2021 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement Copy C for employee's records.

Dept.

003675 LOS2/V6W 712591

Employer use only 1828

Employer's name, address, and ZIP code SG GAMING INC 6601 S BERMUDA RD LAS VEGAS NV 89119

Batch #03459

e/f Employee's name, address, and ZIP code

SUDHAKAR SELVAM 2742 CANARSY CT HENDERSON NV 89052

b	Employer's FED ID number 88-0276064	r a Employee's SSA number XXX-XX-6714
1	Wages, tips, other comp.	2 Federal income tax withheld
	84972.61	5250.41
3	Social security wages	4 Social security tax withheld
	90703.61	5623.62
5	Medicare wages and tips	6 Medicare tax withheld
	90703.61	1315.20
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12
	011	12b D 5731.00
14	Other	12c W 999.96
		12d DD 9870.64
		13 Stat emp. Ret. plan 3rd party sick par
	State Employer's state ID	no. 16 State wages, tips, etc.
17	State income tax	18 Local wages, tips, etc.
19	Local income tax	20 Locality name

other comp. 84972.61

90703.61

Employer's name, address, and ZIP code

6601 S BERMUDA RD LAS VEGAS NV 89119

SG GAMING INC

Dept.

Social security wages 90703.61

Medicare wages and tips

003675 LOS2/V6W 712591

d Control number

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	NV. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	95,515.43	95,515.43	95,515.43	
Plus GTL (C-Box 12)	140.40	140.40	140.40	
Less 401(k) (D-Box 12)	5,731.00	N/A	N/A	
Less Other Cafe 125	4,452.24	4,452.24	4,452.24	
Less Cafe 125 HSA (W-Box 12)	499.98	499.98	499.98	
Reported W-2 Wages	84,972.61	90,703.61	90,703.61	

2. Employee Name and Address.

SUDHAKAR SELVAM 2742 CANARSY CT **HENDERSON NV 89052**

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eld .62	3	Social securit
.20	5	Medicare wag

5250

5623

1315

1828

Employer use only

Social security tax withh

6 Medicare tax withheld

Corp.

a Employee's SSA number XXX-XX-6714

13 Stat emp. Ret. plan 3rd party sick pay

8 Allocated tips

Employer's name, addres

1	Wages, tips, other 6 849	72.61	2 Feder	al income	tax withheld 5250 . 41
3	Social security was	_{jes} 03.61	4 Socia	security	tax withheld 5623.62
5	Medicare wages an 907	d tips 03.61	6 Medic	are tax wi	thheld 1315.20
d	Control number	Dept.	Corp.	Emplo	yer use only
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^	Employeesta nama		- J 7ID	l-	

SG	GAI	IING	INC		
6601	S	BER	MUD	Α	RD
LAS	VE	GAS	NV	89	119
	-				

b	Employer's FED ID number 88-0276064	a I	mployee XX	's SSA number X-XX-6714
7	Social security tips	8 /	Allocated	tips
9		10 [Dependen	t care benefits
11	Nonqualified plans	12a	C ₁	140,40
14	Other	12b	Di	5731.00
		12c	Wi	999.96
		12d	DD	9870.64

2 Federal income tax withheld

4 Social security tax withheld

13 Stat emp. Ret. plan 3rd party sick pay

6 Medicare tax

Corp.

5250.41

5623.62

1315.20

1828

withheld

Employer use only

10 Dependen	t care benefits
12a C	140.40
^{12b} D	5731.00
12c W	999.96
12d DD	9870.64
	12a C 12b D

e/f Employee's name, address and ZIP code

SUDHAKAR SELVAM 2742 CANARSY CT **HENDERSON NV 89052**

Employer's FED ID number

88-0276064 Social security tips

15 State NV	Employer's state ID no.	16 State wages, tips, etc.
17 State	income tax	18 Local wages, tips, etc.
19 Local	l income tax	20 Locality name

NV.State Reference Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.

e/f Employee's name, address and ZIP code

SUDHAKAR SELVAM 2742 CANARSY CT **HENDERSON NV 89052**

Wages, tips, other comp.

3 Social security wages 90703.61

d Control number

Medicare wages and tips 90703.61

003675 LOS2/V6W 712591

84972.61

Employer's name, address, and ZIP code

6601 S BERMUDA RD LAS VEGAS NV 89119

SG GAMING INC

Dept.

15 State Employer's state ID NV	no. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

NV.State Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.

Employer's FED ID numbe 88-0276064	r a Employee's SSA number XXX-XX-6714
7 Social security tips	8 Allocated tips
)	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C 140.40
14 Other	^{12b} D 5731.00
	12c W 999.96
	12d DD 9870.64
	13 Stat emp. Ret. plan 3rd party sick p
e/f Employee's name, address	s and ZIP code
SUDHAKAR SELVA 2742 CANARSY CT HENDERSON NV 8	
15 State Employer's state ID	no. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
	20 Locality name

Statement

Copy B to be filed with employee's Federal Income Tax Return.