



Internal Revenue Service
 United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 11-06-2024
 Response Date: 11-06-2024
 Tracking Number: 106882973111

Wage and Income Transcript

SSN Provided: 111-62-1363
 Tax Period Requested: December, 2020



002658

Form W-2 Wage and Tax Statement :

Employer:
 Employer Identification Number (EIN): 592319823
 BREVARD NEPHROLOGY GROUP PA
 245 S COURTNEY PKWY #7
 MERRITT ISLAND, FL 32952-0000

Employee:
 Employee's Social Security Number: 111-62-1363
 NELMARIE GONZALEZ
 2438 CASONA LANE
 MELBOURNE, FL 32940-0000

Submission Type: Original document
 Wages, Tips and Other Compensation: \$25,652.00
 Federal Income Tax Withheld: \$1,342.00
 Social Security Wages: \$27,002.00
 Social Security Tax Withheld: \$1,674.00
 Medicare Wages and Tips: \$27,002.00
 Medicare Tax Withheld: \$391.00
 Social Security Tips: \$0.00
 Allocated Tips: \$0.00
 Dependent Care Benefits: \$0.00
 Deferred Compensation: \$1,350.00
 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: Yes - retirement plan
 Statutory Employee: Not Statutory Employee
 W2 Submission Type: Original
 W2 WHC SSN Validation Code: Correct SSN

Tracking Number: 106882973111

Form 1098-T

Payer:

Payer's Federal Identification Number (FIN):650216638
EVERGLADES COLLEGE INC.
DBA KEISER UNIVERSITY
FORT LAUDERDALE, FL 33309-0000

Recipient:

Recipient's Identification Number:111-62-1363
NELMARIE GONZALEZ
2438 CASONA LN APT 5301
MELBOURNE, FL 32940-0000

Submission Type:.....Original document
Account Number (Optional):.....6454619
Qualified Tuition and Related Expense:.....\$250.00
Scholarships or Grants:.....\$250.00
Half Time Student Indicator:.....Grtr than or Eq to Half Time Student
Graduate Student Indicator:.....Not a Graduate Student
Academic Period Code:.....Academic Period Box Not Checked
TIN Checkbox:.....box marked
Adjustments Made for Prior Year:.....\$0.00
Adjustments to Scholarships or Grants for a Prior Year:.....\$0.00
Reimbursements/Refunds from an Insurance Contract:.....\$0.00

orm 1099-R Distributions from Pensions, Annuities, Retire or Profit-Sharing Plans, IRAs,

Payer:

Payer's Federal Identification Number (FIN):571198022
ADP INC RETIREMENT SERVICES
11 NORTHEASTERN BLVD
SALEM, NH 03079-0000

Recipient:

Recipient's Identification Number:111-62-1363
GONZALEZ, NELMARIE
2438 CASONA LANE APT 5301
MELBOURNE, FL 32940-0000

Submission Type:.....Original document
Account Number (Optional):.....20210121142500063971
Distribution Code Value:
.....Early Distribution, no known exception (in most cases, under age 59 1/2)
Distribution Code:.....1
Distribution Code Value:.....Not significant
Distribution Code:.....Blank
Tax Amount Undetermined Code:.....Not checked
Total Distribution Code:.....Not checked
First Year Roth Contribution:.....0000
SEP Indicator:.....IRA/SEP/SIMP box not checked
FATCA Indicator:.....not FATCA
Date of Payment for Reportable Death Benefits under Section 6050Y:..00-00-0000
Tax Withheld:.....\$0.00
Total Employee Contributions:.....\$0.00
Unrealized Appreciation:.....\$0.00
Other Income:.....\$0.00
Gross Distribution:.....\$20,000.00
Taxable Amount:.....\$20,000.00
Eligible Capital Gains:.....\$0.00
Amount to IRR:.....\$0.00

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