*** IMPORTANT! *** Please do not return signed tax form to the Lottery. Please keep for your records.

| | | RECTED (If checked) | | OMB No. 1545-0238 | |
|--|---|--|-------------------------------|---|--|
| PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code STATE OF NEW JERSEY LOTTERY COMMISSION P O BOX 041 TRENTON, NJ 08625-0041 | | 1 Reportable winnings \$ 1,000.00 | 2 Date won | Form W-2G | |
| | | 3 Type of wager NJ Lottery | 4 Federal Income tax withheld | Certain Gambling Winnings (Rev. January 2021) | |
| | | 5 Transaction # RECORDS 1 | 6 Race | | |
| PAYER'S federal identification number 22-2133485 | PAYER'S telephone number (609) 599-5910 | 7 Winnings from identical wagers \$ | 8 Cashier | For calendar year 2021 | |
| WINNER's name, address (including apt. no.), and ZIP or foreign postal code EASHWAR DIDIGAM APT 2B 20 GILL LANE ISELIN, NJ 08830 | | 9 Winner's taxpayer indentification no. 376-65-7376 | 10 Window | This is Important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or othe sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. | |
| | | 11 First identification 01-2408362 | 12 Second identification | | |
| | | 13 State/Payer's state identification no. NJ 221917062010 | 14 State winnings | | |
| Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments. Signature > Date > | | 15 State income tax withheld \$ | 16 Local winnings | | |
| | | 17 Local income tax withheld | 18 Name of locality | Copy C For Winner's Records | |
| orm W-2G (Rev. 1-2021) | Manay 20 apr. //5 apr. | 1400 | Department of the Tre | asury - Internal Revenue Service | |

*** IMPORTANTI *** Please do not return signed tax form to the Lottery. Please keep for your records.

www.irs.gov/FormW2G

| | COR | RECTED (if checked) | | OMD No. 4545 0000 | |
|--|--|---|-------------------------------------|--|--|
| PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code STATE OF NEW JERSEY LOTTERY COMMISSION P O BOX 041 TRENTON, NJ 08625-0041 | | 1 Reportable winnings \$ 1.000.00 | 2 Date won | OMB No. 1545-0238 Form W-2G | |
| | | 3 Type of wager NJ Lottery | 4 Federal Income tax withheld \$ | Certain Gambling Winnings (Rev. January 2021) | |
| | | 5 Transaction # RECORDS 1 | 6 Race | | |
| PAYER'S federal identification number 22-2133485 | PAYER'S telephone number (609) 599-5910 | 7 Winnings from identical wagers \$ | 8 Cashier | For calendar year 2021 This is important tax | |
| WINNER's name, address (including apt. no.), and ZIP or foreign postal code EASHWAR DIDIGAM APT 2B 20 GILL LANE ISELIN, NJ 08830 | | 9 Winner's taxpayer indentification no. 376-65-7376 | 10 Window | information and is being furnished to the Internal Revenue Service | |
| | | 11 First identification 01-2408362 | 12 Second identification | Copy E | |
| | | 13 State/Payer's state identification no. NJ 221917062010 | 14 State winnings \$ | on your federal tax return. If this form shows federal | |
| Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments. Signature > Date > | | 15 State income tax withheld \$ | 16 Local winnings | income ta withheld in box attach this cop | |
| | | 17 Local income tax withheld \$ | 18 Name of locality | to your return. | |

Form W-2G (Rev. 1-2021)

www.irs.gov/FormW2G

Department of the Treasury - Internal Revenue Service

*** IMPORTANT! *** Please do not return signed tax form to the Lottery. Please keep for your records.

| PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code STATE OF NEW JERSEY LOTTERY COMMISSION P O BOX 041 TRENTON, NJ 08625-0041 | | 1 Reportable winnings | 2 Date won | OMB No. 1545-0234 Form W-2G Certain Gambling Winnings (Rev. January 2021) | |
|--|--|---|-------------------------------|--|--|
| | | \$ 1,000.00 3 Type of wager NJ Lottery | 4 Federal Income tax withheld | | |
| | | 5 Transaction # RECORDS 1 | 6 Race | | |
| PAYER'S federal identification number 22-2133485 | PAYER'S telephone number (609) 599-5910 | 7 Winnings from identical wagers \$ | 8 Cashier | For calendar year 2021 | |
| WINNER's name, address (including apt. no.), and ZIP or foreign postal code EASHWAR DIDIGAM APT 2B 20 GILL LANE ISELIN, NJ 08830 | | 9 Winner's taxpayer indentification no. 376-65-7376 | 10 Window | Copy 2 Attach this copy to your state, city, or local income tax return, if required. | |
| | | 11 First identification 01-2408362 | 12 Second identification | | |
| | | 13 State/Payer's state identification no. NJ 221917062010 | 14 State winnings \$ | | |
| Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments. Signature > Date > | | 15 State income tax withheld \$ | 16 Local winnings | | |
| | | 17 Local income tax withheld | 18 Name of locality | required. | |

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