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|---|---------------------------------|----------------------------|--------------------|------|--|
| MD.State Reference Copy | | Wage and Tax Statement | | 2017 | |
| Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008 | | | | | |
| d Control number | Dept. | Corp. | Employer use only | | |
| 000124 | RY/MAB | | A | 55 | |
| c Employer's name, address, and ZIP code | | | | | |
| MSRCOSMOS LLC 6200 STONERIDGE MALL RD STE300 PLEASANTON, CA 94588 | | | | | |
| Batch #97482 | | | | | |
| e/f Employee's name, address, and ZIP code | | | | | |
| RAJESH R LOKA 3311 CHRISTIANA MEADOWS BEAR, DE 19701 | | | | | |
| b Employer's FED ID number | a Employee's SSA number | | | | |
| 39-2075148 | 479-63-0534 | | | | |
| 1 Wages, tips, other comp. | 2 Federal income tax withheld | | | | |
| 86156.00 | 10537.76 | | | | |
| 3 Social security wages | 4 Social security tax withheld | | | | |
| 5 Medicare wages and tips | 6 Medicare tax withheld | | | | |
| 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 | | |
| 15 State | Employer's state ID no. | 16 State wages, tips, etc. | | | |
| MD | 1423819 4 | 7800.00 | | | |
| 17 State income tax | 18 Local wages, tips, etc. | | | | |
| 536.64 | | | | | |
| 19 Local income tax | 20 Locality name | | | | |

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 | 7800.00 | Social Security Tax Withheld | MD. State Income Tax | 536.64 |
| | | Box 4 of W-2 | Box 17 of W-2 | |
| | | | SUI/SDI | |
| | | | Box 14 of W-2 | |
| Fed. Income Tax Withheld | 10537.76 | Medicare 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.

| | | | |
|---------------------------|--|------------------------------------|-----------------|
| | | MD. State Wages, Tips, Etc. | |
| | | Box 16 of W-2 | |
| Gross Pay | | | 7,800.00 |
| Reported W-2 Wages | | | 7,800.00 |

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

**RAJESH R LOKA
3311 CHRISTIANA MEADOWS
BEAR, DE 19701**

Social Security Number: 479-63-0534
Taxable Marital Status: MARRIED
Exemptions/Allowances:
FEDERAL: 2
STATE: 1 MD Cnty Default Tax
Married/Joint Filing

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| | | | | | |
|---|---------------------------------|--------------------------------|--------------------|------|--|
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