



Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 01-15-2022
 Response Date: 01-15-2022
 Tracking Number: 101501271589

Wage and Income Transcript

SSN Provided: XXX-XX-2043
 Tax Period Requested: December, 2019

Form W-2 Wage and Tax Statement

Employer:
 Employer Identification Number (EIN):XXXXX7090
 ARIC
 3979 F

Employee:
 Employee's Social Security Number:XXX-XX-2043
 PRAD K GURR
 37 ROY

Submission Type:.....Amended document
 Wages, Tips and Other Compensation:.....\$0.00
 Federal Income Tax Withheld:.....\$0.00
 Social Security Wages:.....\$0.00
 Social Security Tax Withheld:.....\$0.00
 Medicare Wages and Tips:.....\$0.00
 Medicare Tax Withheld:.....\$0.00
 Social Security Tips:.....\$0.00
 Allocated Tips:.....\$0.00
 Dependent Care Benefits:.....\$0.00
 Deferred Compensation:.....\$0.00
 Code "Q" Nontaxable Combat Pay:.....\$0.00
 Code "W" Employer Contributions to a Health Savings Account:.....\$0.00
 Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation
 plan:.....\$0.00
 Code "Z" Income under section 409A on a nonqualified Deferred Compensation
 plan:.....\$0.00
 Code "R" Employer's Contribution to MSA:.....\$0.00
 Code "S" Employer's Contribution to Simple Account:.....\$0.00
 Code "T" Expenses Incurred for Qualified Adoptions:.....\$0.00
 Code "V" Income from exercise of non-statutory stock options:.....\$0.00
 Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....\$0.00
 Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....\$0.00
 Code "DD" Cost of Employer-Sponsored Health Coverage:.....\$0.00
 Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b)
 Plan:.....\$0.00
 Code "FF" Permitted benefits under a qualified small employer health
 reimbursement arrangement:.....\$0.00
 Code "GG" Income from Qualified Equity Grants Under Section 83(i):.....\$0.00
 Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close
 of the Calendar Year:.....\$0.00
 Third Party Sick Pay Indicator:.....Unanswered
 Retirement Plan Indicator:.....No Correction
 Statutory Employee:.....No Correction
 W2 Submission Type:.....Corrected
 W2 WHC SSN Validation Code:.....Correct SSN

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