									Federal Bo	ox 1	Soc. Sec. Box 3 &	7 Medicare Box 5	5
		explanation of t ne Gross amour					Gross Wages 142176.						
i lease not	te triat ti	ie Gross arriour	ic snown may	include 6	aujustiii	ciito.							-
							Group Term	n Life		75.36	75.	36 75.	.36
							Adoption						
							Deferred Co	omp	(767	73.08)		
							Section 125	5	(617	4.24	(6174.2	4) (6174.2	24)
							Other Preta	x/Wage Limit			(9263.4	7)	
							W-2 Wages		1299	90.39	128400.	00 137663.	.47
D. CONTROL NUI 00055021270		This Information is to the Internal Reve		2018	OMB N	IO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 129990.39				2. FEDERAL INCOME TAX WITHHELD 12021.63		
B. EMPLOYER ID	DENTIFICAT	ION NUMBER	A. EMPLOYEE'S	SOCIAL SECU	URITY NUI	MBER	3. SOCIAL SE	CURITY WAGES		-	1. SOCIAL SECURITY TA	X WITHHELD	
13-3133497			491-63-7088				128400.00 7960.80					7960.80	
C. EMPLOYER'S N	NAME, AD	DRESS, AND ZIP C	ODE				5. MEDICARE	5. MEDICARE WAGES AND TIPS 6. MEDICARE TAX WITHHELD					
		el Related Serv	ices Company,	Inc.			137663.47					1996.12	
MC 24-02-11 2401 W Behre	end Dr. S	uite 55					7. SOCIAL SEC	CURITY TIPS		1	3. ALLOCATED TIPS		
Phoenix AZ 85	5027						9. VERIFICATION CODE 10. DEPENDENT CA				O. DEPENDENT CARE E	ENEFITS	
							62e1-108e	e-a86e-5db0					
E. EMPLOYEE'S F	FIRST NAM	E AND INITIAL	LAST NA	ME		SUFF.	11. NONQUAL	IFIED PLANS		1	2.a-d C	75.	.36
Prabhu Lakshi	ımi Srikaı	nth	Sunka	ra							D	7673.	.08
610 rivendell							14. OTHER NY	/ FL	85.	56	W	800.	
Edison NJ 088	817						NY NY	/ DI	31.	20	DD	21452.	.52
F. EMPLOYEE'S A	ADDRESS A	AND ZIP CODE								1	3. STATUTORY RETIR	EMENT X THIRD PARTY SICK PAY	
15. STATE EMPLOYER'S STATE I.D. NO. 16. STATE WAGES, TIPS, ETC. 17. STATE INCOME TA 136164.63 17. STATE INCOME TA 17. ST							AX	18. LOCAL WAGES, TI	PS, ETC.	19. L0	OCAL INCOME TAX	20. LOCALITY NAME	

D. CONTROL 000550212		This Information is to the Internal Rev		2018	OMB N	NO. 1545	-0008	1. WAGES, TI	PS, OTHER COMPE 1299	NSATION 990.39	2. FEDERAL INCOME TA	AX WITHHELD 12021.63
B. EMPLOYE	R IDENTIFICAT	ION NUMBER	A. EMPLOYEE'S	SOCIAL SEC	URITY NU	MBER		3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
13-313349	97		491-63-7088						1284	100.00		7960.80
C. EMPLOYE	R'S NAME, AL	DRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD	
American E	Express Tra	vel Related Serv	ices Company,	Inc.					1376	563.47		1996.12
MC 24-02- 2401 W Be Phoenix AZ	ehrend Dr. S	Suite 55						7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS	
Prioenix A2	2 63027							9. VERIFICATION	ON CODE		10. DEPENDENT CARE	BENEFITS
E. EMPLOYE	E'S FIRST NAM	IE AND INITIAL	LAST NA	AME			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	75.36
Prabhu Lal	kshmi Srika	nth	Sunka	ra							D	7673.08
610 riveno	dell wav							14. OTHER NY	'FL	85.56	w	800.00
Edison NJ								NY	DI DI	31.20	DD	21452.52
USA											13. STATUTORY RETI	REMENT X THIRD PARTY
F. EMPLOYE	E'S ADDRESS	AND ZIP CODE									EMPLOYEE PLAT	
15. STATE		STATE I.D. NO.	16. STATE WAG			17. STATE IN	COME T	AX	18. LOCAL WAGES	S, TIPS, ETC. 1	9. LOCAL INCOME TAX	20. LOCALITY NAME
NJ	133-133-4	197/000		136164	1.63							

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2018

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL N		This Information is			OMB	NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENS		2. FEDERAL INCOME T		
0005502127	701	to the Internal Rev	enue Service	2018	OIVID	NO. 1343-000	·	12999	90.39		12021.63	
B. EMPLOYER I	IDENTIFICAT	ION NUMBER	A. EMPLOYEE'S	SOCIAL SEC	URITY NU	MBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY	AX WITHHELD	
13-3133497	,		491-63-7088					128400.00			7960.80	
C. EMPLOYER'S	S NAME, AD	DRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD	
		vel Related Serv	ices Company,	Inc.				137663.47			1996.12	
MC 24-02-11 2401 W Behi Phoenix AZ 8	rend Dr. S	Suite 55					7. SOCIAL SE	CURITY TIPS		8. ALLOCATED TIPS		
PHOEHIX AZ (65027						9. VERIFICATI	ON CODE		10. DEPENDENT CARE	BENEFITS	
E. EMPLOYEE'S	S FIRST NAM	E AND INITIAL	LAST NA	AME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	75.36	
Prabhu Laks	shmi Srika	nth	Sunka	ra						D	7673.08	
610 rivende	ll way						14. OTHER N	/ FI	85.56	, w	800.00	
Edison NJ 08 USA								/ DI	31.20		21452.52	
F. EMPLOYEE'S	S ADDRESS A	AND ZIP CODE								13. STATUTORY RET	REMENT X THIRD PARTY N SICK PAY	
	EMPLOYER'S	STATE I.D. NO. 197/000	16. STATE WAG	ES, TIPS, ET 136164.		17. STATE INCOME	TAX	18. LOCAL WAGES,	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2018

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL		This information is being furnished				NO. 1545-0008	1. WAGES, TI	PS, OTHER COMPENSA		2. FEDERAL INCOME TAX WITHHELD		
000550212	to the Internal Revenue Service 2018 OVIB NO.							129990	.39	12021.63		
B. EMPLOYE	R IDENTIFICA	TION NUMBER	A. EMPLOYEE'S	SOCIAL SEC	URITY NU	IMBER	3. SOCIAL SEC	CURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD		
13-3133497 491-63-7088								128400.00			7960.80	
C. EMPLOYE	R'S NAME, A	DDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD	
American Express Travel Related Services Company, Inc.								137663.47			1996.12	
MC 24-02-11 2401 W Behrend Dr. Suite 55 Phoenix AZ 85027							7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS					
r Hoeliix Az	2 03027						9. VERIFICATION	ON CODE		10. DEPENDENT CARE	BENEFITS	
							62e1-108e	-a86e-5db0				
E. EMPLOYE	E'S FIRST NAM	ME AND INITIAL	LAST NA	AME		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	75.36	
Prabhu Lal	kshmi Srika	anth	Sunka	ra						D	7673.08	
610 riveno	dell wav						14. OTHER NY	FI	85.56	w	800.00	
Edison NJ USA							NY	DI	31.20	DD	21452.52	
	F'S ADDRESS	AND ZIP CODE								13. STATUTORY RET	REMENT X THIRD PARTY SICK PAY	
15. STATE		S STATE I.D. NO.	16. STATE WAG	ES, TIPS, E	TC.	17. STATE INCOME 1	ΓAX	18. LOCAL WAGES, T	IPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	
NJ	133-133-	497/000		136164	.63							

D. CONTRO 00055021		This Information is to the Internal Rev		2018	OMB	NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION	ON	2. FEDERAL INCOME TA	AX WITHHELD
B. EMPLOYI	ER IDENTIFICA	TION NUMBER	A. EMPLOYEE'S	SOCIAL SECU	JRITY N	UMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
C. EMPLOY		DDRESS, AND ZIP (491-63-7088 CODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	THHELD
MC 24-02	-11	evel Related Serv	vices Company,	, Inc.			7. SOCIAL SE	CURITY TIPS		8. ALLOCATED TIPS	
Phoenix A	ehrend Dr. : Z 85027	Suite 55					9. VERIFICAT	ON CODE		10. DEPENDENT CARE	BENEFITS
E. EMPLOYE	EE'S FIRST NAN	ME AND INITIAL	LAST NA	AME		SUFF.	11. NONQUA	IFIED PLANS		12.a-d	
Prabhu La 610 riven	akshmi Srika dell way	anth	Sunka	ira			14. OTHER				
Edison NJ USA											
		AND ZIP CODE		50 TIDO 5T		47 07175 11100145 7		10 10011 HILOSO TIP	FT0 40	EMPLOYEE PLAN	
15. STATE NY	13313349	S STATE I.D. NO. 97	16. STATE WAG	129990.		17. STATE INCOME T	7560.50	18. LOCAL WAGES, TIPS	, EIC. 19.	LOCAL INCOME TAX	20. LOCALITY NAME
D. CONTRO		This Information is			OMB	NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION	ON	2. FEDERAL INCOME TA	AX WITHHELD
	ER IDENTIFICA	to the Internal Re TION NUMBER	A. EMPLOYEE'S	SOCIAL SECU			3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
C. EMPLOY		DDRESS, AND ZIP (491-63-7088 CODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	THHELD
MC 24-02	-11	avel Related Serv	vices Company,	, Inc.			7. SOCIAL SE	CURITY TIPS		8. ALLOCATED TIPS	
Phoenix A	ehrend Dr. : Z 85027	Suite 55					9. VERIFICATI	ON CODE		10. DEPENDENT CARE	BENEFITS
F. FMPLOYE	FE'S FIRST NAN	ME AND INITIAL	LAST NA	AME		SUFF.	11. NONQUA	IEIED PLANS		12.a-d	
Prabhu La	akshmi Srika		Sunka			3011.	14. OTHER	arred Feating		12.0 0	
610 riven Edison NJ USA							14. OTHER				
F. EMPLOYE		AND ZIP CODE								EIVIPLOTEE PLAI	
15. STATE NY	13313349	S STATE I.D. NO. 97	16. STATE WAG	129990.		17. STATE INCOME T	7560.50	18. LOCAL WAGES, TIPS	i, ETC. 19.	LOCAL INCOME TAX	20. LOCALITY NAME
		with Employe e and Tax S		TY, or LO	CAL	tax return	2018	D	ept. of tl	ne Treasury - Inter	nal Revenue Service
D. CONTRO	_				01.40	NO. 4545 0000	1. WAGES, T	IPS, OTHER COMPENSATION	ON	2. FEDERAL INCOME TA	AX WITHHELD
00055021	LIVOIVIDEN	This Information is	being turnished			NO. 1545-0008				4. SOCIAL SECURITY T	AX WITHHELD
B. EMPLOY	2702	This Information is to the Internal Rev TION NUMBER		2010		UMBER	3. SOCIAL SE	CURITY WAGES			
13-31334	.2702 ER IDENTIFICA 97	to the Internal Rev TION NUMBER	A. EMPLOYEE'S 491-63-7088	SOCIAL SECU		UMBER		CURITY WAGES		6. MEDICARE TAX WIT	THHELD
13-31334 C. EMPLOYI	.2702 ER IDENTIFICA 97 ER'S NAME, AI Express Tra	to the Internal Rev	A. EMPLOYEE'S 491-63-7088	SOCIAL SECU		UMBER	5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	THHELD
C. EMPLOYI American MC 24-02	ER IDENTIFICA 97 ER'S NAME, AI Express Tra -11 ehrend Dr. :	to the Internal Rev TION NUMBER DDRESS, AND ZIP (avel Related Serv	A. EMPLOYEE'S 491-63-7088	SOCIAL SECU		UMBER	5. MEDICARE 7. SOCIAL SE	WAGES AND TIPS		8. ALLOCATED TIPS	
13-31334 C. EMPLOYI American MC 24-02 2401 W B Phoenix A	.2702 ER IDENTIFICA 97 ER'S NAME, AI Express Tra -11 ehrend Dr. 1 Z 85027	to the Internal Rev TION NUMBER DDRESS, AND ZIP (avel Related Serv Suite 55	A. EMPLOYEE'S 491-63-7088 CODE vices Company,	SOCIAL SECU			SOCIAL SE 9. VERIFICATI	WAGES AND TIPS CURITY TIPS ON CODE		8. ALLOCATED TIPS 10. DEPENDENT CARE	
13-31334 C. EMPLOYI American MC 24-02 2401 W B Phoenix A	.2702 ER IDENTIFICA 97 ER'S NAME, AI Express Tra -11 ehrend Dr. 1 Z 85027	to the Internal Rev TION NUMBER DDRESS, AND ZIP (avel Related Serv Suite 55	A. EMPLOYEE'S 491-63-7088	SOCIAL SECU		UMBER SUFF.	5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI	WAGES AND TIPS CURITY TIPS ON CODE		8. ALLOCATED TIPS	
13-31334 C. EMPLOYI American MC 24-02 2401 W B Phoenix A E. EMPLOYI Prabhu La 610 riven Edison NJ	2702 ER IDENTIFICA 97 ER'S NAME, AI EXPRESS Tra -11 ehrend Dr. : Z 85027 EE'S FIRST NAM ekshmi Srika dell way	to the Internal Rev TION NUMBER DDRESS, AND ZIP (avel Related Serv Suite 55	A. EMPLOYEE'S 491-63-7088 CODE vices Company,	SOCIAL SECU			SOCIAL SE 9. VERIFICATI	WAGES AND TIPS CURITY TIPS ON CODE		8. ALLOCATED TIPS 10. DEPENDENT CARE	
13-31334 C. EMPLOYI American MC 24-02 Phoenix A E. EMPLOYI Prabhu La 610 riven Edison NJ USA	2702 ER IDENTIFICA 97 ER'S NAME, AI EXPRESS Tra -11 ehrend Dr. : Z 85027 EE'S FIRST NAM akshmi Srika dell way	to the Internal Rev TION NUMBER DDRESS, AND ZIP (avel Related Serv Suite 55	A. EMPLOYEE'S 491-63-7088 CODE vices Company,	SOCIAL SECU			5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI	E WAGES AND TIPS CURITY TIPS ON CODE LIFIED PLANS		8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d	BENEFITS REMENT THIRD PARTY
13-31334 C. EMPLOYI American MC 24-02 Phoenix A E. EMPLOYI Prabhu La 610 riven Edison NJ USA	2702 ER IDENTIFICA: 97 ER'S NAME, AI EXPRESS Tra- 11 ehrend Dr.: 2 85027 EE'S FIRST NAM akshmi Srika dell way 1 08817	to the Internal Rev TION NUMBER DDRESS, AND ZIP C avel Related Serv Suite 55 WE AND INITIAL anth	A. EMPLOYEE'S 491-63-7088 CODE vices Company,	SOCIAL SECU	C.		5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI 14. OTHER	WAGES AND TIPS CURITY TIPS ON CODE	i, ETC. 19.	8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETI	BENEFITS REMENT THIRD PARTY
13-31334 C. EMPLOYI American MC 24-02 2401 W B Phoenix A E. EMPLOYI Prabhu La 610 riven Edison NJ USA USA T. E. EMPLOYI 15. STATE NY Copy 2 To	.2702 ER IDENTIFICA 977 ER'S NAME, AI EXPRESS Tra-11 EXPRESS TRA 1-12 ESS SIRST NAM SISSMM S'RIS EE'S ADDRESS ENTRE ANDRESS ENTRE ANDRESS EMPLOYER' 13313345 O be filed	to the Internal Rev TION NUMBER DDRESS, AND ZIP C avel Related Serv Suite 55 ME AND INITIAL anth AND ZIP CODE S STATE I.D. NO. 77 with Employe	A. EMPLOYEE'S 491-63-7088 CODE vices Company, LAST N. Sunka	SOCIAL SECU Inc. AME ra ES, TIPS, ETC 129990.	c. 39	SUFF. 17. STATE INCOME T	5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI 14. OTHER	E WAGES AND TIPS CURITY TIPS ON CODE LIFIED PLANS 18. LOCAL WAGES, TIPS		8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETAINED PLAY LOCAL INCOME TAX	BENEFITS REMENT X THIRD PARTY SICK PAY
13-31334 C. EMPLOYI American MC 24-02 2401 W B Phoenix A E. EMPLOYI Prabhu La 610 riven Edison NJ USA F. EMPLOYI T5. STATE NY Copy 2 To FORM W	.2702 ER IDENTIFICA FRIS NAME, AI Express Tra- 11 Express Tra 11 EST FIRST NAM EST FIRST	to the Internal Rev TION NUMBER DDRESS, AND ZIP C avel Related Serv Suite 55 WE AND INITIAL anth AND ZIP CODE S STATE I.D. NO.	A. EMPLOYEE'S 491-63-7088 CODE vices Company, LAST N. Sunka	SOCIAL SECU Inc. AME ra ES, TIPS, ETC 129990.	c. 39	SUFF. 17. STATE INCOME T	5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI 14. OTHER AX 7560.50 2018	E WAGES AND TIPS CURITY TIPS ON CODE LIFIED PLANS 18. LOCAL WAGES, TIPS	Dept. of	8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETIEMPLOYEE PLAY LOCAL INCOME TAX the Treasury - Inte	REMENT X THIRD PARTY SICK PAY 20. LOCALITY NAME ernal Revenue Service
13-31334 C. EMPLOYI American MC 24-02 2401 W B Phoenix A E. EMPLOYI Prabhu La 610 riven Edison NJ USA USA T. E. EMPLOYI 15. STATE NY Copy 2 To	2702 ER IDENTIFICA 97 PT ER'S NAME, AI EXPRESS Tra-11 EXPRESS TRA-	to the Internal Rev TION NUMBER DDRESS, AND ZIP C avel Related Serv Suite 55 ME AND INITIAL anth AND ZIP CODE S STATE I.D. NO. 77 with Employe	A. EMPLOYEE'S 491-63-7088 DOBE vices Company, LAST N., Sunka 16. STATE WAG e'S STATE, CI statement being furnished	SOCIAL SECU Inc. AME ra ES, TIPS, ETT 129990 TY, or LO	cc. 39	SUFF. 17. STATE INCOME T	5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI 14. OTHER AX 7560.50 2018	E WAGES AND TIPS CURITY TIPS ON CODE LIFIED PLANS 18. LOCAL WAGES, TIPS	Dept. of	8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETAINED PLAY LOCAL INCOME TAX	REMENT X THIRD PARTY SICK PAY 20. LOCALITY NAME ernal Revenue Service
13-31334 C. EMPLOYI C. EMPLOYI MC 24-02 2401 W B POPUNIX E. EMPLOYI Prabhu La 610 riven Edison NJ USA F. EMPLOYI NY Copy 2 To FORM W D. CONTRO 00055021	2702 ER IDENTIFICA 97 ER'S NAME, AI EXPRESS Tra-11 EXPRESS Tra-11 EST SIRST NAME SE'S FIRST NAME dell Way 08817 EE'S ADDRESS EMPLOYER' 13313345 O be filed 1-2 Wage PL NUMBER 2702 ER IDENTIFICA ER IDENTIFICA	to the Internal Rev TION NUMBER DDRESS, AND ZIP of avel Related Serv Suite 55 ME AND INITIAL anth AND ZIP CODE S STATE I.D. NO. 97 with Employe e and Tax S This Information is	A. EMPLOYEE'S 491-63-7088 DOBE vices Company, LAST N., Sunka 16. STATE WAG e'S STATE, CI statement being furnished	SOCIAL SECU Inc. AME ira ES, TIPS, ETC 129990. TY, or LO	c. 39 CAL	SUFF. 17. STATE INCOME T tax return NO. 1545-0008	5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI 14. OTHER AX 7560.50 2018	E WAGES AND TIPS CURITY TIPS ON CODE LIFIED PLANS 18. LOCAL WAGES, TIPS	Dept. of	8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETIEMPLOYEE PLAY LOCAL INCOME TAX the Treasury - Inte	REMENT X THIRD PARTY 1 20. LOCALITY NAME 20. LOCALITY NAME
13-31334 C. EMPLOYI American MC 24-02 2401 W B Phoenix A E. EMPLOYI Prabhu La 610 riven Edison NJ USA F. EMPLOYI 15. STATE NY D. CONTRO 00055021 B. EMPLOYI 13-31334 C. EMPLOYI C. EMPLOYI C. EMPLOYI C. EMPLOYI C. EMPLOYI	2702 ER IDENTIFICA 97 ER'S NAME, AI EXPRESS Tra- 11 ehrend Dr.: Z 85027 EE'S FIRST NAM skshmi Srike dell way 108817 EE'S ADDRESS EMPLOYER' 13313345 o be filed /-2 Wago DL NUMBER 2702 ER IDENTIFICA 97 ER'S NAME, AI	to the Internal Rev TION NUMBER DDRESS, AND ZIP C avel Related Serv Suite 55 ME AND INITIAL anth AND ZIP CODE S STATE I.D. NO. 37 with Employe e and Tax S This Information is to the Internal Rev TION NUMBER DDRESS, AND ZIP C DDRESS, AND ZIP C	A. EMPLOYEE'S 491-63-7088 DOE PICES COMPANY, LAST NV. Sunka 16. STATE WAG e'S STATE, CI Statement being furnished renue Service A. EMPLOYEE'S 491-63-7088	SOCIAL SECU AME ES, TIPS, ETT 129990 TY, or LO	c. 39 CAL	SUFF. 17. STATE INCOME T tax return NO. 1545-0008	5. MEDICARE 7. SOCIAL SE 9. VERIFICATI 11. NONQUAI 14. OTHER AX 7560.50 2018 1. WAGES, T 3. SOCIAL SE	E WAGES AND TIPS CURITY TIPS ON CODE IFIED PLANS 18. LOCAL WAGES, TIPS	Dept. of	8. ALLOCATED TIPS 10. DEPENDENT CARE 12.a-d 13. STATUTORY RETINEMENT PLAN LOCAL INCOME TAX the Treasury - Inter 2. FEDERAL INCOME TA	REMENT X THIRD PARTY SICK PAY 20. LOCALITY NAME Pernal Revenue Service AX WITHHELD AX WITHHELD
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FORM W-2 Wage and Tax Statement

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Dept. of the Treasury - Internal Revenue Service