                                                                                                                          |                                        | 12c Code<br>DD 1245.56                   |                                   |
| WI 036-0000572635-01                                                                                                                          | 11060.70                               | 641.17                                   |                                   |
| 15 State Employer's state ID number                                                                                                           | 16 State wages, tips, etc.             | 17 State income tax                      |                                   |
| 18 Local wages, tips, etc.                                                                                                                    | 19 Local income tax                    | 20 Locality name                         |                                   |

Form W-2 Wage and Tax Statement 2020 Dept. of the Treasury - IR

| Copy C - For EMPLOYEE'S RECORDS (See<br>Notice to Employee on the back of Copy B)                                                             |                                        | OMB No. 1545-0008                        |                                   |
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| 7 Social security tips                                                                                                                        | 8 Allocated tips                       | 9                                        |                                   |
| 10 Dependent care benefits                                                                                                                    | 11 Nonqualified plans                  | 12a Code See inst. for box 12<br>C 18.32 |                                   |
| 13 Statutory employee<br>Retirement plan<br>X                                                                                                 | 14 Other                               | 12b Code<br>D 334.62                     |                                   |
| Third-party sick pay                                                                                                                          |                                        | 12c Code<br>DD 1245.56                   |                                   |
| WI 036-0000572635-01                                                                                                                          | 11060.70                               | 641.17                                   |                                   |
| 15 State Employer's state ID number                                                                                                           | 16 State wages, tips, etc.             | 17 State income tax                      |                                   |
| 18 Local wages, tips, etc.                                                                                                                    | 19 Local income tax                    | 20 Locality name                         |                                   |

Form W-2 Wage and Tax Statement 2020 Dept. of the Treasury - IRS  
This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

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| 10 Dependent care benefits                                                                                                                    | 11 Nonqualified plans                  | 12a Code<br>C 18.32                      |                                   |
| 13 Statutory employee<br>Retirement plan<br>X                                                                                                 | 14 Other                               | 12b Code<br>D 334.62                     |                                   |
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| WI 036-0000572635-01                                                                                                                          | 11060.70                               | 641.17                                   |                                   |
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