

878



վարտարդութիւթիկարերությանություն

Form I U Department of	the Treasury		v/Form1042	S. Source Inco	ne latest	tinformation	1.	ENDEI	_	(MENT N	0.		Cop:		
	2 Gross income	3 Chapter indicator, E				13e Recipient's U.S. TIN, if any				-		13f Ch.3	tatus code			16
code		2a Everyption and 00 As Everyption code 15				***-**-5622						13g Ch.4 status code				23
15	\$40,107.00	3b Tax rate	30.00		00.00	13h Recipient's GIIN					oreign tax identification		1	13j LOB 0	ode	
5 Withholding allowance										number	r, if any					
	allowance															
Net income a Federal tax	withhold			\$12.032	00	13k Recipie	nt's acco	ount nu	mber							
					-						762	338500	2395			
		not deposited with the see instructions)				13I Recipier	t's date	of birth	(YYYYM	MDD)			7.0			
	and the second		Page 10 AM							0	0	8	2	6	1	
c Check if wi		subsequent year with re	espect to a			1	1	9	9	U	U	0		0		
		The same of the sa	nde vener	90	0.00	14a Primary	Withhol	ding A	gent's Na	me (if appl	icable)		A 44 441	-1-1-50	22500	
	d by other agents	t pursuant to adjustme	nt procedure	-												
Overman				(\$0.	.00)	14b Primary	Withhol	Iding A	gent's Eif	1						
10 Total withholding credit (combine boxes 7a, 8, and 9)						+					15 Check if pro-rata basis reporting					
\$12,032.00						15a Intermediary or flow-through entity's EIN, if any 15b Ch.3 status code						ode 15	c Ch.4 statu	is cod		
Tay a aid by	withholding agent (an	nounts not withheld)(se	e instruction	(2												
1 Tax paid by	Withfolding agent (an	tourns not warners have	o monocuo.			15d Interme	diary or	flow-th	rough en	tity's name)					
2- Withholdin	ng agent's EIN	1 12h Ct	n.3 status co	de 12c Ch.4 status c	ode	100										
za widiiololii	84-1455663 15 01									er i cur						
A Miller II Lalia	g agent's name			Second Co. Second Co.		15e Interme		now-t				ification nu	mber, if an	y		No.
	R TRUST COMPANY I	TC														
1454-1-1-6-	a acceria Clobal Inter	mediary Identification N	Number (GIII)	0		15h Addres	s (numb	er and	street)							
e Willinoldin	ig agent s Global inter	nedially radiimedeally														
M.C	do 1120	Foreign tax identification	on number, i	fany		15i City or t	own, sta	te or p	rovince, c	ountry, ZIF	or foreig	n postal c	ode			
d Country co	129	oreign ax identification														
					(6.11.20)	16a Payer's	name					1576.4	16b	Payer's 1	IIN	
12h Address (number and street) PO BOX 173764 D999																
		-t-: 7(D or foreign p	oetal coda			16c Payer's	GIIN					16d Ch. 3	status code	0 16	e Ch. 4 statu	s code
		ountry, ZIP or foreign p	ostai code			,.,						(inertial to			o ore 4 state	3 000
	OO 80217-3764		Lant Dec	iniente countri codo		17a State ii	ocome to	av with	hold		17h Pave	r's state tax	100	1170	Name of sta	to
13b Recipient's name 13b Recipient's country code NAGAPANDURANGAP THIRUNAHARI IN						The Cart				600238817			NC NC	163		
				111												
	number and street)															
	ESIDE VIEW CT															
3d City or tov	wn, state or province,	country, ZIP or foreign	postal code													
CARY NO	27513-8480					100										

(keep for your records)

Form 1042-S (2022