Notice to Employee Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tar ctrum. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit. Emmed income credit (BGL), Nou may be able to take the EIC for 2018 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your aivestment income is more than the specified amount for 2018 or if income is carried for services provided while you were an immate at a penal institution. For 2018 in come hims and more information, vist www srs. gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return. Also see Pub. 590, taiment income creater, sur lace una to more una series and series an

Service of the servic Corrected Wage and Tax Sulencient, with the Social Security Administration (SSA) to correct any name. SSN, or morey anomat error reported to the SSA on Form W-2. Be sure to gety our copies of Form W-2: from your employee for all corrections made so you may file them with your tax return. If your name and SSN are correct but march the same as shown on your social security cared, you should ask for a new card that displays your correct name at any SSA office or by calling 800:772-1213. You may alko with the SSA at www.SSA.gov. Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DD is not taxable. Credit for excess taxes. If you had more than one employer in 2018 and more than 57:960.80 in social security and/of TFr 1 raikoard creitement (RRFA) taxes were withheld, you any be able to chim a credit for the eaces against your federal in come tax. If you had more than one raikoad employer and more than 54,746 to 15 for 17 stable.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8999. Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8999.
Box 6. This amount includes the 1.4% Medicare Tax withheld on all Medicare wages and tips show in Box 5. a well as the 0.9% Additional Medicare Tax on any of thoses Medicare wages and tips abox

\$200,000. Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions. You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Or Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that yo

must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits). 8 Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the letters A-F and numerals 0-9. This code assists the IRS in validating the V-2 data submitted with your return. The code is not entered on paper-filed returns. Box 10. This amount includes the total dependent care benefits that your employer piad to you or incurred on your bahil (in childing amounts from a section 125 (cafetonia) planu). Any anomati over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

compute any taxable and nontaxable amounts. Box 11. This amounts is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan or (b) included in box 3 and/or 5 if it is a prior year deferral and era nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of you right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendary year. If you made a deferral and received a distribution to the same calendary year. If you made a deferral and received a distribution to the same calendary year. you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a

Box 12. The following list explains the codes shown in box 12. You may need this information to 100 L 2: The ion/wing isse expansis the codes show in it on L2: for any recurs into a match to complex your target return. Bective deferrals (codes 0), E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$18,500 (\$12,500 if you only have SIMPLE plans): \$21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. \$711). Deferrals under code G are limited to \$18,500. Deferrals under code H are limited to

have SIMPLE plans; S2L2000 for section 40(40) plans if you qualify for the 15-year rule explained in pbs. 571). Deferrals under code fare limited to SIS.00. Deferrals under code H are limited to \$7,000. However, if you were at least age 50 in 2018, your employer may have allowed an additional deferral of up to \$6,000 (33,000 for section 401(4)(11) and 408(p) SIMPLE plans). This additional deferral anount is not subject to the overall limit on decite deferrals. For code G, the limit on decit deferrals may be higher for the last 3 years before you reach retrement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Inclusion in mechanics we are absorbed using the interval M and M. When M is a start of the interval M is M is M and M is a start of the interval M is M. At A, B, B, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made exact deformations for the year shown, not the current year. If no year is shown, the other terms year is shown. The prior is the prior interval of the prior is the prior interval of t a made exces. tributions are for the current ye

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instruction C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social)) urity wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement E—Elective deferrals under a section 403(b) salary reduction agreement

F-Elective deferrals under a section 408(k)(6) salary reduction SEP

2018

2018

G-Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct. J—Nontaxable site hay (information only, not included in boxes 1, 3, or 5) K—20%, excise tax on excess golden parachute payments. See the Form 1040 instructions. L—Substinuitated employee business expense reimbursements (nontaxable) M—Lincollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only).

phyces only). See the Form 1040 instructions. —Excludable moning expense reinhursements paid directly to a member of the U.S. Armed Forces ot included in boxes 1, 3, or 5) —Nontavable combat pay. See the instructions for form 1040 for details on reporting this amount. —Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and ang_Term Care Insurance Contractor. —Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to mpute any taxable and nontaxable amounts. impute any taxable and nontaxable amounts. —Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social currity wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting ouriements.

requirements. W--Emphyser contributions (including amounts the employee elected to contribute using a section 125 (caleteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (188 As)

(HSA8), V—Deferrals under a section 409A nonqualified deferred compensation plan. Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions. AA—Designated Roth contributions under a section 401(k) plan.

Induit matrictions.
 An-Designated Roth contributions under a section 401(k) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Interpretation and the section of the amount reported with Code DD is not the amount reported with Code DD is not the section 457(b) plan. This amount does not pply to contributions under at a governmental section 457(b) plan. This amount does not pply to contributions under at a governmental section 81(b) plan.
 FF-Permittel benefits under a qualified small employer beath reimbursement arrangement GG-Income from qualified entry grams under section 83(b) plan.
 HH-Aggregate deferrals under section 83(c) dections as of the close of the calendar year Box 13. (1the "Retirement plan") how is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement Arrangement (IRA).
 Box 14, Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permitted healted red, notaxiable necome, educational assistance payments, ent a methor of the clergy's parsonge allowance and utilities. Raiload employses use this hox to report allowance tarement (RFA) compression. The Tax, Include tips reported by the employee to the employer in allowat element (RFA) compression.
 Note: Keerg Copy C of Tom W-21 or a least 3 years after the due date for films your income taxe inclusion and as a state and additional Medicar Tax. Include tips headfils, lear O films out any pay or income taxe inclusion and the protest your and additional Age are and a spears after the due date for films your income taxe inclusion and and a spears after the hourdade for films your income taxe.

return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular security.

Form W-2 Wage and Tax Statement

Copy C, for employee's records If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it. Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 c Employer's name, address, and ZIP code Void 0020-19052768 0000110721-LEVEL GSS INFOTECH CT INC b Employer's identification numbe a Employee's social security numbe 2050 HIGHWAY 27 SUITE 201 2 Federal Income tax with 1 Wages, tips, other comp 06-1432821 181-29-9853 71599.75 5057.94 NORTH BRUNSWICK NJ 08902 13 Statutory Employee Retire plan Third-party sick pay 3 Social Security wages 4 Social Security tax with 71599.75 4439.18 12 See Instrs. for Box 12 e Employee's name, address, and ZIP code 5 Medicare wages and tip: 6 Medicare tax withhel 14 Other UI/HC/WD 42.51 71599.75 1038.20 DI 18.99 RAJESH K GOLLA 7 Social Security tips 8 Allocated Tips 6811 OLD CANTON RD VANMARK APA 10 Dependent care benefits 11 Nongualified plans APT 2903 **RIDGELAND MS 39157** Verification Code 0a48-b16c-e330-39e8 15 Sta Employer's state I.D. No 16 State wages, tips, etc 17 State income tax 18 Local wages, tips, etc 19 Local income tax 20 Locality name 61700.43 MS 2562.00 NJ 061-432-821/000 9998.43 198.69

Form W-2 Wage and Tax Statement

Copy C, for employee's records This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction

					may be imposed	on you it this income is taxable and you fail		
d Control number	Vo	oid c Employer	s name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
0020-19052768 000011	0721-LEVEL	GSS IN	FOTECH CT INC					
b Employer's identification number a E	mployee's social security number	[∎] 2050 H	IGHWAY 27 SUITE 20	1				
06-1432821	181-29-9853			-	1 Wages, tips, other compensation	2 Federal Income tax withheld		
13 Statutory Retirement	Third-party		I BRUNSWICK NJ 089	02				
Employee plan	sick pay				3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12 14 Othe	r	e Employee	's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
		RAJES	H K GOLLA		7 Social Security tips	8 Allocated Tips		
		6811 O	LD CANTON RD VAN	MARK APA				
		APT 29	03		10 Dependent care benefits	11 Nonqualified plans		
		PIDCE	LAND MS 39157					
		KIDOL	LAND WIS 59157		Verification Code			
					0a48-b16c-e330-39e8			
15 State Employer's state I.D. No.	16 State wages, tips	s, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
NJ FLI			9.00					
			1	1				

Form W-2 Wage and Tax Statement 2018

Copy B, to be filed with employee's FEDERAL tax return

d Control number			Void	c Employer's	s name, address, and ZI	P code		Denard	Department of the Treasury - Internal Revenue Service						
	020-19052768 0000110721-LEVEL				GSS INFOTECH CT INC					OMB No. 1545-0008					
b Employe	er's identificatio	n number	a Employee's	social security nu	mber	2050 HI	GHWAY 27	SUITE 201		1 100	1 Wages, tips, other compensation 2 Federal Income tax withheld				
	06-1432821 181-29-9853				NORTH	I BRUNSWIC	CK NJ 0890	02	1 wag	es, tips, other compensation 71599.75	2 recerar mcome tax with	5057.94			
13 Statu Emplo		Retirem plan	ent	Third-party sick pay						3 Soci	al Security wages	4 Social Security tax with			
											71599.75		4439.18		
12 See Ins	12 See Instrs. for Box 12 14 Other					e Employee'	s name, address, and ZI	P code		5 Medi	care wages and tips	6 Medicare tax withheld			
	UI/HC/WD 42.51										71599.75		1038.20		
	DI 18.99			18.99	RAJESH K GOLLA					al Security tips	8 Allocated Tips				
						6811 OLD CANTON RD VANMARK APA									
						APT 2903					endent care benefits	11 Nonqualified plans			
						/	LAND MS 39	157							
						KIDUEI		157		Ver	fication Code				
											0a48-b16c-e330-39e8				
15 State	Employe	r's state I.D.	No.	16 State wages,	tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name			
MS					61	1700.43		2562.00							
NJ	NJ 061-432-821/000			9998.43			198.69								

Notice to Employee Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tar ctrum. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit. Emmed income credit (BGL), Nou may be able to take the EIC for 2018 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your aivestment income is more than the specified amount for 2018 or if income is carried for services provided while you were an immate at a penal institution. For 2018 in come hims and more information, vist www srs. gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return. Also see Pub. 590, taiment income creater, sur lace una to more una series and series an

Service of the servic Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2 from W-2 from your employer of all corrections made so you may fit them with your its return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800 772-1213. You may also visit the SSA at www.SSA.gov. **Cost of employer-sponsore the latch coverage** (if such cost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with Code DD is not tasable. **Credit for excess taxes.** If you had more than one employer in 2018 and more than S7.960.80 in social security and/OT TEr 1 raikourd critterian (RRAT) taxes were withhed, you may the able to chain a credit for the excess against your federal in come tax. If you had more than one railroad employer and more than S4.74 AO in Fire 2 RRAT kat was withhed, you asko may be able to chain a credit. See your Form 1040 Instructions and Pub. 505, Tax Wathholding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 5. Your may be required to report this amount on Form 8939, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8939.
Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax to any of those Medicare wages and tips shown

\$220,000.
Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.
You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated it parnount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, a smaller amount If you have records that allocated tips of Form 4137 out will calculate the social security and Medicare Tax owed on the allocated tips shown on your Form(s) W-2 that you for the social security and Medicare tax owed on the allocated tips.

must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits). Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. The only valid characters are the ketters AF and numents (0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns. Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (nc huding amounts from a section 125 (cafderina) plan). Any amount over 55,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Experses, to compute any taxable and nontaxable amounts. Box 11. This amount is (0) a producified in box 13 mid (57(b) plan that heacma taxable for social ascurity and Medicare taxas this year because there is no longer a substantial risk of forferiture of your regist to the deferral amount annoughilder of section 457(b) plan the thecame taxable for social security and Medicare taxas this year because there is no longer a substantial risk of forferiture of your or an earbed and of the caled rand arceived a distribution in the same calendar year. If you made a deferral and a retrieved a distribution in SA-131, you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a

Box 12. The following list explains the codes shown in box 12. You may need this information to Det et au control et al. 2014 de la complete y et al. 2014 de la complete y our tarreturn. Becivité deferrals (codes D, E, F, and S) and designated Rohamanov et al. 2014 (codes AA, BB, and EE) under all plans are generally limited to a total of \$18,500 (\$12,500 if you only) have \$1MPLE blans; \$21,500 for scion 403(b) plans; you qualify for the 15-year rule explained in Pub. \$711, Deferrals under code G are limited to \$18,500. Deferrals under code H are limited to \$100,000 for \$1

have SharrLE pans: Sci. 1000 tot section movely pans as you quark to use or odd Hare limited to 57,000. The pansion of 57,000. However, if you were at least age 50 in 2018, your employer may have allowed an additional deferral of up to 56,000 (53,000 for section 401(b)(11) and 408(p) SIMPLE plans). This additional deferral anount is not subject to the overall limit on decite deferrals may be higher for the last 3 years before you reach retriement age. Contact your plan administrator for more information. Amounts in excess of the overall limit on decite included in income. See the instructions for Form 1040. *Network of work collower of the Discussion High and the Base TE*, you made a make-up pension

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made exc deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the i made excess tributions are for the current ye

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instruction C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social)) urity wage base), and 5)

D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement. E—Elective deferrals under a section 403(b) salary reduction agreement

F-Elective deferrals under a section 408(k)(6) salary reduction SEP

2018

2018

deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct. J—Nontaxable site hay (information only, not included in boxes 1, 3, or 5) K—20%, excise tax on excess golden parachute payments. See the Form 1040 instructions. L—Substinuitated employee business expense reimbursements (nontaxable) M—Lincollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only).

phoyees only). See the Form 1040 instructions. — Excludable moving expense relimbursements paid directly to a member of the U.S. Armed Forces or included in boxes 1, 3, or 5) — Nontavable combat pay. See the instructions for form 1040 for details on reporting this amount. — Employee contributions to your Archer MSA. Report on Form 8853, Archer MSAs and ang_Term Carls Insurance Contracts. — Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

1) T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting reminiments.

requirements. W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

(HSA8), V—Deferrals under a section 409A nonqualified deferred compensation plan. Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions. AA—Designated Roth contributions under a section 401(k) plan.

Induit matrictions.
 An-Designated Roth contributions under a section 401(k) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Interpretation and the section of the amount reported with Code DD is not the amount reported with Code DD is not the section 457(b) plan. This amount does not pply to contributions under at a governmental section 457(b) plan. This amount does not pply to contributions under at a governmental section 81(b) plan.
 FF-Permittel benefits under a qualified small employer beath reimbursement arrangement GG-Income from qualified entry grams under section 83(b) plan.
 HH-Aggregate deferrals under section 83(c) dections as of the close of the calendar year Box 13. (1the "Retirement plan") how is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement Arrangement (IRA).
 Box 14, Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permitted healted red, notaxiable necome, educational assistance payments, ent a methor of the clergy's parsonge allowance and utilities. Raiload employses use this hox to report allowance tarement (RFA) compression. The Tax, Include tips reported by the employee to the employer in allowat element (RFA) compression.
 Note: Keerg Copy C of Tom W-21 or a least 3 years after the due date for films your income taxe inclusion and as a state and additional Medicar Tax. Include tips headfils, lear O films out any pay or income taxe inclusion and the protest your and additional Age are and a spears after the due date for films your income taxe inclusion and and a spears after the hourdade for films your income taxe.

P=-Elective deferrals under a section 408/k)(6) salary reduction SEP G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) social security benefits, just in case there is a question about your work record and/or earnings in a deferred compensation plan

Form W-2 Wage and Tax Statement

Copy B, to be filed with employee's FEDERAL tax return

b Employer's identi					c Employer's name, address, and ZIP code GSS INFOTECH CT INC 2050 HIGHWAY 27 SUITE 201					Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 1 Wages, tips, other compensation 2 Federal Income tax withheld			
13 Statutory Employee		etirement	Third-party sick pay		NORTH BRUNSWICK NJ 08902				3 Socia	al Security wages	4 Social Security tax withheld		
12 See Instrs. for B	2 See Instrs. for Box 12 14 Other					's name, address, and ZIP code	•		5 Medi	care wages and tips	6 Medicare tax withheld		
					RAJESH K GOLLA 6811 OLD CANTON RD VANMARK APA					7 Social Security tips 8 Allocated Tips			
				APT 2903					10 Dep	endent care benefits	11 Nonqualified plans		
				RIDGELAND MS 39157				Verification Code					
										0a48-b16c-e330-39e8			
15 State Em NJ FLI	ployer's sta	te I.D. No.	16 State wages,	tips, etc.		17 State income tax	9.00	18 Local wages, tips, etc.		19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement

Copy 2, to be filed with employee's tax return for MS

		-													
d Control		2 00	00110721	IEVEI	Void	c Employer's name, address, and ZIP code GSS INFOTECH CT INC					Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
0020-19052768 0000110721-LEVEL						1022 11	FUIECHCI	i inc							
b Employ	/er's identificat	ion numbe	r a Employee	's social security nu	umber	2050 H	IGHWAY 27	/ SUITE 201		1 Want	s, tips, other compensation	2 Federal Income tax with	bhold		
06-1432821 181-29-9853					NORTI	H BRUNSWI	CK NI 0890	12	i wage	71599.75		5057.94			
	utory		ement	Third-party		NORT	I DRUINS WI	CK NJ 0070	12						
Empl	Employee plan sick pay									3 Socia	al Security wages 71599.75	4 Social Security tax withheld 4439.18			
12 See In	12 See Instrs. for Box 12 14 Other					e Employee's name, address, and ZIP code					care wages and tips	6 Medicare tax withheld			
											71599.75		1038.20		
						RAJES	H K GOLLA			7 Socia	I Security tips	8 Allocated Tips			
						6811 O	6811 OLD CANTON RD VANMARK APA APT 2903								
						APT 29					endent care benefits	11 Nonqualified plans			
			1			RIDGELAND MS 39157									
					Verification Code										
15 State Employer's state I.D. No. 16 S				16 State wages,	s, tips, etc		17 State income ta	ix	18 Local wages, tips, etc.		19 Local income tax	20 Locality name			
MS					6	1700.43		2562.00	1						
									l						
									i						

Form W-2 Wage and Tax Statement 2018

Copy 2, to be filed with employee's tax return for NJ

d Control number V			Void	c Employer's name, address, and ZIP code					Department of the Treasury - Internal Revenue Service						
	20-19052768 0000110721-LEVEL b Employee's social security number a Employee's social security number				GSS INFOTECH CT INC					OMB No. 1545-0008					
b Employ	/er's identificati	ion number	a Employee's	social security nu	mber	2050 HI	IGHWAY 27 SUIT	E 201		1 1000	1 Wages, tips, other compensation 2 Federal Income tax withheld				
	06-1432821 181-29-9853				NORTH	BRUNSWICK NJ	0890	2	i wage	71599.75		5057.94			
				Third-party sick pay					-	3 Socia	al Security wages	4 Social Security tax with	neld		
											71599.75		4439.18		
12 See In	12 See Instrs. for Box 12 14 Other					e Employee's name, address, and ZIP code					care wages and tips	6 Medicare tax withheld			
			/HC/WD		42.51						71599.75		1038.20		
	DI 18.99			18.99	RAJESH K GOLLA					al Security tips	8 Allocated Tips				
						6811 OLD CANTON RD VANMARK APA									
						APT 29	03			10 Dep	endent care benefits	11 Nonqualified plans			
							LAND MS 39157								
						RIDUL	LAND WIS STIST			Verit	fication Code				
15 State Employer's state I.D. No. 16 State wages, tips, etc.				. 17 State income tax 18 Local wages, tips, etc.					19 Local income tax	20 Locality name					
NJ	NJ 061-432-821/000		9	9998.43	19	8.69									
NJ	FLI							9.00							