



# Internal Revenue Service

## United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 01-10-2021  
Response Date: 01-10-2021  
Tracking Number: 100610978111

### Wage and Income Transcript

SSN Provided: XXX-XX-8460  
Tax Period Requested: December, 2019

### Form W-2 Wage and Tax Statement

#### Employer:

Employer Identification Number (EIN): XXXXX1035  
SMIL  
1157 W

#### Employee:

Employee's Social Security Number: XXX-XX-8460  
SALI AWAI  
1157 W

Submission Type:.....Original document  
Wages, Tips and Other Compensation:.....\$63,000.00  
Federal Income Tax Withheld:.....\$15,903.00  
Social Security Wages:.....\$63,000.00  
Social Security Tax Withheld:.....\$3,906.00  
Medicare Wages and Tips:.....\$63,000.00  
Medicare Tax Withheld:.....\$913.00  
Social Security Tips:.....\$0.00  
Allocated Tips:.....\$0.00  
Dependent Care Benefits:.....\$0.00  
Deferred Compensation:.....\$0.00  
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:.....\$0.00  
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:.....Unanswered  
Statutory Employee:.....Not Statutory Employee  
W2 Submission Type:.....Original  
W2 WHC SSN Validation Code:.....Correct SSN

### Schedule K-1 1120S Shareholder's Share of Income, Credits, Deductions, etc.

#### Corporation:

Corporation's Employer Identification Number: XXXXX1035  
SMIL  
1157 W

#### Shareholder:

Shareholder's Identifying Number: XXX-XX-8460  
SALI AWAI  
1157 W

Submission Type:.....Original document  
Dividends:.....\$0.00  
Interest:.....\$0.00  
Royalties:.....\$0.00  
Ordinary Income K-1:.....\$52,680.00  
Real Estate:.....\$0.00  
Other Rental:.....\$0.00  
Section 179 Expenses:.....\$0.00  
Short Term Capital Gain:.....\$0.00  
Long Term Capital Gain:.....\$0.00  
Credits:.....\$0.00  
Part III Other Income Loss:.....\$0.00  
Part III Other Deduction:.....\$0.00  
Credits Code 1:.....Insignificant  
Credits Code 2:.....Insignificant  
Shareholder's Percentage of Stock:.....100%  
Beginning Tax Period:.....201901

Ending Tax Period:.....201912

Form 1098-E Student Loan Interest Statement

Recipient/Lender:

Recipient's Federal Identification Number (FIN):XXXXX8289  
MOHE  
633 SP

Borrower:

Borrower's Social Security Number:XXX-XX-8460  
AWAI SALI  
1157 W

Submission Type:.....Original document

Account Number (Optional):.....XXXXXX2005

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:.....\$22,276.00

Form 1099-MISC

Payer:

Payer's Federal Identification Number (FIN):XXXXX1082  
ISMI  
ISMILE

Recipient:

Recipient's Identification Number:XXX-XX-8460  
AWAI SALI  
1157 W

Submission Type:.....Original document

Account Number (Optional):.....N/A

Tax Withheld:.....0.00

Non-Employee Compensation:.....\$300.00

Medical Payments:.....0.00

Fishing Income:.....0.00

Rents:.....0.00

Royalties:.....0.00

Other Income:.....0.00

Substitute Payments for Dividends:.....0.00

Excess Golden Parachute:.....0.00

Crop Insurance:.....0.00

Attorney Fees:.....0.00

Foreign Tax Paid:.....0.00

Section 409A Deferrals:.....0.00

Section 409A Income:.....0.00

Direct Sales Indicator:.....Not Direct Sales

FATCA Filing Requirement:.....Box not checked no Filing Requirement

Second Notice Indicator:.....No Second Notice

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