

To the right is an explanation of the contents of the wage boxes on your W-2. Please note that the Gross amount shown may include adjustments.				Federal Box 1	Soc. Sec. Box 3 & 7	Medicare Box 5	
				Gross Wages	224649.89	224649.89	224649.89
				Txbl Benefits	775.53	775.53	775.53
				Group Term Life	240.43	240.43	240.43
				Adoption			
				Deferred Comp	(12718.53)		
				Section 125	(3338.70)	(3338.70)	(3338.70)
				Other Pretax/Wage Limit		(89427.15)	
				W-2 Wages	209608.62	132900.00	222327.15
D. CONTROL NUMBER 001154851001	This Information is being furnished to the Internal Revenue Service	2019	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 209608.62	2. FEDERAL INCOME TAX WITHHELD 28944.92		
B. EMPLOYER IDENTIFICATION NUMBER 13-3133497	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 851-65-2248			3. SOCIAL SECURITY WAGES 132900.00	4. SOCIAL SECURITY TAX WITHHELD 8239.80		
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE American Express Travel Related Services Company, Inc. MC 24-02-11 2401 W Behrend Dr. Suite 55 Phoenix AZ 85027				5. MEDICARE WAGES AND TIPS 222327.15	6. MEDICARE TAX WITHHELD 3424.69		
				7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS		
				9.	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL ASHOK			LAST NAME GUPTA	SUFF.	11. NONQUALIFIED PLANS	12.a-d C D	240.43 12718.53
4522 Alameda Dr Fremont CA 94536 USA					14. OTHER CA SDI 1183.71	DD	18267.72
F. EMPLOYEE'S ADDRESS AND ZIP CODE				13. STATUTORY EMPLOYEE <input type="checkbox"/> RETIREMENT PLAN <input checked="" type="checkbox"/> THIRD PARTY SICK PAY <input type="checkbox"/>			
15. STATE CA	EMPLOYER'S STATE I.D. NO. 305-3743-5	16. STATE WAGES, TIPS, ETC. 209608.62	17. STATE INCOME TAX 13826.45	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

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**FORM W-2 Wage and Tax Statement**

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