2017 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement Copy C for employee's record Control number Corp. Employer use only 001037 PITT/IRL 314

Employer's name, address, and ZIP code MIRACLE SOFTWARE SYSTEMS INC

45625 GRAND RIVER AVENUE **NOVI MI 48374**

Batch #01674

e/f Employee's name, address, and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

b	Emplo	yer's FED ID number	а	Emp			A number	
		<u>38-3256847</u>			_1	<u> 58-19-(</u>	<u>6036</u>	
1	Wage	s, tips, other comp.	2	Fede	ral	income	tax withhel	d
		118052.10					13756.42	
3	Social	security wages	4	Soci	al:	security	tax withheld	<u>.</u>
		118052.10					7319.23	
5	Medic	are wages and tips	6	Med	ica	re tax wi	thheld	
		118052.10					1711.76	
7	Social	security tips	8 Allocated tips					
9		ation Code	10 Dependent care benefits					
	af6e-	65b0-599c-45b0						
11	Nongu	alified plans	12	a See i	nstr	uctions fo	r box 12	
	•	•		С			38.20	
11	Other			p DE)	1	4628.00	
14	Other	22.21 SUI	12	С				
		22.21 501	12	d	T			
			13	Stat e	mp	Ret. plan	3rd party sick	pay
15	State	Employer's state ID no	16	State	e w	ages, tip	s, etc.	_
		TOTAL STATE						
47	State i	ncome tax	18	Loca	ıl w	ages, tip	s, etc.	
17								
17		3787.17					29453.70	
	Local	3787.17 income tax 294.54	20	Loca	lity	y name	29453.70	

1	Wages, tips, other comp. 118052.10			2 Federal income tax withheld 13756.42			
3	Social security wag 1180		4 Social security tax withheld 7319.23				
5	5 Medicare wages and tips 118052.10			Medica	are tax with	held 1711.76	
d	Control number	Dept.	С	Corp.	Employe	r use only	
00	01037 PITT/IRL 314				Α	58	
_	C Employer's name address and ZID code						

MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

b	Employer's FED ID number 38-3256847	a Employee's SSA number 158-19-6036				
7	Social security tips	8 Allocated tips				
9	Verification Code af6e-65b0-599c-45b0	10 Dependent care benefits				
11	Nonqualified plans	12a See instructions for box 12 C 38.20				
14	Other	^{12b} DD	14628.00			
	22.21 SUI	12c				
		12d				
		13 Stat em	np. Ret. plan 3rd party sick pay			
			-			

e/f Employee's name, address and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

	15 State Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.
Τ	17 State income tax	18 Local wages, tips, etc.
L	3787.17	29453.70
	19 Local income tax	20 Locality name
L	294.54	220401
Τ	Federal Fili	ng Copy

Filing Wage and

Statement OMB N
Copy B to be filed with employee's Federal Income Tax Return This blue Earnings Summary section is included with your W-2 to help describe portions in more detail. The reverse side includes general information that you may also find helpful.

1. The following information reflects your final 2017 pay stub plus any adjustments submitted by your employer.

		,		,,	J
Gross Pay	127121.90	Social Security Tax Withheld	7319.23	WI. State Income Tax Box 17 of W-2	2882.94
		Box 4 of W-2		Local Income Tax	294.54
Fed. Income	13756.42	Medicare Tax	1711.76	Box 19 of W-2	
Tax Withheld	13730.42	Withheld	1711.76	SUI/SDI	22.21
Box 2 of W-2		Box 6 of W-2		Box 14 of W-2	

2. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	WI. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	127,121.90	127,121.90	127,121.90	52,564.02
Plus GTL (C-Box 12)	38.20	38.20	38.20	22.50
Less Other Cafe 125	9,108.00	9,108.00	9,108.00	3,795.00
Reported W-2 Wages	118,052.10	118,052.10	118,052.10	48,791.52

3. Employee W-4 Profile. To change your Employee W-4 Profile Information, file a new W-4 with your payroll dept.

RAVINDER SATHU 2010 HURON CIRCLE GRAFTON WI 53024

Social Security Number: 158-19-6036 Taxable Marital Status: MARRIED Exemptions/Allowances:

Federal income tax withheld

13756.42

FEDERAL: 5 STATE:

118052.10

Wages, tips, other comp

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1	Wages, tips, other of		2 Federa	x withheld 3756.42	
3	Social security wag		4 Social security tax withheld 7319.23		
5	Medicare wages an 1180	6 Medica	are tax with	held 1711.76	
d	Control number	Dept.	Corp.	Employe	r use only
00	1037 PITT/IRL	314		Α	58

c Employer's name, address, and ZIP code

MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

b	Employer's FED ID number 38-3256847	a Employee's SSA number 158-19-6036				
7	Social security tips	8 Allocated tips				
9	Verification Code	10 Dependent care benefits				
11	Nonqualified plans	12a	С		22.50	
14	Other	12b	DD	1	4628.00	
		12c	i			
		12d	T i			
		13 St	at emp.	Ret. plan	3rd party sick pay	

e/f Employee's name, address and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

	15 State Employer's state ID no. WI 036102587148003			16 State wages, tips, etc. 48791.52					
Ī	17 State income tax			18 Local wages, tips, etc.					
		2882.9	94						
	19 Local	income tax		20 Localit	y name				
ı[WI.State	Refe	erence	Сору				
- 1									

Wage and Tax Statement employee's State Income Tax Retui

15 State Ei	mployer's state ID no 6102587148003	. 16	State wages, tips, etc. 48791.52
17 State inc	come tax	18	Local wages, tips, etc.
	2882.94		
19 Local in	come tax	20	Locality name
	WI.State Fili	ng	Сору
\M_2	Wage a	nd	Tax 2017

Statement

Copy 2 to be filed with employee's State Income Tax

3 Social security wages 118052.10 4 Social security tax withheld 7319.23 Medicare wages and tips 118052.10 Medicare tax withheld 1711.76 d Control number Dept. Employer use only 001037 PITT/IRL 314 58 c Employer's name, address, and ZIP code

MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

b	Employer's FED ID number 38-3256847	a Employee's SSA number 158-19-6036					
7	Social security tips	8 Allocated tips					
9	Verification Code	10 De	pende	ent care	benefits		
11	Nonqualified plans		C		22.50		
14	Other	^{12b} D	D T	1-	4628.00		
		12c	i				
		12d	i				
		13 Sta	at emp.	Ret. plan	3rd party sick pay		
				-			

e/f Employee's name, address and ZIP code

RAVINDER SATHU

2010 HURON CIRCLE

GRAFTON WI 53024

2017 W-2 and EARNINGS SUMMARY

PA.State Reference Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Control number Employer use only Dept. Corp. PITT/IRL 314

Employer's name, address, and ZIP code MIRACLE SOFTWARE SYSTEMS INC

45625 GRAND RIVER AVENUE **NOVI MI 48374**

Batch #01674

e/f Employee's name, address, and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

Emplo			а	a Employee's SSA number 158-19-6036			
Wage	s, tips	, other comp.	2	Fed	era	l income	tax withheld
		118052.10					13756.42
Socia	l secu	rity wages 118052.10	4	· occiai cocainty tax minimola			tax withheld 7319.23
Medic	are wa	ages and tips 118052.10	6	6 Medicare tax withheld 1711.76			
Social	secu	rity tips	8 Allocated tips				
Verific	ation	Code	10 Dependent care benefits				benefits
Nonqu	ualified	d plans		(ructions fo	r box 12 10.34
Other				-	+		
		22.21 PA SUI		_	+		
					emp	. Ret. plan	3rd party sick pay
			o. 16	Stat	e w	ages, tip	s, etc. 29453.70
17 State income tax 904.23 19 Local income tax			18	Loc	al w	/ages, tip	os, etc.
			20	Loc	alit	v name	
	Wage Socia Medic Social Verific Nonqu Other	38-3 Wages, tips Social secur Medicare wa Social secur Verification Nonqualified Other State Empl PA 9074 State incom	Social security wages 118052.10 Medicare wages and tips 118052.10 Social security tips Verification Code Nonqualified plans Other 22.21 PA SUI State Employer's state ID no 9074 3418 State income tax 904.23	38-3256847 2	38-3256847 Wages, tips, other comp. 2 Fed	38-3256847 2 Federa 18052.10 3 Social security wages 118052.10 4 Social 118052.10 6 Medicare wages and tips 118052.10 8 Allocat Alloca	158-19- 2 Federal income 118052.10 2 Federal income 118052.10 3 Social security wages 118052.10 4 Social security 118052.10 6 Medicare tax wing 118052.10 8 Allocated tips 118052.10 8 Allocated tips 120 1

Wages, tips, other comp 2 Federal income tax withheld 118052.10 13756.42 3 Social security wages 118052.10 4 Social security tax withheld 7319.23 Medicare wages and tips 118052.10 6 Medicare tax withheld 1711.76 Control number Dept Employer use only 001037 PITT/IRL 59

Employer's name, address, and ZIP code

MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

b Employer's FED ID number 38-3256847	a Employee's SSA number 158-19-6036				
7 Social security tips	8 Allocated tips				
9 Verification Code	10 Dependent care benefits				
11 Nonqualified plans	12a See instructions for box 12 C 10.34				
14 Other	12b				
22.21 PA SUI	12c				
	12d				
	13 Stat emp. Ret. plan 3rd party sick pay				
" - · · · · · · · · · · · · · · · · · ·					

e/f Employee's name, address and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

	Employer's state ID no. 9074 3418	16 State wages, tips, etc. 29453.70
17 State	income tax	18 Local wages, tips, etc.
	904.23	
19 Local	I income tax	20 Locality name
	PA.State Fili	ng Copy

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Retui This blue Earnings Summary section is included with your W-2 to help describe portions in more detail. The reverse side includes general information that you may also find helpful.

1. The following information reflects your final 2017 pay stub plus any adjustments submitted by your employer.

		PA. W-2	WA. W-2	
Gross Pay		31730.70	42827.18	
Federal Income Tax Withhe	ld Box 2 of W-2	13756.42	13756.42	
Social Security Tax Withhel	d Box 4 of W-2	7319.23	7319.23	
Medicare Income Tax Withh	reld Box 6 of W-2	1711.76	1711.76	
State Income Tax	Box 17 of W-2	904.23		
SUI/SDI Box 14 of W-2	Box 14 of W-2	22.21		
2. Your Gross Pay was adjusted	as follows to produce y	our W-2 Statement.		

PA. State Wages, WA. State Wages, Tips, Etc. Tips, Etc. Box 16 of W-2 Box 16 of W-2

Gross Pay 31,730.70 Plus GTL (C-Box 12) N/A Less Other Cafe 125 2 277 00 Reported W-2 Wages 29,453.70

3. Employee W-4 Profile. To change your Employee W-4 Profile Information, file a new W-4 with your payroll dept.

RAVINDER SATHU 2010 HURON CIRCLE GRAFTON WI 53024 Social Security Number: 158-19-6036 Taxable Marital Status: MARRIED Exemptions/Allowances:

FEDERAL: 5

STATE:

Wages, tips, other comp 2 Federal income tax withheld 118052.10 13756.42 Social security wages 118052.10 4 Social security tax withheld 7319.23 Medicare wages and tips 118052.10 6 Medicare tax withheld 1711.76

Control number Dept. Employer use only 001037 PITT/IRL 59 314

Employer's name, address, and ZIP code MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

b	Employer's FED ID number 38-3256847	a Employee's SSA number 158-19-6036			
7	Social security tips	8 Allocated tips			
9	Verification Code	10 Dependent care benefits			
11	Nonqualified plans	12a C 5.36			
14	Other	12b			
		12c			
		12d			
		13 Stat emp. Ret. plan 3rd party sick pay			
- 10	F				

e/f Employee's name, address and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

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15 State WA	Employer's state ID no	. 16 State wag	es, tips, etc.
17 State	income tax	18 Local wag	es, tips, etc.
19 Local	income tax	20 Locality n	ame
	WA.State Re	eference	Сору

WA.State Reference Wage and Tax

Statement Copy 2 to be filed with employee's State Income Tax Retui

1 Wages, tips, other comp. 118052.10			2 Federal income tax withheld 13756.42			
3	Social security was	_{jes} 52.10	4 Social security tax withheld 7319.23			
5	Medicare wages an	6 Medicare tax withheld 1711.76				
d	Control number	Dept.	Corp.	Employer	use only	
00	1037 PITT/IRL	314		Α	59	
c Employer's name, address, and ZIP code						

MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

b	Employer's FED ID number 38-3256847	а	a Employee's SSA number 158-19-6036				
7	Social security tips	8 Allocated tips					
9	Verification Code	10 Dependent care benefits					
11	Nonqualified plans	12a C 5.36				5.36	
14	Other	12k)				٦
		120	:				٦
		12c	i				٦
		13	Stat er	np.	Ret. plan	3rd party sick p	ay

e/f Employee's name, address and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

15 State WA	Employer's state ID no.	16 State wages, tips, etc.
17 State	income tax	18 Local wages, tips, etc.
19 Local	income tax	20 Locality name
	MA State Fili	na Conv

Wage and Tax

Statement Copy 2 to be filed with employee's State Income Tax Return

2017 W-2 and EARNINGS SUMMARY

	City		_ocal				ору	
W-	2	W	age a	and	Tax	20	17	,
			Statem	ent		OMB N	n 1545-0	เกกล
Copy 2 to	be filed wi	th empl	oyee's City	or Loc	cal Inco	OMB Nome Tax Ret	urn.	000
Cont	rol numl	oer .	Dept.	. (Corp.	Employ	er use o	only
001037	PITT/	IRL	314	1		Α		60

c Employer's name, address, and ZIP code

MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

Batch #01674

e/f Employee's name, address, and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

b Em	ployer's FED ID number 38-3256847	a Employee's SSA number 158-19-6036			
1 W a	iges, tips, other comp.	2 Federal income tax withheld			
	118052.10	13756.42			
3 S o	cial security wages	4 Social security tax withheld			
	118052.10	7319.23			
5 M e	dicare wages and tips	6 Medicare tax withheld			
	118052.10	1711.76			
7 So	cial security tips	8 Allocated tips			
9 Ve	ification Code	10 Dependent care benefits			
11 No	nqualified plans	12a See instructions for box 12			
		C 10.34			
14 Ot	her	120 12c			
	22.21 SUI	12d			
		13 Stat emp. Ret. plan 3rd party sick pay			
15 St	ate Employer's state ID n	o. 16 State wages, tips, etc.			
17 St a	te income tax	18 Local wages, tips, etc. 29453.70			
19 Local income tax		20 Locality name			
	294.54	220401			

1 Wages, tips, other comp. 118052.10			2	Federa	ıl income ta 1	x withheld 3756.42
3	Social security wag 1180		4	Social	security ta	x withheld 7319.23
5 Medicare wages and tips 118052.10			6	Medica	are tax with	^{held} 1711.76
d	Control number	Dept.		Corp.	Employe	r use only
00	1037 PITT/IRL	314			Α	60

c Employer's name, address, and ZIP code

MIRACLE SOFTWARE SYSTEMS INC 45625 GRAND RIVER AVENUE **NOVI MI 48374**

b	Employer's FED ID number 38-3256847	a Employee's SSA number 158-19-6036						
7	Social security tips	8 Allocated tips						
9	Verification Code	10 Dependent care benefits						
11 Nonqualified plans		C	instructio	ns for box 12 10.34				
14	Other	12b						
	22.21 SUI	12c						
		12d						
		13 Stat em	p. Ret. plan	3rd party sick pay				
- 11	olf Employee's name address and ZID ands							

e/f Employee's name, address and ZIP code

RAVINDER SATHU 2010 HURON CIRCLE **GRAFTON WI 53024**

15 State Employer's state ID no.	16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc. 29453.70
19 Local income tax 294.54	20 Locality name 220401
,	Filing Copy
W-2 Wage and Tax 2017 Statement OMIs No. 1545-0008 Copy 2 to be filed with employee's City or Local Income Tax Return.	

This blue Earnings Summary section is included with your W-2 to help describe portions in more detail. The reverse side includes general information that you may also find helpful.

1. The following information reflects your final 2017 pay stub plus any adjustments submitted by your employer.

Gross Pay 31730.70 **Social Security** 7319.23 **Local Income Tax** 294.54 Tax Withheld Box 19 of W-2 Box 4 of W-2 SUI/SDI 22 21 Box 14 of W-2 Fed. Income Tax Withheld 13756.42 **Medicare Tax** 1711.76 Withheld Box 6 of W-2 Box 2 of W-2

> 220401 HARRI Local Wages,

2. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

Tips, Etc. Box 18 of W-2 **Gross Pay** 31,730.70 Plus GTL (C-Box 12) N/A Less Other Cafe 125 2 277 00 Reported W-2 Wages 29,453.70

3. Employee W-4 Profile. To change your Employee W-4 Profile Information, file a new W-4 with your payroll dept.

RAVINDER SATHU 2010 HURON CIRCLE GRAFTON WI 53024

Social Security Number: 158-19-6036 Taxable Marital Status: MARRIED Exemptions/Allowances:

FEDERAL: 5 LOCAL:

* All PA local wages and withholding for Act 32 are reported to © 2017 ADP, LLC the employee work location PSD code.

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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 shouldn't 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.

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.

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.

J-Nontaxable sick pay (information only, not included in boxes 1, 3,

 $\mbox{K--}20\%$ 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

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.

FF—Permitted benefits under a qualified small employer health

reimbursement arrangement

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 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 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.

record and/or earnings in a particular year.

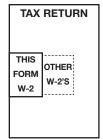
Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

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.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



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.