

This information is being furnished to the Internal Revenue Service.

Copy B-To Be Filed With Employee's FEDERAL Tax Return		Form W-2 Wage and Tax Statement		OMB No. 1545-0008
<b>2017</b>		1 Wages, tips, other comp. 91234.91	2 Federal income tax withheld 16901.31	
Employee's SSN 603-57-9542	3 Social security wages 96571.98	4 Social security tax withheld 5987.46		
Employer Ident. No. (EIN) 05-0340626	5 Medicare wages and tips 96571.98	6 Medicare tax withheld 1400.29		
Employer's name, address, and ZIP code CVS PHARMACY, INC. 1 CVS DRIVE WOONSOCKET, RI 02895				
Control number				
Employee's first name and initial AMIT JAIN		Last name 94 NORBOROUGH DR	Suff. NORTH ATTLEBORO, MA 02760	
Employee's address, and ZIP code				
7 Social security tips	8 Allocated tips	9 Verification code		
10 Dependent care benefits 1230.00	11 Nonqualified plans	12a code See instr. for box 12 C		49.95
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	12b code D 5337.07	
14 Other		12c code W		5533.35
		12d code DD		23174.10
15 State MA	Employer's state ID no. WTH-10196200-361	16 State wages, tips, etc. 91234.91	17 State income tax 604.19	
18 Local wages, tips, etc.		19 Local income tax	20 Locality name	

Department of the Treasury-Internal Revenue Service

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return		Form W-2 Wage and Tax Statement		OMB No. 1545-0008
<b>2017</b>		1 Wages, tips, other comp. 91234.91	2 Federal income tax withheld 16901.31	
Employee's SSN 603-57-9542	3 Social security wages 96571.98	4 Social security tax withheld 5987.46		
Employer Ident. No. (EIN) 05-0340626	5 Medicare wages and tips 96571.98	6 Medicare tax withheld 1400.29		
Employer's name, address, and ZIP code CVS PHARMACY, INC. 1 CVS DRIVE WOONSOCKET, RI 02895				
Control number				
Employee's first name and initial AMIT JAIN		Last name 94 NORBOROUGH DR	Suff. NORTH ATTLEBORO, MA 02760	
Employee's address, and ZIP code				
7 Social security tips	8 Allocated tips	9 Verification code		
10 Dependent care benefits 1230.00	11 Nonqualified plans	12a code See instr. for box 12 C		49.95
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	12b code D 5337.07	
14 Other		12c code W		5533.35
		12d code DD		23174.10
15 State MA	Employer's state ID no. WTH-10196200-361	16 State wages, tips, etc. 91234.91	17 State income tax 604.19	
18 Local wages, tips, etc.		19 Local income tax	20 Locality name	

Department of the Treasury-Internal Revenue Service

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.

M00015145-000067776-001-001-276

Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy 2.)		Form W-2 Wage and Tax Statement		OMB No. 1545-0008
<b>2017</b>		1 Wages, tips, other comp. 91234.91	2 Federal income tax withheld 16901.31	
Employee's SSN 603-57-9542	3 Social security wages 96571.98	4 Social security tax withheld 5987.46		
Employer Ident. No. (EIN) 05-0340626	5 Medicare wages and tips 96571.98	6 Medicare tax withheld 1400.29		
Employer's name, address, and ZIP code CVS PHARMACY, INC. 1 CVS DRIVE WOONSOCKET, RI 02895				
Control number				
Employee's first name and initial AMIT JAIN		Last name 94 NORBOROUGH DR	Suff. NORTH ATTLEBORO, MA 02760	
Employee's address, and ZIP code				
7 Social security tips	8 Allocated tips	9 Verification code		
10 Dependent care benefits 1230.00	11 Nonqualified plans	12a code See instr. for box 12 C		49.95
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	12b code D 5337.07	
14 Other		12c code W		5533.35
		12d code DD		23174.10
15 State MA	Employer's state ID no. WTH-10196200-361	16 State wages, tips, etc. 91234.91	17 State income tax 604.19	
18 Local wages, tips, etc.		19 Local income tax	20 Locality name	

Department of the Treasury-Internal Revenue Service

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return		Form W-2 Wage and Tax Statement		OMB No. 1545-0008
<b>2017</b>		1 Wages, tips, other comp. 91234.91	2 Federal income tax withheld 16901.31	
Employee's SSN 603-57-9542	3 Social security wages 96571.98	4 Social security tax withheld 5987.46		
Employer Ident. No. (EIN) 05-0340626	5 Medicare wages and tips 96571.98	6 Medicare tax withheld 1400.29		
Employer's name, address, and ZIP code CVS PHARMACY, INC. 1 CVS DRIVE WOONSOCKET, RI 02895				
Control number				
Employee's first name and initial AMIT JAIN		Last name 94 NORBOROUGH DR	Suff. NORTH ATTLEBORO, MA 02760	
Employee's address, and ZIP code				
7 Social security tips	8 Allocated tips	9 Verification code		
10 Dependent care benefits 1230.00	11 Nonqualified plans	12a code See instr. for box 12 C		49.95
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	12b code D 5337.07	
14 Other		12c code W		5533.35
		12d code DD		23174.10
15 State MA	Employer's state ID no. WTH-10196200-361	16 State wages, tips, etc. 91234.91	17 State income tax 604.19	
18 Local wages, tips, etc.		19 Local income tax	20 Locality name	

Department of the Treasury-Internal Revenue Service