

Copy B To Be Filed With Employee's FEDERAL Tax Return.		2017 OMB No. 1545-0008	
a Employee's SSN 200-19-7979	1 Wages, tips, other comp. 94854.20	2 Federal income tax withheld 16063.00	
b Employer ID no. (EIN) 77-0561842	3 Social security wages 94854.20	4 Social security tax withheld 5880.96	
c Employer's name, address, and ZIP code SRIVEN INFOSYS INC 43-14, MAIN STREET 3RD FLOOR FLUSHING NY 11355		5 Medicare wages and tips 94854.20	6 Medicare tax withheld 1375.39
d Control number			
e Employee's name, address, and ZIP code SRIKANTH KASAMOLU 1189 NE 89 AVE APT # 205 HILLSBORO OR 97006		Suff.	
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee	14 Other	12b Code	
Retirement Plan		12c Code	
Third-party sick pay		12d Code	
OR 1386284-9	94854.20	6933.00	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement  
This information is being furnished to the Internal Revenue Service.

Dept. of the Treasury - IRS

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.		2017 OMB No. 1545-0008	
a Employee's SSN 200-19-7979	1 Wages, tips, other comp. 94854.20	2 Federal income tax withheld 16063.00	
b Employer ID no. (EIN) 77-0561842	3 Social security wages 94854.20	4 Social security tax withheld 5880.96	
c Employer's name, address, and ZIP code SRIVEN INFOSYS INC 43-14, MAIN STREET 3RD FLOOR FLUSHING NY 11355		5 Medicare wages and tips 94854.20	6 Medicare tax withheld 1375.39
d Control number			
e Employee's name, address, and ZIP code SRIKANTH KASAMOLU 1189 NE 89 AVE APT # 205 HILLSBORO OR 97006		Suff.	
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee	14 Other	12b Code	
Retirement Plan		12c Code	
Third-party sick pay		12d Code	
OR 1386284-9	94854.20	6933.00	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

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 if this income is taxable and you fail to report it.

REV 01/12/18 QBDT

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employees).		2017 OMB No. 1545-0008	
a Employee's SSN 200-19-7979	1 Wages, tips, other comp. 94854.20	2 Federal income tax withheld 16063.00	
b Employer ID no. (EIN) 77-0561842	3 Social security wages 94854.20	4 Social security tax withheld 5880.96	
c Employer's name, address, and ZIP code SRIVEN INFOSYS INC 43-14, MAIN STREET 3RD FLOOR FLUSHING NY 11355		5 Medicare wages and tips 94854.20	6 Medicare tax withheld 1375.39
d Control number			
e Employee's name, address, and ZIP code SRIKANTH KASAMOLU 1189 NE 89 AVE APT # 205 HILLSBORO OR 97006		Suff.	
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee	14 Other	12b Code	
Retirement Plan		12c Code	
Third-party sick pay		12d Code	
OR 1386284-9	94854.20	6933.00	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.		2017 OMB No. 1545-0008	
a Employee's SSN 200-19-7979	1 Wages, tips, other comp. 94854.20	2 Federal income tax withheld 16063.00	
b Employer ID no. (EIN) 77-0561842	3 Social security wages 94854.20	4 Social security tax withheld 5880.96	
c Employer's name, address, and ZIP code SRIVEN INFOSYS INC 43-14, MAIN STREET 3RD FLOOR FLUSHING NY 11355		5 Medicare wages and tips 94854.20	6 Medicare tax withheld 1375.39
d Control number			
e Employee's name, address, and ZIP code SRIKANTH KASAMOLU 1189 NE 89 AVE APT # 205 HILLSBORO OR 97006		Suff.	
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee	14 Other	12b Code	
Retirement Plan		12c Code	
Third-party sick pay		12d Code	
OR 1386284-9	94854.20	6933.00	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS