<b>b</b> Employer identification number (EIN)	72-0542904	1	<b>12a</b> See i	nstructions for b	ox 12	1 Wages, tips, other compe	nsation	2 Federal inco	me tax withheld
c Employer's name, address, and ZIP code	72-03-270-	9	c C	\$	37.48	9015	50.19		9942.97
ACCENTURE, LLP		1	12b		7721 02	3 Social security wages		4 Social secur	ity tax withheld
CLUTTE 100		000	D 12c	\$	7731.03		31.22	0.14 11 1	6068.64
SUITE 100		S	V	\$	582.88	5 Medicare wages and tips	31.22	6 Medicare tax	1419.28
6415 BABCOCK ROAD		1	12d			7 Social security tips	01.22	8 Allocated tip	
SAN ANTONIO, TX 78249  e Employee's first name and initial	Last name	Suff.		\$	0829.02	-			
	of 1	Suii.	12e ⊱	le.		9 Verification Code		10 Dependent	care benefits
Naveen Kumar		-	This informat	l ひ tion is being furnished	I to the				
APT 2G			Internal Reve	enue Service.		11 Nonqualified plans		13 Statutory employee	Retirement Third-party plan sick pay
1800 W 76TH STREET			Copy I	B To Be File	ed With				X
RICHFIELD, MN 55423			Emplo	yee's FEDI		14 Other			
			Tax Re	eturn					
		T T	a Employ	ee's social secu	rity number	-			
f Employee's address and ZIP code	T			202-59-6780					
15 State Employer's state ID number MN 2684759	16 State wages, tips, etc. 90150.19	17 State income ta:	x 737.74	18 Local wages	, tips, etc.	19 Local income tax	20 Locality	name	
1411   2004/32	<del> </del>	<del>-</del>	37.74			† – – – – -	† – –		
Form W-2 Wage and Tax Statement 2017	Department of the Treasu	l ırv–Internal Revenue	e Service	OMB#	1545-0008	Copy B	o Be Filed	With Employee'	s FEDERAL Tax Return
b Employer identification number (EIN) c Employer's name, address, and ZIP code	72-0542904		12a		37.48	1 Wages, tips, other compe	nsation 50.19	2 Federal inco	me tax withheld 9942.97
ACCENTURE, LLP			C 12b	\$	37.40	3 Social security wages	0.19	4 Social secur	
		S	C	\$	7731.03		81.22	4 Social Secul	6068.64
SUITE 100		1	12c	Ų.		5 Medicare wages and tips		6 Medicare tax	
6415 BABCOCK ROAD		L.	<sup>a</sup> V	\$	582.88	978	81.22		1419.28
SAN ANTONIO, TX 78249			12d DD	10 1	0829.02	7 Social security tips		8 Allocated tip	s
e Employee's first name and initial	Last name	0#	្ត DD 12e	\$ 1	0027.02				
1	of 1	Cos	cgg	\$		9 Verification Code		10 Dependent	care benefits
Naveen Kumar						44 Norwelffed alone		40 Statutory	Retirement Third-party
APT 2G						11 Nonqualified plans		13 Statutory employee	plan sick pay
1800 W 76TH STREET			Copy 2	To Be Filed	With	14 Other			Δ
RICHFIELD, MN 55423				ee's STATE,					
				Income Tax					
				ee's social secu	rity number				
f Employee's address and ZIP code  15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		202-59-6780 18 Local wages	. tips. etc.	19 Local income tax	20 Locality	name	
MN 2684759	90150.19		737.74		,		_ Locality	namo	
						T	T		
Form W-2 Wage and Tax Statement 2017	Department of the Treasur	lata and Davis		0140 # 45		Cany 2 To Be Filed With Fr		TATE CITY or LC	OCAL Income Tax Return
		ry-internal Revenue	Service	OMB # 15	15-0008	Copy 2 to be riled with El	nployee's S	IAIL, OII I OI LO	
- <u></u>				OMB # 154	15-0008	Copy 2 to Be Fried With El	nployee's S		
<b>b</b> Employer identification number (EIN)	72-0542904		12a	OMB # 15		1 Wages, tips, other compe	ensation		me tax withheld
c Employer's name, address, and ZIP code			<b>12a</b> ♀ C	\$	37.48	1 Wages, tips, other compe		2 Federal inco	me tax withheld 9942.97
			12a C 12b	\$	37.48	1 Wages, tips, other compe 901 3 Social security wages	ensation 50.19	2 Federal inco	me tax withheld 9942.97 ity tax withheld
c Employer's name, address, and ZIP code ACCENTURE, LLP		Control		\$		1 Wages, tips, other compe 901 3 Social security wages 978	ensation	2 Federal inco	me tax withheld 9942.97 ity tax withheld 6068.64
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100		Control	12a C 12b	\$	37.48	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips	ensation 50.19	2 Federal inco	me tax withheld 9942.97 ity tax withheld 6068.64
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100 6415 BABCOCK ROAD		Control	12a 6 C 12b 6 D 12c 6 V	\$	37.48 7731.03 582.88	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips	ensation 50.19	2 Federal inco	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249	72-0542904	Constitution	12a © C 12b 0 D 12c V 12d © DD	\$  \$  \$	37.48 7731.03	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial		Constitution	12a 6 C 12b 6 D 12c 6 V	\$  \$  \$  \$	37.48 7731.03 582.88	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax	me tax withheld 9942.97 ity tax withheld 6068.64 withheld 1419.28
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904	Constitution	12a © C 12b 0 D 12c V 12d © DD	\$	37.48 7731.03 582.88	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904	Constitution	12a © C 12b 0 D 12c V 12d © DD	\$  \$  \$  \$	37.48 7731.03 582.88	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904	Suff.	12a C 12b D 12c V 12d S D D 12d S D D 12e	\$  \$  \$  \$	37.48 7731.03 582.88 0829.02	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent	me tax withheld 9942.97 ity tax withheld 6068.64  withheld 1419.28 s care benefits
c Employer's name, address, and ZIP code ACCENTURE, LLP SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial Naveen Kumar APT 2G	72-0542904	Suff.	12a C 12b D 12c V 12d DD 12e Copy 2 Employ	\$  \$  \$  \$ 1  \$	37.48 7731.03 582.88 0829.02 With	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET	72-0542904	Suff.	12a C 12b D 12c V 12d DD 12e Copy 2 Employ LOCAL	\$  \$  \$  \$  \$  \$ To Be Filed yee's STATE, Income Tax	37.48 7731.03 582.88 0829.02 With CITY or: Return	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423	72-0542904	Suff.	12a C 12b D 12c V 12d DD 12e Copy 2 Employ LOCAL	\$  \$  \$  \$  \$  To Be Filed (ree's STATE). Income Tax	37.48 7731.03 582.88 0829.02 With CITY or: Return	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code	72-0542904  Last name of 1	Suff.	Copy 2 Employ	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans	81.22 81.22	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423	72-0542904	Suff.	Copy 2 Employ	\$  \$  \$  \$  \$  To Be Filed (ree's STATE). Income Tax	37.48 7731.03 582.88 0829.02 With CITY or Return	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans	ensation 50.19	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State   Employer's state ID number	72-0542904  Last name of 1  16 State wages, tips, etc.	Suff.	12a  12b  12b  D  12c  D  12d  D  12d  D  12d  D  12e  L  Copy 2  Employ  LOCAL  a Employvix	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans	81.22 81.22	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State   Employer's state ID number	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19	Suff.	12a C 12b D 12c V 12d D 12e S D D 12e S D D 12e S T D D 12e S T D D 12e S T D D D 12e S T D D D D D D D D D D D D D D D D D D	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans	nsation 50.19 81.22 81.22 20 Locality	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 k withheld 1419.28 s care benefits  Relivement plan Sick play Sick play
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur	Suff.	12a  12b  12b  12c  V 12d  DD  12e  Employ  LOCAL  a Employ  a Employ  Service	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return tity number tity number	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other	20 Locality mployee's S'	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 k withheld 1419.28 s care benefits  Relivement plan Sick play Sick play
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19	Suff.	12a  12b  12b  12c  V 12d  DD  12e  Employ  LOCAL  a Employ  a Employ  Service	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return tity number tity number	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other	20 Locality mployee's S'	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 k withheld 1419.28 s care benefits  Retrement Third-party plan sick pay
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN)	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur	Suff.	12a C 12b D 12c V 12d D 12e C 12c C	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or: Return rity number, tips, etc. 45-0008 0x 12 37.48	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other	20 Locality	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 x withheld 1419.28 s care benefits  Retirement Third-party plan sick pay year.
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur	Suff.	Copy 2 Employ LOCAL a Employ Service 12a See ii	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number , tips, etc.	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax Copy 2 To Be Filed With Ending Social Security wages 901:	20 Locality	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  7 name  7 TATE, CITY or LCC 2 Federal inco 4 Social secur	me tax withheld 9942.97 ity tax withheld 6068.64 withheld 1419.28 s  care benefits  Retirement Third-party plan Sock pay 2000 So
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur	Suff.	Copy 2 Employ LOCAL a Employa Service 12a See in C 12b D 12c Copy 2 Employ LOCAL a Employa C 12a See in C 12b D 12c	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number , tips, etc.	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 901: 3 Social security wages 978:	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Reterement Third-party plan sick pay X   CCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld c withheld
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur	Suff.	Copy 2 Employ LOCAL a Employ Service 12a See ii	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or: Return rity number, tips, etc. 45-0008 0x 12 37.48	1 Wages, tips, other compey 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Er 1 Wages, tips, other compey 901: 3 Social security wages 978: 5 Medicare wages and tips 978:	20 Locality mployee's S' msation 50.19	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  7 name  7 TATE, CITY or LC 2 Federal inco 4 Social secur 6 Medicare tax	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Reterement Third-party plan sick pay X   CCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasu 72-0542904	Suff.	Copy 2 Employ LOCAL a Employ Tag Service Tag See in C Tag V	\$  \$  \$  \$  \$  To Be Filed vee's STATE. Income Tax ee's social secu 202-59-6780  OMB # 15- Instructions for b  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number , tips, etc.	1 Wages, tips, other compe 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 901: 3 Social security wages 978:	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  7 name  7 TATE, CITY or LCC 2 Federal inco 4 Social secur	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Reterement Third-party plan sick pay X   CCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name	Suff.	Copy 2 Employ LOCAL a Employ xx 737.74 Service 12a See in C 12b D D	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number 45-0008 00x 12 37.48 7731.03	1 Wages, tips, other compey 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Error 901: 3 Social security wages 978: 5 Medicare wages and tips 978: 7 Social security tips	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  7 name 2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64  (withheld 1419.28  s  care benefits  Retrement Third-party plan Sick pay X   DCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 (withheld 1419.28
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasu 72-0542904	Suff.  17 State income ta 57.  ry-Internal Revenue	12a	\$  \$  \$  \$  \$  \$  To Be Filed Pree's STATE, Income Taxee's social secu 202-59-6780   B Local wages	37.48 7731.03 582.88 0829.02 With CITY or Return rity number ox 12 37.48 7731.03 582.88 0829.02	1 Wages, tips, other compey 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Er 1 Wages, tips, other compey 901: 3 Social security wages 978: 5 Medicare wages and tips 978:	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  7 name  7 TATE, CITY or LC 2 Federal inco 4 Social secur 6 Medicare tax	me tax withheld 9942.97 ity tax withheld 6068.64  (withheld 1419.28  s  care benefits  Retrement Third-party plan Sick pay X   DCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 (withheld 1419.28
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name	Suff.	Table informed Tebrum a need to see in the information and the informed Tebrum a need to see in the information and the information	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number of Return rity number of Return rity number of Section 12 37.48 7731.03 582.88 0829.02	1 Wages, tips, other compey 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Error 901: 3 Social security wages 978: 5 Medicare wages and tips 978: 7 Social security tips	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee  7 name 2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Retirement Third-party plan Sick pay 2000 S
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name	Suff.	Table informati Service Copy 2 Employs LOCAL a	\$  \$  \$  \$  \$  \$   To Be Filed / Yee's STATE, Income Tax ee's social secu 202-59-6780  18 Local wages  OMB # 15- Instructions for b  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number of Return rity number of Section 12 37.48 7731.03 582.88 0829.02	1 Wages, tips, other compeyon 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Er 1 Wages, tips, other compeyon: 3 Social security wages 978: 5 Medicare wages and tips 978: 7 Social security tips  9 Verification Code 11 Nonqualified plans	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  7 name 2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64 withheld 1419.28 s.  Care benefits  Reference Tax Return  DCAL Income Tax Return  me tax withheld 9942.97 ity tax withheld 6068.64 withheld 1419.28 s.
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name	Suff.	Copy 2 Employ LOCAL a Employ T2a See in Copy T2b Service T12b Service T12c See in Copy T2d See	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number 15, tips, etc. 15,0008 0x 12 37.48 0829.02 0 the Internal to fife a tax, yazable and you over the control of t	1 Wages, tips, other compeyon 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Er 1 Wages, tips, other compeyon: 3 Social security wages 978: 5 Medicare wages and tips 978: 7 Social security tips  9 Verification Code 11 Nonqualified plans	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee  7 name 2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Referent Third-party sick pay 200.000 (200.0
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name	Suff.	Copy 2 Employ LOCAL a Employ T2a See in C 12b COPY C C COPY C C C C C C C C C C C C C C C C C C C	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number 15, tips, etc. 15,0008 0x 12 37.48 0829.02 0 the Internal to fife a tax, yazable and you over the control of t	1 Wages, tips, other compeyon 901 3 Social security wages 978 5 Medicare wages and tips 978 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Er 1 Wages, tips, other compeyon: 3 Social security wages 978: 5 Medicare wages and tips 978: 7 Social security tips  9 Verification Code 11 Nonqualified plans	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee  7 name 2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Referent Third-party sick pay 200.000 (200.0
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name	Suff.	Copy 2 Employe  Copy 2 Employe  Experiment of the information of tail to report it  Copy Copy Copy Copy Copy Copy Copy Copy	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 2731.03 582.88 0829.02 With CITY or Return fity number of Return fit number o	1 Wages, tips, other compension of the policy of the polic	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee  7 name 2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Referent Third-party sick pay 200.000 (200.000)  DCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name	Suff.	Table of the property of the p	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 2731.03 582.88 0829.02 With CITY or Return fity number of Return fit number o	1 Wages, tips, other compension of the policy of the polic	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee  7 name 2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Referent Third-party sick pay 200.000 (200.000)  DCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name of 1	Suff.  17 State income ta 57.  ry-Internal Revenue	Copy 2 Employed  Service  12a See in C  12b  DD  12c  DD  12e  Copy 2 Employ LOCAL  a Employed  X737.74  Service  12a See in C  12b  DD  12c  DD  12c  CD  CD  CD  CD  CD  CD  CD  CD  CD  C	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number of the lineral to file a tax sanction may awake and you OYEE'S ottice to	1 Wages, tips, other compension of the policy of the polic	20 Locality pployee's S'	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  TATE, CITY or LC 2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Referent Third-party sick pay 200.000 (200.000)  DCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasu 72-0542904  Last name of 1	Suff.  17 State income ta 57.  ry-Internal Revenue	This informati Revenue Ser return, a negal to reprut return, a negal to return a few to return a negal to reprut return, a negal to return a negal to re	\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number of the lineral to file a tax sanction may awake and you OYEE'S ottice to	1 Wages, tips, other compension of the policy of the polic	20 Locality photosics in the control of the control	2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee  TATE, CITY or LC 2 Federal inco 4 Social secur 6 Medicare tax 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Referent Third-party sick pay 200.000 (200.000)  DCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits
c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number MN 2684759  Form W-2 Wage and Tax Statement 2017 b Employer identification number (EIN) c Employer's name, address, and ZIP code ACCENTURE, LLP  SUITE 100 6415 BABCOCK ROAD SAN ANTONIO, TX 78249 e Employee's first name and initial  Naveen Kumar APT 2G 1800 W 76TH STREET RICHFIELD, MN 55423  f Employee's address and ZIP code 15 State Employer's state ID number	72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19  Department of the Treasur 72-0542904  Last name of 1  16 State wages, tips, etc. 90150.19	Suff.  17 State income ta  Suff.  17 State income ta  57	Copy 2 Employer a Empl	\$   \$   \$   \$   \$   \$   \$   \$   \$   \$	37.48 7731.03 582.88 0829.02 With CITY or Return rity number of the lineral to file a tax sanction may awake and you OYEE'S ottice to	1 Wages, tips, other compension of the policy of the polic	20 Locality mployee's S'- nsation 50.19  20 Locality 21 Locality 22 Locality 23 Locality 24 Locality	2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee  TATE, CITY or LC 2 Federal inco 4 Social secur 6 Medicare ta 8 Allocated tip 10 Dependent 13 Statutory employee	me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits  Referent Third-party sick pay 200.000 (200.000)  DCAL Income Tax Return me tax withheld 9942.97 ity tax withheld 6068.64 c withheld 1419.28 s care benefits

## **Notice to Employee**

**Do you have to file?** Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't 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.

Earned income credit (EIC). You may be able to take the EIC for 2017 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2017 or if income is earned for services provided while you were an inmate at a penal institution. For 2017 income limits and more information, visit www.irs.gov/eitc. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

**Clergy and religious workers**. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

**Corrections.** If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, 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-2c from your employer for all corrections made so you may file them with your tax 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 1-800-772-1213. You also may visit 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 2017 and more than \$7,886.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,630.50 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 or Form 1040A instructions and Pub. 505, Tax Withholding 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**. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959

**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 on any of those Medicare wages and tips above \$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. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you 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. 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 (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount 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 under a 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 your right to the deferred amount. This box should not be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and 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 copy.

**Box 12**. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$18,000 (\$12,500 if you only have SIMPLE plans; \$21,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$18,000. Deferrals under code H are limited to \$7,000.

## Instructions for Employee

However, if you were at least age 50 in 2017, your employer may have allowed an additional deferral of up to \$6,000 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the "Wages, Salaries, Tips, etc." line instructions for Form 1040.

**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 excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

- **A-** Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form 1040 instructions.
- $\mbox{\bf B-}$  Uncollected Medicare tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form 1040 instructions.
- C- Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security 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
- **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 "Adjusted Gross Income" in the Form 1040 instructions for how to deduct.
- $\mbox{\bf J-}$  Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)
- K- 20% excise tax on excess golden parachute payments. See "Other Taxes" in the Form 1040 instructions.
- L- Substantiated employee business expense reimbursements (nontaxable)
- M- Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.
- N- Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.

- P- Excludable moving expense reimbursements paid directly to employee (not included in boxes 1, 3, or 5)
- **Q-** Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A for details on reporting this amount.
- **R-** Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.
- S- 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 requirements.
- **W-** Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).
- Y- 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 "Other Taxes" in the Form 1040 instructions.
- **AA** Designated Roth contributions under a section 401(k) plan.
- **BB** Designated Roth contributions under a section 403(b) plan.
- DD Cost of employer-sponsored health coverage. The amount reported with Code DD is not taxable.
- **EE** Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.
- Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).
- Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

**Note:** Keep **Copy**  $\hat{\mathbf{C}}$  of Form W-2 for at least 3 years after the due date for filing your income tax 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 year.