

CASH OTHER CORRECTED

OMB No. 1545-0238

2023
Form W2-G
Certain
Gambling
Winnings

PAYER'S name, street address, city or town, province or state, country, ZIP or foreign postal code		1 Gross winnings \$ 1,380.00	2 Date won 06 19 23
TRIBAL CASINO GAMING ENT DBA HARRAH'S CHEROKEE SMOKEY MOUNTA 777 CASINO DRIVE CHEROKEE, NC 28719		3 Type of wager 09 SL	4 Federal Income Tax withheld \$.00
		5 Transaction 1576	6 Race N/A
		7 Winnings from identical wagers N/A	8 Cashier
Federal identification number 56-1972062	Telephone number (828) 497-7777	9 Winner's taxpayer identification no. 791-12-4417	10 Window MAIN CAGE
WINNER'S name 4591923 RAJAVARDHAN SOMA		11 First I.D. 791124417	12 Second I.D. 000047252972
Street address (including apt. no.) 7424 WHITE ELM LN		13 State/Payer's state identification no. 600043602	14 State Winnings \$.00
City or town, province or state, country, and ZIP or foreign postal code CHARLOTTE, NC 282730070		15 State income tax withheld \$.00	16 Local winnings \$.00
		15 Local income tax withheld \$.00	18 Name of locality

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 other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Copy C
For Winner's
Records

Ctl 3340917 Slip 0000000 Time Sec/Loc P 0103 JP Seq J25829
DOB 6-15-89 DL Exp 02/25 Cash 1,380.00 Chk/Other .00

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 portion of these payments.

Signature

Date

CASH OTHER

CORRECTED

OMB No. 1545-0238

PAYER'S name, street address, city or town, province or state, country, ZIP or foreign postal code

TRIBAL CASINO GAMING ENT
DBA HARRAH'S CHEROKEE SMOKEY MOUNTA
777 CASINO DRIVE
CHEROKEE, NC 28719

Federal identification number
56-1972062

Telephone number
(828) 497-7777

WINNER'S name

4591923
RAJAVARDHAN SOMA

Street address (including apt. no.)

7424 WHITE ELM LN

City or town, province or state, country, and ZIP or foreign postal code

CHARLOTTE, NC 282730070

1 Gross winnings \$ 1,260.00	2 Date won 06 19 23
3 Type of wager 09 SL .01	4 Federal Income Tax withheld \$.00
5 Transaction 01577	6 Race N/A
7 Winnings from identical wagers N/A	8 Cashier
9 Winner's taxpayer identification no. 791-12-4417	10 Window 7229
11 First I.D. 791124417	12 Second I.D. 000047252972
13 State/Payer's state identification no. 600043602	14 State Winnings \$.00
15 State income tax withheld \$.00	16 Local winnings \$.00
17 Local income tax withheld \$.00	18 Name of locality

2023
Form W2-G

Certain Gambling Winnings

Copy B
Report this income on your federal tax return. If this form shows federal income tax withheld in box 4 attach this copy to your return

Ctl 3340919 Slip 3708574 Time 9:03:59 Sec/Loc P0104 JP Seq J25831
DOB 6-15-89 DL Exp 02/25 Cash 1,260.00 Chk Other .00

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 portion of these payments.

Signature

Date

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