



This Product Contains Sensitive Taxpayer Data

Request Date: 06-19-2025
Response Date: 06-19-2025
Tracking Number: 108263059279

Wage and Income Transcript

SSN Provided: XXX-XX-4876
Tax Period Requested: December, 2022

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN):XXXXX5596
ERNS
200 PL

Employee:

Employee's Social Security Number:XXX-XX-4876
ALEJ E PUGL
325 LE

Submission Type:.....Original document
Wages, Tips and Other Compensation:.....\$194,222.00
Federal Income Tax Withheld:.....\$40,178.00
Social Security Wages:.....\$48,571.00
Social Security Tax Withheld:.....\$3,011.00
Medicare Wages and Tips:.....\$48,571.00
Medicare Tax Withheld:.....\$704.00
Social Security Tips:.....\$0.00
Allocated Tips:.....\$0.00
Dependent Care Benefits:.....\$0.00
Deferred Compensation:.....\$1,049.00
Code "Q" Nontaxable Combat Pay:.....\$0.00
Code "W" Employer Contributions to a Health Savings Account:.....\$0.00
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation
plan:.....\$0.00
Code "Z" Income under section 409A on a nonqualified Deferred Compensation
plan:.....\$0.00
Code "R" Employer's Contribution to MSA:.....\$0.00
Code "S" Employer's Contribution to Simple Account:.....\$0.00
Code "T" Expenses Incurred for Qualified Adoptions:.....\$0.00
Code "V" Income from exercise of non-statutory stock options:.....\$0.00
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....\$0.00
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....\$0.00
Code "DD" Cost of Employer-Sponsored Health Coverage:.....\$5,124.00
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b)
Plan:.....\$0.00
Code "FF" Permitted benefits under a qualified small employer health
reimbursement arrangement:.....\$0.00
Code "GG" Income from Qualified Equity Grants Under Section 83(i):.....\$0.00
Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close
of the Calendar Year:.....\$0.00
Third Party Sick Pay Indicator:.....Unanswered

Retirement Plan Indicator:.....Yes - retirement plan
Statutory Employee:.....Not Statutory Employee
W2 Submission Type:.....Original
W2 WHC SSN Validation Code:.....Correct SSN

Schedule K-1 1065

Partnership:

Partnership's Employer Identification Number:XXXXX4416
PANA
9 EAST

Partner:

Partner's Identifying Number:XXX-XX-4876
ALEJ PUGL
325 LE

Submission Type:.....Original document
Partner Share of Capital Beginning:.....20%
Partner Share of Capital Ending:.....20%
IRA SEP KEOGH Indicator:.....N/A
Beginning Tax Period:.....202201
Ending Tax Period:.....202212
Schedule K-3:.....Box checked
Dividends:.....\$0.00
Interest:.....\$0.00
Royalties:.....\$0.00
Ordinary Income K-1:.....-\$33,313.00
Real Estate:.....\$0.00
Other Rental:.....\$0.00
Total Guaranteed Payments:.....\$0.00
Section 179 Expenses:.....\$0.00
Short Term Capital Gain:.....\$0.00
Long Term Capital Gain:.....\$0.00
Part III Other Income (Loss):.....\$0.00
Part III Other Deduction:.....\$0.00
Nonrecourse Beginning:.....\$0.00
Nonrecourse Ending:.....\$0.00
Qualified Nonrecourse Beginning:.....\$0.00
Qualified Nonrecourse Ending:.....\$0.00
Recourse Beginning:.....\$0.00
Recourse Ending:.....\$0.00
Dividend Equivalents:.....\$0.00

Form 1098-E Student Loan Interest Statement

Recipient/Lender:

Recipient's Federal Identification Number (FIN):XXXXX2489
UNIV
4099 M

Borrower:

Borrower's Social Security Number:XXX-XX-4876
ALEJ ENRI PUGL
1480 N

Submission Type:.....Original document

Account Number (Optional):.....XXXXXXXXXXXXXXXXX1013
Loan Origination Fees:
Checked - does not include loan origination fees and/or capitalized interest,
and the loan was made before September 1, 2004
Student Loan Interest Received by Lender:.....\$14,179.00

Form 1099-G

Payer:

Payer's Federal Identification Number (FIN):XXXXX3200
STAT
110 ST

Recipient:

Recipient's Identification Number:XXX-XX-4876
PUGL
325 LE

Submission Type:.....Original document
Account Number (Optional):.....XXXXX9197
RTAA Payments:.....\$0.00
Tax Withheld:.....\$0.00
Taxable Grants:.....\$0.00
Unemployment Compensation:.....\$0.00
Agricultural Subsidies:.....\$0.00
Prior Year Refund:.....\$691.00
Market gain on Commodity Credit Corporation loans repaid:.....\$0.00
Year of Refund:.....2021
1099G Offset:.....Not Refund, Credit, or Offset for Trade or Business
Second TIN Notice:.....

Form 1099-G

Payer:

Payer's Federal Identification Number (FIN):XXXXX6013
STAT
50 BAR

Recipient:

Recipient's Identification Number:XXX-XX-4876
PUGL ALEJ
325 LE

Submission Type:.....Original document
Account Number (Optional):.....XXXXXXXXX6170
RTAA Payments:.....\$0.00
Tax Withheld:.....\$0.00
Taxable Grants:.....\$0.00
Unemployment Compensation:.....\$0.00
Agricultural Subsidies:.....\$0.00
Prior Year Refund:.....\$1,058.00
Market gain on Commodity Credit Corporation loans repaid:.....\$0.00
Year of Refund:.....2021
1099G Offset:.....Not Refund, Credit, or Offset for Trade or Business
Second TIN Notice:.....