| Copy B To Be Filed W FEDERAL Tax Return | 1 | | | _ | 70MB No. 1545-0008 |
|---|--|---------------|-------------|-----------|-----------------------|
| a Employee's social | Wages, tips, other cor | ıp. | 2 Fed | eral inco | ome tax withheld |
| security number | 114872 | .26 | escribed by | | 17527.85 |
| 516-71-4790 | 3 Social security wages | | 4 So | cial secu | irity tax withheld |
| b Employer ID number | 119872 | . 26 | | | 7432.08 |
| 22-2120360 | 5 Medicare wages and t | ps | 6 Me | dicare ta | ax withheld |
| 22-2120360 | 119872 | . 26 | | | 1738.12 |
| c Employer's name, addre | ss, and ZIP code | | | | |
| Patel Consul 1525 Morris Union, NJ 07 | | tion | | | |
| d Control Number B4764 7106 e Employee's name, addre | ss, and ZIP code | | | | |
| SUJATHA MURU 89 LOFT DRIV MARTINSVILLE 7 Social security tips | E | | 9 A | dvance | EIC payment |
| 10 Dependent care benefit | s 11 Nonqualified plans | | 12a AA | Code | 7500.00 |
| 13 Statutory employee | 14 Other | | | Code | |
| | STD NJWD-ES | 80.40 5.89 | | | 5000.00 |
| Retirement plan | | 36.52 | | Code | |
| i . | | | ממ | | 11693.04 |
| 3rd party sick pay | | | 12d | Code | 11033.01 |
| | - | | 1 | Occue | 011 50 |
| X | | | J | | 911.59 |
| NJ 222-120-360/00 | | 032 | . 26 | | 4455.77 |
| FLI 222-120-360/00 | | 3 3 | - 1 | 22020 | 33.48 |
| 15 State Emplr.'s state LD | # 16 State wages, 19 Local income tax | tips, etc | | 17 State | income tax |
| 18 Local wages, tips, etc. Form W-2 Wage and Tax 5 | | | | | he Treasury - IRS |

| This information is being fu | urnished to the | Internal Revenue Sevice |
|------------------------------|-----------------|-------------------------|
|------------------------------|-----------------|-------------------------|

| Copy 1 To Be Filed V City, or Local Income | | | | | 7 0MB No. 1545-0008 | |
|---|------------|-----------------------|---------|------------|-------------------------------|--|
| a Employee's social | 1 Wag | es, tips, other comp. | 2 F | ederal inc | ome tax withhel | |
| security number | | 114872.2 | | | | |
| 516-71-4790 | 3 Soc | ial security wages | 4 8 | ocial sec | urity tax withheld | |
| b Employer ID number | 1 | 119872.2 | 26 | 7432 | | |
| 22-2120360 | 5 Med | licare wages and tips | | iedicare t | ax withheld | |
| | | 119872.2 | 26 | | 1738.1 | |
| c Employer's name, addre | ess, and Z | IP code | | | | |
| Patel Consul | tants | s Corporati | on | | | |
| 1525 Morris | Aveni | 1e | | | | |
| Union, NJ 07 | | | | | | |
| oniton, no o, | 003 | | | | | |
| d Control Number | | | | | | |
| B4764 7106 | | | | | | |
| e Employee's name, addr | ess. and Z | ZIP code | | | | |
| | | | | | | |
| SUJATHA MURU | | 1 | | | | |
| 89 LOFT DRIV | | | | | | |
| MARTINSVILLE | , NJ | 08836 | | | | |
| | | | | | | |
| 7 Social security tips | 8 / | Allocated tips | l° | Advance | EIC payment | |
| 10 Dependent care benefi | is 11 | 11 Nonqualified plans | | | | |
| | | | A | Δ | 7500.0 | |
| 13 Statutory employee | 14 Othe | er | | Code | 750010 | |
| lo otatulory employee | | STD 80 | .40 | | 5000.0 | |
| Retirement plan | | | .89 L | | 3000.0 | |
| Hetirement plan | 01/ | WE/DWE ISO | | | 7.1.600 6 | |
| X | | | D | | 11693.0 | |
| 3rd party sick pay | | | 120 | | | |
| X | | | | Ţ | 911.5 | |
| NJ 222-120-360/0 | 00 | 1220 | 32.2 | 5 | 4455. | |
| FLI 222-120-360/0 | 00 | | | | 33 | |
| 15 State Emplr.'s state I.I |). # | 16 State wages, tip | s, etc. | | income tax | |
| 18 Local wages, tips, etc. | 19 Loca | al income tax | 20 Loc | ality nam | е | |
| | | | 1 | | | |
| | | | | | | |
| Form W-2 Wage and Tax | | | | | the Treasury - I | |

| | | 2. | | | |
|---|---|------------------------------------|------------------------------|---|--|
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| py B To Be Filed W DERAL Tax Return | | 2017 ^{OMB No.} | Notice to Employee | | 2017 ^{OMB No.} 1545-0008 |
| nployee's social | 1 Wages, tips, other comp. | 2 Federal income tax withheld | | 1 Wages, tips, other comp. | 2 Federal income tax withheld |
| curity number | 114872.26 | | security number | 114872.2 | |
| 16-71-4790 | 3 Social security wages | 4 Social security tax withheld | 516-71-4790 | 3 Social security wages | 4 Social security tax withheld |
| nployer ID number | 119872.20 | | b Employer ID number | 119872.2 5 Medicare wages and tips | 6 7432.08 6 Medicare tax withheld |
| 2-2120360 | 5 Medicare wages and tips 119872.26 | 6 Medicare tax withheld 1738.12 | 22-2120360 | 119872.2 | |
| nployer's name, addres | ss, and ZIP code | * | c Employer's name, addre | ss, and ZIP code | |
| atal Conquilt | tants Corporatio | m I S | Patel Consul | tants Corporatio | on |
| 525 Morris | - | [] | 1525 Morris | - | |
| nion, NJ 070 | | 10 | Union, NJ 07 | | |
| IIIOII, NO OA | 003 | 4.8 | differ, No o, | 003 | |
| ontrol Number | | | d Control Number | | |
| 4764 7106 | | 13 | B4764 7106 | | |
| nployee's name, addres | ss, and ZIP code | | e Employee's name, addre | ess, and ZIP code | |
| UJATHA MURUC | ユカエカロ | 10 | SUJATHA MURU | GATAH | |
| 9 LOFT DRIVE | | 100 | 89 LOFT DRIV | | |
| ARTINSVILLE, | | 10 | MARTINSVILLE | | |
| AKIINSVIDDE, | , 110 00050 | 100 | | , 1.0 00000 | |
| ocial security tips | 8 Allocated tips | 9 Advance EIC payment | 7 Social security tips | 8 Allocated tips | 9 Advance EIC payment |
| out of our injury | | | | | |
| ependent care benefits | s 11 Nonqualified plans | 12a Code | 10 Dependent care benefit | s 11 Nonqualified plans | 12a Code |
| rependent care benefits | , I i i i i i i i i i i i i i i i i i i | AA 7500.00 | 1 | | AA 7500.00 |
| atutory employee | 14 Other | 12b Code | 13 Statutory employee | 14 Other | 12b Code |
| actuatory employee | STD 80 | 40 D F000 00 | | STD 80. NJWD-ES 5. | 40 89 D 5000.00 |
| etirement plan | NJWD-ES 5. UI/WF/SWF 136. | 52 12c Code | Retirement plan | | 52 12c Code |
| | 01/11/2011 | DD 11693.04 | l x | , . | DD 11693.04 |
| X d party sick pay | | 12d Code | 3rd party sick pay | | 12d Code |
| | 7 | J 911.59 | X X | | J 911.59 |
| X 222-120-360/00 | 0 1 10000 | | NJ 222-120-360/00 | 12203 | |
| , | 12200 | 33.48 | FLI 222-120-360/00 | 1000 | 33.48 |
| 222-120-360/00 State Empir 's state I.D. | | St. Destroy of the IV | 15 State Empir.'s state I.D | The second control of | |
| ocal wages, tips, etc. | 19 Local income tax | 20 Locality name | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |
| | | | | | |
| | | | l | | |
| W-2 Wage and Tax S | | Dept. of the Treasury - IRS | Form W-2 Wage and Tax S | | Dept. of the Treasury - IRS |
| information is being furr | nished to the Internal Revenue S | Sevice | tax return, a negligence per | nisned to the internal Hevenue lalty/other sanction may be impo | Sevice. If you are required to file a osed on you if this income is taxable |
| | | | | | |

and you fail to report it.

| City, or Local Income | /ith Em Tax Re | ployee's State, eturn | | 20 | 170MB No. 1545-0008 |
|------------------------------|---------------------------|--------------------------|--------|-------------|------------------------|
| a Employee's social | | jes, tips, other comp. | . 1 | 2 Federal | income tax withheld |
| security number | | 114872.26 | | | 17527.85 |
| 516-71-4790 | 3 Soc | | | | ecurity tax withheld |
| b Employer ID number | 1 | 119872. | | | 7432.08 |
| 22-2120360 | 5 Medicare wages and tips | | | 6 Medicai | re tax withheld |
| | | 119872.26 1 | | | 1738.12 |
| c Employer's name, addre | ss, and Z | IP code | | | |
| Patel Consul | tants | Corporat: | ion | | |
| 1525 Morris | | _ | | | |
| Union, NJ 07 | | ac | | | |
| oniton, No 07 | V03 | | | | |
| d Control Number | | | _ | | |
| B4764 7106 | | | | | |
| e Employee's name, addre | see and | ZID code | | | |
| | | | | | |
| SUJATHA MURU | GAIA | -I | | | |
| 89 LOFT DRIV | E | | | | |
| MARTINSVILLE | , NJ | 08836 | | | |
| | | | | | |
| 7 Social security tips | 8 / | Allocated tips | | 9 Advan | ce EIC payment |
| 10 Dependent care benefit | 0 11 | Nonqualified plans | | 12a Coo | io. |
| to Dependent care benefit | · ' ' ' | Nonqualined plans | | AA | 7500.00 |
| | 44 011 | | | 12b Coo | |
| 13 Statutory employee | 14 Othe | | 0.40 | | |
| | | JWD-ES 5 | 5.89 | | 5000.00 |
| Retirement plan | UI/I | WF/SWF 13 | 6.52 | 12c Coo | ie |
| X | | | | DD | 11693.04 |
| 3rd party sick pay | | | | 12d Co | de |
| х | | | | J | 911.59 |
| J 222-120-360/00 | 00 | 1220 | 132. | 26 | 4455.7 |
| LI 222-120-360/00 | | 1220 | J | | 33.4 |
| 15 State Empir.'s state I.D. | | 16 State wages, tip | s. etc | 17 St | ate income tax |
| 18 Local wages, tips, etc. | 19 Loc | al income tax | 20 | Locality na | ame |
| | | | | | |
| | 1 | | 1 | | |