							1000000						
D. CONTROL NUMBER		This information is bein internal Revenue Serv		OMB NO. 1545 - 0008		10-20-			72.32	2 FEDERAL INCOME TAX WITH-ISLD 23568.62			
B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S S. XXX-XX					ocial security number -6659		3. SOCIAL SECURITY WAGES		134889.62		CURITY TAX WITHHELD	8363.16	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE ANCHOR GLASS CONTAINER CORPORATION							5. MEDICARE WAGES AND TIPS 134889.62			6. MEDICARE TAX WITHHELD 1955.90			
SUITE 300 3001 N ROCKY POINT DRI							AL SECURITY TIPS			8. ALLOCATED	TIPS		
TAMPA, FL 33607							9.				10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. ARJUN ATLEENT							11. NONQUALIFIED PLANS				12 a-d See instructions for box 12 D 7917.30		
3268 TUCSON WIND PLACE ODESSA, FL 33556							14. OTHER				W C	3140.00 459.60	
ODESSA, EL SSSSS]		DD Retirement	17697.56	
F. EMPLOYEE	S ADDRESS AND ZIP C		16. STATE WAGES, TIPS, E	C. 17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC. 19. LOCAL			LOCAL INCOME TA	13. Statutory Employee	20. LOCALITY NAME	X Third-Party Sick Pay	
											÷ 1-1/	- Devise Passino	
Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return FORM W-2 Wage and Tax Statement Dept. of the Treasury - Internal Revenue Service FOLD AND TEAR-ALONG PERFORATION													
CIMITY - ITAGO AND TAX CARDINOTO											2. FEDERAL INCOME TAX WITHHELD		
D. CONTROL	NUMBER	This information is being furnished to the Internal Revenue Service		OMB NO. 1545 - 0008			ES, TIPS, OTHER COMPENSATION		126972.32		23568.62 4. SOCIAL SECURITY TAX WITHHELD		
59-3	RIDENTIFICATION NU 417812		XXX-XX		ocial security number -6659		AL SECURITY WAGES	134889.62				8363.16	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE ANCHOR GLASS CONTAINER CORPORATION							s. MEDICARE WAGES AND TIPS 134889.62			6. MEDICARE TAX WITHHELD 1955.90			
SUITE 300 3001 N ROCKY POINT DRI							AL SECURITY TIPS			8. ALLOCATE			
TAMPA, FL 33607											10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. ARJUN AILEENI							11. NONQUALIFIED PLANS				12. a-d See Instructions for box 12 D 7917.30		
3268 TUCSON WIND PLACE ODESSA, FL 33556							14. OTHER				W C	3140.00 459.60	
22233, 22 3333										13. Statutory	DD Retirement	17697.56 Third-Party	
F. EMPLOYEE	S ADDRESS AND ZIP		16. STATE WAGES, TIPS, E	тс.	C. 17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC. 19.		LOCAL INCOME TO	Employee	20. LOCALITY NAME	Sick Pay .	
										Dank afab	- Transum: Inter	nal Revenue Service	
Copy 2 To FORM W	be filed with Em	ployee's STATE, and Tax S	CITY or LOCAL tax tatement	return	202	2				•	G PERFORATION		
	_		W 2 2 A						OLO AND TE		a r Era oroxnor		
D. CONTROL NUMBER		This information is be Internal Revenue Se	2010 - Carlotte Addition Co. (1990)	OMB NO. 1545 - 0008		1. WAG	1. WAGES, TIPS, OTHER COMPENSATION 126972.32			2 FEDERAL INCOME TAX WITHHELD 23568.62			
	ERIDENTIFICATION N	JMBER (EIN)	IBER (EIN) A. EMPLOYEE'S XXX-XX		ocial security number -6659		IAL SECURITY WAGES	1348	889.62	4. SOCIAL SI	ECURITY TAX WITHHELD	8363.16	
C. EMPLOYERS NAME, ADDRESS, AND ZIP CODE ANCHOR GLASS CONTAINER CORPORATION							ICARE WAGES AND TIPS	134	889.62	6. MEDICAR	E TAX WITHHELD	1955.90	
SUITE 300 3001 N ROCKY POINT DRI							7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS			
TAMPA, FL 33607						9. 100 - 1				10. DEPENDENT CARE BENEFITS			
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.							11. NONQUALIFIED PLANS				12 a-d See instructions for box 12		
ARJUN AILEENI 3268 TUCSON WIND PLACE							14. OTHER				D 7917.30 W 3140.00		
ODESSA, FL 33556											C DD	459.60 17697.56	
F. EMPLOYEE'S ADDRESS AND ZIP CODE										13. Statutory Employee	Retirement Plan	X Third-Party Sick Pay	
15. STATE EMPLOYER'S STA			18. STATE WAGES, TIPS,	ETC.	17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ET	FC. 1	9. LOCAL INCOME 1	AX	20. LOCALITY NAME		
Copy B To be filed with Employee's FEDERAL tax return Dept. of the Treasury - Internal Revenue												nal Revenue Servic	
FORM W	/-2 Wage	and Tax S	Statement			_							

FOLD AND TEAR ALONG PERFORATION

Visit www.irs.gov/efile for e-file details.

© CERIDIAN

W-2 AND WAGE SUMMARY