



This Product Contains Sensitive Taxpayer Data

Request Date: 06-19-2025
Response Date: 06-19-2025
Tracking Number: 108263072731

Wage and Income Transcript

SSN Provided: XXX-XX-4876
Tax Period Requested: December, 2023

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN):XXXXXX5596
ERNS
1201 E

Employee:

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

Submission Type:	Original document
Wages, Tips and Other Compensation:	\$187,311.00
Federal Income Tax Withheld:	\$38,296.00
Social Security Wages:	\$160,200.00
Social Security Tax Withheld:	\$9,932.00
Medicare Wages and Tips:	\$193,095.00
Medicare Tax Withheld:	\$2,799.00
Social Security Tips:	\$0.00
Allocated Tips:	\$0.00
Dependent Care Benefits:	\$0.00
Deferred Compensation:	\$5,784.00
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:	\$5,784.00
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:XXXXXX4416
PANA
9 EAST

Partner:

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

Submission Type:.....Original document
Partner Share of Capital Beginning:.....0.99%
Partner Share of Capital Ending:.....0.99%
IRA SEP KEOGH Indicator:.....N/A
Beginning Tax Period:.....202301
Ending Tax Period:.....202312
Schedule K-3:.....Box checked
Dividends:.....\$0.00
Interest:.....\$0.00
Royalties:.....\$0.00
Ordinary Income K-1:.....-\$90,483.00
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):XXXXXX2489
UNIV
4099 M

Borrower:

Borrower's Social Security Number:XXX-XX-4876
PUGL ALEJ ENRI
325 LE

Submission Type:.....Original document

Account Number (Optional):.....N/A
Loan Origination Fees:
Not checked - does include loan origination fees and/or capitalized interest,
and the loan was made before September 1, 2004
Student Loan Interest Received by Lender:.....\$26,075.00

Form 1098-E Student Loan Interest Statement

Recipient/Lender:

Recipient's Federal Identification Number (FIN):XXXXXX1525
MOHE
633 SP

Borrower:

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

Submission Type:.....Original document
Account Number (Optional):.....XXXXXX2191
Loan Origination Fees:
Not checked - does include loan origination fees and/or capitalized interest,
and the loan was made before September 1, 2004
Student Loan Interest Received by Lender:.....\$2,964.00

Form 1099-G

Payer:

Payer's Federal Identification Number (FIN):XXXXXX3200
STAT
110 ST

Recipient:

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

Submission Type:.....Original document
Account Number (Optional):.....XXXX9894
RTAA Payments:.....\$0.00
Tax Withheld:.....\$0.00
Taxable Grants:.....\$0.00
Unemployment Compensation:.....\$0.00
Agricultural Subsidies:.....\$0.00
Prior Year Refund:.....\$9,269.00
Market gain on Commodity Credit Corporation loans repaid:.....\$0.00
Year of Refund:.....2022
1099G Offset:.....Not Refund, Credit, or Offset for Trade or Business
Second TIN Notice:.....

Form 1099-G

Payer:

Payer's Federal Identification Number (FIN):XXXXXX6013
STAT
3 JOHN

Recipient:
Recipient's Identification Number:XXX-XX-4876
PUGL ALEJ
325 LE
Submission Type:.....Original document
Account Number (Optional):.....XXXXXXXX8199
RTAA Payments:.....\$0.00
Tax Withheld:.....\$0.00
Taxable Grants:.....\$0.00
Unemployment Compensation:.....\$0.00
Agricultural Subsidies:.....\$0.00
Prior Year Refund:.....\$221.00
Market gain on Commodity Credit Corporation loans repaid:.....\$0.00
Year of Refund:.....2022
1099G Offset:.....Not Refund, Credit, or Offset for Trade or Business
Second TIN Notice:.....

Form 1099-INT

Payer:
Payer's Federal Identification Number (FIN):XXXXX4650
JPMO
PO POX

Recipient:
Recipient's Identification Number:XXX-XX-4876
ALEJ PUGL
1010 A

Submission Type:.....Original document
Account Number (Optional):.....XXXXXXXXXX9031
Interest:.....\$11.00
Tax Withheld:.....\$0.00
Savings Bonds:.....\$0.00
Investment Expense:.....\$0.00
Interest Forfeiture:.....\$0.00
Foreign Tax Paid:.....\$0.00
Tax-Exempt Interest:.....\$0.00
Specified Private Activity Bond Interest:.....\$0.00
Market Discount:.....\$0.00
Bond Premium:.....\$0.00
Bond Premium on Tax Exempt Bond:.....\$0.00
Bond Premium on Treasury Obligations:.....\$0.00
Second Notice Indicator:.....No Second Notice
Foreign Country or US Possession:.....
CUSIP Number:.....
FATCA Filing Requirement:.....Box not checked no Filing Requirement