1166.5	0					
 Wages, tips, other comp 						
1166.5	72.33					
3 Social security wages	4 Soc. sec. tax withheld					
1166.5	20.32					
5 Medicare wages and tips	-					
Employer's name, address, and ZIP code DE FOREST AREA SCHOOL DISTRICT 520 E HOLUM STREET DE FOREST WI 53532						
7 Social security tips	8 Allocated tips					
9 Verification code	10 Dependent care benefits					
11 Nonqualified plans	12a					
	12b					
13 Statutory Retirement Third-part	y 12c					
	12d					
14	Employee's SSN					
	622-77-6129					
	Employer ID number (EIN)					
	39-1049563					
	Control number					
SHILPA SIVANAND	AN					
1456 WILD IRIS	ST					
SUN PRAIRIE WI 53590						
Employee's name, address, and ZIP code						
15 St. Employer's state ID number	16 State wages, tips, etc. 17 State income tax					
WI 036102570947002	1166.50					
18 Local wages, tips, etc.	19 Local income tax 20 Locality name					
Wage and Tax Statement Copy B This information is being furnished to the IRS. W-2						

W2U NTF 2581315 2017

To Be Filed With Employee's

FEDERAL Tax Return.

1166.50 Wages, tips, other comp. Fed. income tax withheld 1166.50 72.33 3 Social security wages 4 Soc. sec. tax withheld 1166.50 16.91 5 Medicare wages and tips 6 Medicare tax withheld

Employer's name, address, and ZIP code DE FOREST AREA SCHOOL DISTRICT 520 E HOLUM STREET DE FOREST WI 53532

7 Social security tips	8 Allocated tips				
9 Verification code	10 Dependent care benefits				
11 Nonqualified plans	12a				
	12b				
13 Statutory Retirement Third-p sick pa					
	12d				
14	Employee's SSN				
	622-77-6129				
	Employer ID number (EIN)				
	39-1049563				
	Control number				
A					

SHILPA SIVANANDAN 1456 WILD IRIS ST SUN PRATRIE WI 53590

Employee's hame, address, and zir code				
15 St.	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
WI (036102570947002	1166.50		
18 Loc	cal wages, tips, etc.	19 Local income tax	20 Locality name	

Wage and Tax Statement Copy C -- For EMPLOYEE'S RECORDS

This information is being furnished to the IRS. 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. OMB No. 1545-0008 Department of the Treasury -- Internal Re

Form W-2 2017

1166.50	0					
1 Wages, tips, other comp.	2 Fed. income tax withheld					
1166.50	72.33					
3 Social security wages	4 Soc. sec. tax withheld					
1166.50	16.91					
5 Medicare wages and tips	6 Medicare tax withheld					
Employer's name, address, and ZIP code DE FOREST AREA SCHOOL DISTRICT 520 E HOLUM STREET DE FOREST WI 53532						
7 Social security tips	8 Allocated tips					
9 Verification code	10 Dependent care benefits					
11 Nonqualified plans	12a					
	12b					
13 Statutory Retirement Third-party sick pay	12c					
	12d					
14	Employee's SSN					
	622-77-6129					
	Employer ID number (EIN)					
	39-1049563					
	Control number					
SHILPA SIVANANDA	AN					
1456 WILD IRIS	ST					
SUN PRAIRIE WI 53590						
Employee's name, address, and ZIP code						
15 St. Employer's state ID number	16 State wages, tips, etc. 17 State income tax					
WI036102570947002	1166.50					
18 Local wages, tips, etc.	19 Local income tax 20 Locality name					
Wage and Tax Statement Form Copy 2 W-2						

To Be Filed With Employee's State, City, or Local Income Tax Return.

2017

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. Amt. includes 1.45% Medicare Tax withheld on all Medicare wages & tips shown in box 5, as well as 0.9% Additional Medicare Tax on any of those Medicare wages & tips above \$200,000.

5, as well as 0.9% Additional Medicare Tax on any of those Medicare wages & lips above \$200,0 EX 8. This amount is **10f** included in boxes 1, 5, 6, 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 type you received report that amount even if it is more or less than allocated tips. On Form 4137 you will calculate social security & Medicare Tax owed on allocated tips shown on your Form(s) W.2 that you must social security for the property of the pro

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

EQM 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 cateforái) plan). Any amount over \$5,000 is also included in box 1. Ompitele Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

BOX 11. This amount is 61 proproted in box 11 fit 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 51 fit 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 forfeture 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. If you made a deferral and the calendar year, and you are or you had a deferral and the scale and you are or you had be age 82 by the end of the calentar year, your employer should file form 50A 131, Employer Report of Special Wage PROVIDE of the calentar year, your ompitely sor law return. Belowe develored shown in box 12. Your may need the information to compitely your tax return. Belowe develorately considered and your grown of the calentar year, your ompitely you tax return. Belowe develorately considered and your distribution of \$10,000 (\$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 Plan. \$710. 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(6)(11) and 408(b) SIMPLE plans; Tris additional deferral of up to \$6,000 (\$3,000 for section 401(6)(11) and 408(b) SIMPLE plans. For code G, the limit on elective deferrals in order to not pro

Taxes" in the Form 1040 instructions. **B--**Uncollected Medicare tax on tips. Include this tax on Form 1040. See "Other Taxes" in the

D=-Uncollected wedicare 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)

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(k) 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 437(k) 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, or 5)

--20% excise tax on excess golden parachute payments. See "Other Taxes" in Form 1040 inst.
--Substantiated employee business expense reimbursements (nontaxable)

L=5ubstantiated employee business expense reimbursements (nontaxable)
M=-Uncollected accal security or RTPA 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 traxel octs 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.

Wage and Tax State	ement	Form		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
15 St. Employer's state ID number WI 036102570947002	16 State wages, tips, etc.	17 State income tax		
Employee's name, address, and ZIP code	La			
SUN PRAIRIE WI	53590			
1456 WILD IRIS ST				
SHILPA SIVANAND.	AN			
	Control number	·		
		39-1049563		
	Employer ID nu			
14	' '	Employee's SSN 622-77-6129		
	12d			
13 Statutory Retirement Third-party sick pay	12c			
	12b			
11 Nonqualified plans	12a			
9 Verification code	10 Dependent of	care benefits		
7 Social security tips	8 Allocated tip	s		
DE FOREST WI 53				
520 E HOLUM STR		RICI		
Employer's name, address, and ZIP code DE FOREST AREA	CCIIOOI DICE	D T CITI		
5 Medicare wages and tips	6 Medicare tax	k withheld		
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3 Social security wages	4 Soc. sec. tax			
1 Wages, tips, other comp.		72.33		
1166.5		A		
	. 1			

Copy 2

W-2 2017

To Be Filed With Employee's State, City, or Local Income Tax Return. Copyright 2017 Greatland/Nelco

Q--Nontaxable combat pay. See the instructions for Form 1040 or Form 1040 A for details on reporting this amount.

##-Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

##-Employer calary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

##-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

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 remairements.

requirements.

W--Employer contributions (including amounts the employee elected to contribute using a section 125 (cafetenia) 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—throome under a nonqualified deferred compensation plan that fails to satisfy section 499A. 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 plan instructions. AA--Designated Roth contributions under a section 401(k) plan
BB--Designated Roth contributions under a section 403(k) plan
DD--Cost of employer-sponsored health coverage. The amount reported with
Code DD is not taxable.

EE—Oeignade 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).

Retirement Arrangements (RAs).

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.

to the including the proposed or the elements (and you despected or the proposed or the elements (and your compensation).

Note: Keep Copy C or 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.

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 returned 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

adjusted gross income (Aci) is less than a certain amount. In elimiount or 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

earned for services provided while you were an inmate at a pertal institution. To Early influents and more information, with www.irs.gov/elick. Also see Pub. 596. Earned Income Crodit.

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)

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-2e. Be sure to get your copies of Form W-2e 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 my SSA office or by calling 1-80-077-21-213. You also may visit the SSA at www.SSA_cox. 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. In emmount reponded with code DD is not 1xxhple.

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 soc. soc. &for 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 & more than \$4.800.50 in Tier 2 RRTA tax was withheld, you as may be able to claim a credit. See your Form 1040 or Form 1040 or Form 1040 or Form 1040 or State Thus. Soc. Tax Withholding & Estimated Tax.