PAGE 2

OR.State R	eference Copy
Λ γ Wage a	
VV-Z Stateme	
Copy 2 to be filed with employee'sStat	OMB No. 1545-0008
d Control number Dept.	Corp. Employer use only
000075 ATLA/PAH	T 20
c Employer's name, address, a	and ZIP code
INFODRIVE SYSTEMS INC	
11311 RICHMOND AVE #L106	
HOUSTON TX 77082	
	Batch #01729
e/f Employee's name, address, a	and ZIP code
NITIN CHIKOTI	
1616 NE 16TH WAY	
APT # 226	
GRESHAM OR 97030	
b Employer's FED ID number	a Employee's SSA number
47-2051918	191-79-0556
1 Wages, tips, other comp.	² Federal income tax withheld
28832.07	3794.28
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
5 medicare wages and tips	6 Medicare tax withheid
7 Social security tips	8 Allocated tips
9 Verification Code	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	12b
14 Other	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
15 State Employer's state ID no	16 State wages, tips, etc.
OR 01675007-1	25394.57
17 State income tax	18 Local wages, tips, etc.
1693.21	
19 Local income tax	20 Locality name

2017 W–2and EARNINGS SUMMARY

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 25394.57 Social Security OR. State Income Tax 1693.21 Tax Withheld Box 17 of W-2 Box 4 of W-2 SUI/SDI Box 14 of W-2 Fed. Income 3794.28 Medicare Tax Withheld Tax Withheld Box 2 of W-2 Box 6 of W-2

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

Gross Pay Reported W-2 Wages

25,394.57 25,394.57

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

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

NITIN CHIKOTI 1616 NE 16TH WAY APT # 226 GRESHAM OR 97030

Social Security Number: 191-79-0556 Taxable Marital Status: SINGLE Exemptions/Allowances:

FEDERAL: 2 STATE: 2

© 2017 ADP, LLC

$||(\bigcirc)|$ $\mathbb{N}^{\mathbb{N}}$ \square FT BLAN

3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept.	Corp. Employer use only
000075 ATLA/PAH	T 20
c Employer's name, address, a	and ZIP code
INFODRIVE SYSTEMS INC 11311 RICHMOND AVE #L106 HOUSTON TX 77082	
b Employer's FED ID number 47-2051918	a Employee's SSA number 191–79–0556
7 Social security tips	8 Allocated tips
9 Verification Code	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
14 Other	12b
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
e/f Employee's name, address and ZIP code	
NITIN CHIKOTI 1616 NE 16TH WAY APT # 226 GRESHAM OR 97030	
15 State Employer's state ID no OR 01675007-1	. 16 State wages, tips, etc. 25394.57
17 State income tax 1693.21	18 Local wages, tips, etc.
19 Local income tax	20 Locality name
OR.State Fi	ling Copy

Wage and Tax

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

Wages, tips, other comp

28832.07

2 Federal income tax withheld 3794.28