1					F	ederal Box	1 So	c. Sec. Box 3 & 7	Medicare Box 5	
		which shows your total wages	Gross Wages		61515.2	22	61515.22	61515.22		
W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total wages to arrive at your W-2 wages.  General instructions for these forms, including an explanation				Txbl Benefits Group Term Life		71.7	77	71.72	71.72	
				Adoption		/1	2	71.72	71.72	
of the		box 12, are available on a	Deferred Comp Section 125	(4137.80)		(4127.90)	(4127.80)			
sepan	ate document.			Other Pretax/Wa	ge Limit	(4137.0	u)	(4137.80)	(4137.80)	
				W-2 Wages		57449.	14	57449.14	57449.14	
	e's social security number X-9026	b Employer identification number (EIN 04-2437166	N)	d Control number 000819662601					OMB	N= 4545.000
	's name, address, and ZIP co			000013002001	1 Wages, tips, oth	her compen	sation	2 Federal incon		No. 1545-000
	ATA Americas, Inc				3 Social security		57449.14	4 Social securit	u tov withhold	5456.91
Suite				3 Social security	wayes	57449.14	4 Social Securit	y tax withheld	3561.85	
Plano	TX 75024				5 Medicare wages	s and tips		6 Medicare tax	withheld	000.01
	s first name and initial	Last name	Su	ff.	7 Social security	tips	57449.14	8 Allocated tips		833.01
	Sienna Springs BLVD	Bele								
	DURI CITY TX 77459				9			10 Dependent of	are benefits	
USA					11 Nonqualified p	lans			ctions for box 12	71 72
	's address and ZIP code	I 40 04-4 454-	47 64-4- :	ncome tax	40 Statutory	Retirement	Third-party	Code C		71.72
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State I	ncome tax	13 Statutory employee	plan	sick Pay	Code W		2600.00
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	hy name	44.00			Code DD		9897.40
			20 Locaiii		14 Other			12d Code	ı	
	Wage and Tax Statemen r EMPLOYEE'S RECORDS	t		2023	This	information is		epartment of the T to the Internal Revenue	,	
					neglige	ence penalty o	r other sanction	may be imposed on you	if this income is taxable	and you fail to repo
a Employee	e's social security number	b Employer identification number (EIN	N)	d Control number						
	X-9026	04-2437166		000819662601	4 10/2 4 44		4:	2 Fodorelinos		No. 1545-000
	's name, address, and ZIP co	de			1 Wages, tips, oth	ner compen	57449.14	2 Federal incon	ie tax withheid	5456.91
	ATA Americas, Inc Legacy Dr				3 Social security	wages	F7440 14	4 Social securit	y tax withheld	2561.05
	TX 75024				5 Medicare wages	s and tips	57449.14	6 Medicare tax	withheld	3561.85
e Employee	e's first name and initial	Last name	Su	ff.			57449.14			833.01
Prade	ер М	Bele	-		7 Social security	tips		8 Allocated tips		
Appt.	Sienna Springs BLVD 1524 DURI CITY TX 77459									
USA	JORI CITT TX 77439				9			10 Dependent o	are benefits	
f Employee						lans				
	's address and ZIP code				11 Nonqualified p			12a See instru Code C	are benefits	71.72
15 State	's address and ZIP code Employer's state ID Number	16 State wages, tips, etc.	17 State i	ncome tax	11 Nonqualified p	Retirement	Third-party sick Pay	12a See instru		71.72
15 State		16 State wages, tips, etc.	17 State i	ncome tax	11 Nonqualified p	Retirement	Third-party sick Pay	12a See instru Code C 12b Code W 12c		2600.00
		16 State wages, tips, etc.  19 Local income tax	17 State i		11 Nonqualified p	Retirement	Third-party sick Pay	12a See instru Code C  12b Code W  12c Code DD  12d		2600.00
	Employer's state ID Number				11 Nonqualified p	Retirement	Third-party sick Pay	12a See instru Code C 12b Code W 12c Code DD		
18 Local wa	Employer's state ID Number	19 Local income tax		ty name	11 Nonqualified p	Retirement	sick Pay	12a See instru Code C  12b Code W  12c Code DD  12d	ctions for box 12	2600.00 9897.40
18 Local wa	Employer's state ID Number	19 Local income tax			11 Nonqualified p	Retirement	sick Pay	12a See instru Code C  12b Code W 12c Code DD 12d Code	ctions for box 12	2600.00 9897.40
18 Local wa Form W-2 Copy B—To	Employer's state ID Number  ges, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE	19 Local income tax  t DERAL Tax Return.	20 Localii	2023	11 Nonqualified p	Retirement	sick Pay	12a See instru Code C  12b Code W 12c Code DD 12d Code	ctions for box 12	2600.00 9897.40
18 Local wa	Employer's state ID Number	19 Local income tax	20 Localii	ty name	11 Nonqualified p	Retirement	sick Pay	12a See instru Code C  12b Code W 12c Code DD 12d Code	ctions for box 12	2600.00 9897.40
18 Local wa Form W-2 Copy B—To a Employer XXX-X	Employer's state ID Number  ages, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE	19 Local income tax  It DERAL Tax Return.  b Employer identification number (EIN 04-2437166	20 Localii	2023	11 Nonqualified p	Retirement plan	sick Pay D	12a See instru Code C  12b Code W 12c Code DD 12d Code	ctions for box 12	2600.00 9897.40 Revenue Sen No. 1545-000
18 Local was Form W-2 Copy B—To a Employer XXX-X c Employer	Employer's state ID Number ages, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE e's social security number X-9026 's name, address, and ZIP co	19 Local income tax  It DERAL Tax Return.  b Employer identification number (EIN 04-2437166	20 Localii	2023	11 Nonqualified p  13 Statutory employee   14 Other	Retirement plan	sick Pay	12a See instru Code C  12b Code W  12c Code DD  12d Code epartment of the T	ctions for box 12	2600.00 9897.40 Revenue Sen
18 Local wa Form W-2 Copy B—To a Employer XXX-X c Employer NTT D 7950 Suite	Employer's state ID Number  ages, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE e's social security number X-9026 's name, address, and ZIP co ATA Americas, Inc Legacy Dr 1100	19 Local income tax  It DERAL Tax Return.  b Employer identification number (EIN 04-2437166	20 Localii	2023	11 Nonqualified p  13 Statutory employee  14 Other  1 Wages, tips, ott  3 Social security	Retirement plan	sick Pay D	12a See instru Code C  12b Code W  12c Code DD  12d Code Epartment of the T	ctions for box 12	2600.00 9897.40 Revenue Sen No. 1545-000
18 Local wa Form W-2 Copy B—To a Employer XXX-X c Employer NTT D 7950 Suite	Employer's state ID Number  ages, tips, etc.  Wage and Tax Statemer Be Filed With Employee's FE  e's social security number  X-9026 's name, address, and ZIP co	19 Local income tax  It DERAL Tax Return.  b Employer identification number (EIN 04-2437166	20 Localii	2023	11 Nonqualified p  13 Statutory employee  14 Other  1 Wages, tips, oth	Retirement plan	sation 57449.14	12a See instru Code C  12b Code W  12c Code DD  12d Code Epartment of the T	ctions for box 12	2600.00 9897.40 Revenue Sen No. 1545-000 5456.91 3561.85
a Employer XXX-X c Employer Plano e Employee	Employer's state ID Number ages, tips, etc.  Wage and Tax Statemer Be Filed With Employee's FE e's social security number X-9026 's name, address, and ZIP co ATA Americas, Inc Legacy Dr 1100 TX 75024	to the property of the propert	20 Localii	2023 d Control number 000819662601	11 Nonqualified p  13 Statutory employee  14 Other  1 Wages, tips, ott  3 Social security	Retirement plan	D sation 57449.14	12a See instru Code C  12b Code W  12c Code DD  12d Code  12d Code  2 Federal incon 4 Social security	ctions for box 12  I  I  Creasury - Internal  OMB  te tax withheld  y tax withheld	2600.00 9897.40 Revenue Sen No. 1545-000 5456.91
Form W-2 Copy B—To  a Employee XXX-X c Employer Plano e Employee Pradee 85852	Employer's state ID Number  ages, tips, etc.  Wage and Tax Statemen Be Filed With Employee's FE e's social security number X-9026 's name, address, and ZIP co ATA Americas, Inc Legacy Dr 1100 TX 75024 e's first name and initial Ep M Sienna Springs BLVD	to DERAL Tax Return.  b Employer identification number (EIN 04-2437166)	20 Localin	2023 d Control number 000819662601	11 Nonqualified p  13 Statutory employee   14 Other  1 Wages, tips, ott  3 Social security  5 Medicare wages  7 Social security	Retirement plan	sation 57449.14	12a See instru Code C  12b Code W  12c Code DD  12d Code  epartment of the T  2 Federal incon  4 Social securit  6 Medicare tax	ctions for box 12	2600.00 9897.40 Revenue Sen No. 1545-000 5456.91 3561.85
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a Employer XXX-X c Employer Plano e Employee Pradee 8585 Appt. MISSO USA	Employer's state ID Number  ges, tips, etc.  Wage and Tax Statemer Be Filed With Employee's FE  e's social security number  X-9026  's name, address, and ZIP co  ATA Americas, Inc  Legacy Dr  1100  TX 75024  e's first name and initial  ep M  Sienna Springs BLVD  1524  DURI CITY TX 77459	to the property of the propert	20 Localin	2023 d Control number 000819662601	11 Nonqualified p  13 Statutory employee   14 Other  1 Wages, tips, ott  3 Social security  5 Medicare wages  7 Social security	Retirement plan	sation 57449.14	12a See instru Code C  12b Code W  12c Code DD  12d Code  2 Federal incon 4 Social securit 6 Medicare tax 8 Allocated tips  10 Dependent c	ctions for box 12	2600.00 9897.40 Revenue Sen No. 1545-000 5456.91 3561.85 833.01
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