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. From 10 you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income recdit (EIC). You may be able to take the EIC for 2018 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size.

Workers without châlren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that the EIC if your investment income is more than the specified amount for 2018 or if income is earned for services provided while you were an intante at a penal institution. For 2018 in come lamits and more information, vist w was 'as you'EITC.

Also see Pub. 596, Earnel Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 396, trained informe cream, my face and the 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) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct tout aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by caling 800-772-1213. You may also wist the SSA at www.SSA.gov.
Cost of employer-sponsored beath 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. The amount reported with Code DD is not taxable.
Credit for excess taxes. If you had more than one employer in 2018 and more than \$7,960.80 in social security and/or TFr 1 rational 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 rational employer and more than \$4,047.60 in TFr 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Wathholding and Estimated Tax. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

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. Tourn any 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. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 3, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown

\$200,000.

Box 8. This amount is not included in boxes 1, 3, 5, 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 onless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137 you will actual the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you

must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter if when prompted by your software. The only valid characters are the letters AF and numerals 0-9. 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 to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plani). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan for (b) included in box 3 and/or 5 if it is a prior year deferred unount. This box should the two 457(b) plan the became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box should fit be true diff you had a deferral amount for Shot 131, we should fit be year, your employer should fits Form SSA-131, you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Blexive deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EL) under all plans are generally limited to a total of \$18,500 (\$12,200 if you dry law eSIMPLE plans; \$21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. \$71). Deferrals under code G are limited to \$18,500. Deferrals under code H are limited to \$18,000 (\$10,000

have SIMPLE pairs, Sci., 1000 ton section (work) phase a year period of the public ST, 1000 terms under code G are limited to SIS, 500. Determals under code Hare limited to ST, 000.

However, if you were at least age 50 in 2018, your employer may have allowed an additional deferral of up to \$6,000 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on decive deferrals. For code G, the limit on decive deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in sexess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

**Math. M. a wore follower code. D furnate M. S. Y. A. B. B. or E. F., you made a make-up pension

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior yearfs) when you were in military service. To figure whether you made exc deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the tributions are for the current yea

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

 $\begin{array}{l} \textbf{B--} Uncollected \ Medic are \ tax \ on \ tips. \ Include \ this \ tax \ on \ Form \ 1040. \ See \ the \ Form \ 1040 \ instruction \\ \textbf{C--} Taxable \ cost \ of \ group-term \ life \ insurance \ over \ $50,000 \ (included \ in \ boxes \ 1, \ 3 \ (up \ to \ social \ tax) \ description \$ urity 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(b) salary reduction agreement

F-Elective deferrals under a section 408(k)(6) salary reduction SEP

deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable six lay of (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substinutated emplyee suniess expense reimbursements (nontanable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Payment Payment

pubyoes only). See the Form 1040 instructions.

—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces of included in boxes 1, 3, or 5)

—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and ong-Tern Care Insurance Contracts.

—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

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

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 requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

(HSAs).
Y—Deternals under a section 409A nonqualified deferred compensation plan.
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plas interest. See the Form 1040 instructions.

A—Designated Roth contributions under a section 401(k) plan.

1040 instructions.

A—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not taxable.

BE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except or organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contribution from qualified equity grants under section 83(i) election as of the close of the calendar year HB—Aggregate deferrals under a cettor 83(i) elections as of the close of the calendar year HB—Aggregate deferrals under a cettor 83(i) elections as of the close of the calendar year HB—Aggregate deferrals under a cettor 83(i) elections as of the close of the calendar year HB—Aggregate (RRA).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permiting deducted, notinxable income, educational assistance payments, or a member of the clergy's parsonage allow ance and utilities. Ratificad employers use this box to report airdion arteriment (RRTA) compensation, Tier 1 tax, Tie-clude tips reported by the employer to the employer in ratifical reference (RRTA) compensation.

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

return. However, to help protect your social security benefits, keep Copy C until you begin receiving

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b)

social security benefits, just in case there is a question about your work record and/or earnings in a

deferred comencusation blan

return. However, to help protect your social security benefits, just in case there is a question about your work record and/or earnings in a

deferred comencusation blan

Form W-2 Wage and Tax Statement

Copy C, for employee's records

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 immosed on you if this income is suble and you fail to report it.

	**-2 *	9 -				2016	oopy o, for emplo	may be impose	ed to file a tax return, a negligence penalty d on you if this income is taxable and you fa	
d Control number 0028-19014274 0000000144- b Emolover's identification number a Emolovee's social security.				H	Employer's name, address, and ZIP code IERMITAGE INFO TECI		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
		6-63-4257 Third-party		50 CRAGWOOD RD SUITE 301 B SOUTH PLAINFIELD NJ 07080		1 Wages, tips, other compensation 56958.26				
Emp	Employee plan sick pay					3 Social Security wages	4 Social Security tax withheld			
12 See I	12 See Instrs. for Box 12		14 Other UI/HC/WD		99.35	Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
			DI	4	- 1	AJASEKHAR REDDY (11 ARBOR DR	CHINTAPALLI	7 Social Security tips	8 Allocated Tips	
					C	CARMEL IN 46032		10 Dependent care benefits	11 Nonqualified plans	
								Verification Code		
						5119-c6a5-af4a-e43d				
15 State	Employ	er's stat	e I.D. No.	16 State wages, t		17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
IN	013947	2584	001		335	83.29 104	9.78			
NJ	261-196	5-281	/000		233	74.97	3.22			

Form W-2 Wage and Tax Statement

2018

2018

Copy C, for employee's records 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

d Control number Void				c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service			
0028-19014274 0000000144-				HERMITAGE INFO TECH	I	OMB No. 1545-0008			
b Employer's identification number a Employee's social security numb			mber	50 CRAGWOOD RD SUIT	E 301 B				
26-1196281	043-	043-63-4257				1 Wages, tips, other compensation	2 Federal Income tax withheld		
	etirement			SOUTH PLAINFIELD NJ 07080		22 112 7	10.110 %		
Employee pl	an	sick pay]		3 Social Security wages	4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other			e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld		
			- 1	RAJASEKHAR REDDY C	LINTADALLI	7 Social Security tips	8 Allocated Tips		
				S11 ARBOR DR	HINTAPALLI	7 Social Security ups	o Anotaleu Tips		
				CARMEL IN 46032		10 Dependent care benefits	11 Nonqualified plans		
				CARMEL IN 40032					
						Verification Code			
						5119-c6a5	-af4a-e43d		
15 State Employer's state I.D. No.		. 16 State wages,	tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
NJ FLI				2	1.03				
1									

Form W-2 Wage and Tax Statement

Copy B, to be filed with employee's FEDERAL tax return

d Control number			Void	c Employer's name, address, and ZIP code HERMITAGE INFO TECH				Department of the Treasury - Internal Revenue Service				
0028-19014274 0000000144-									lo. 1545-0008	le Service		
b Employ	yer's identification nu	mber a Employee'	s social security nu	mber	50 CRAGWOOD RD SUITE 301 B							
26-11	196281	043-	63-4257	- 1	SOUTH PLAINFIELD NJ 07080				1 Wage	es, tips, other compensation	2 Federal Income tax withheld 6566.26	
		Retirement	Third-party		SOUTH	I PLAINFIEL	D NJ 07080)		56958.26	0300.20	
Empl		olan	sick pay	- 1	ĺ				3 Socia	al Security wages	4 Social Security tax withheld	
12 See In	nstrs. for Box 12	14 Other		00.05	e Employee's name, address, and ZIP code			5 Medie	care wages and tips	6 Medicare tax withheld		
		UI/HC/WD		99.35	1							
		DI		44.39	RAJASEKHAR REDDY CHINTAPALLI		ΓAPALLI	7 Social Security tips		8 Allocated Tips		
				- 1	511 AR	BOR DR						
					CARMI	EL IN 46032			10 Dep	endent care benefits	11 Nonqualified plans	
				- 1								
				I					Veri	fication Code		
									5119-c6a5	-af4a-e43d		
15 State	Employer's st	tate I.D. No.	. 16 State wages	, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name	
IN 0139472584 001			33	3583.29		1049.78						
NJ 261-196-281/000			23374.97			763.22						
i l					,	1						

Notice to Employee
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Earned income recdit (EIC). You may be able to take the EIC for 2018 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size.

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Also see Pub. 596, Earnel Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor 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 employer to correct your employer to the correct way and the state of the correct way and any statement, with the Social Security Administration (SSA) to correct any 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-2. Be sure to get your copies of Form W-2: from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct tout aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by caling 800-772-1213. You may also wist the SSA at www.SSA.gov.
Cost of employer-sponsored beath 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. The amount reported with Code DD is not taxable.
Credit for excess taxes. If you had more than one employer in 2018 and more than \$7,960.80 in social security and/or TFr 1 rational 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 rational employer and more than \$4,047.60 in TFr 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 Instructions and Pub. 505, Tax Wathholding and Estimated Tax.

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. Tourn any 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. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 3, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown

\$200,000.

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must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 9. If you are e-filing and if there is a code in this box, enter if when prompted by your software. The only valid characters are the letters AF and numerals 0-9. 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 to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plani). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is: (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan for (b) included in box 3 and/or 5 if it is a prior year deferred unount. This box should the two 457(b) plan the became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box should fit be true diff you had a deferral amount for Shot 131, we should fit be year, your employer should fits Form SSA-131, you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Blexive deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EL) under all plans are generally limited to a total of \$18,500 (\$12,200 if you dry law eSIMPLE plans; \$21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. \$71). Deferrals under code G are limited to \$18,500. Deferrals under code H are limited to \$18,000 (\$10,000

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**Math. M. a wore follower code. D furnate M. S. Y. A. B. B. or E. F., you made a make-up pension

Note. If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior yearfs) when you were in military service. To figure whether you made exc deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the tributions are for the current ye

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instruction C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social)). urity 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(b) salary reduction agreement

F-Elective deferrals under a section 408(k)(6) salary reduction SEP

deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J—Nontaxable ski pay (information only, not included in boxes 1, 3, or 5)

K—20% exc is ct tax on excess golden parachute payments. See the Form 1040 instructions.

L—Substantiated emplybyee usiniess expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former emplyees only). See the Form 1040 instructions.

N—the collected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Payment).

pubyoes only). See the Form 1040 instructions.

—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces of included in boxes 1, 3, or 5)

—Nontaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

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

—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

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

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 requirements.

W—Emphyer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plun) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

(HSAs).
Y—Deternals under a section 409A nonqualified deferred compensation plan.
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plas interest. See the Form 1040 instructions.

A—Designated Roth contributions under a section 401(k) plan.

1040 instructions.

A—Designated Roth contributions under a section 401(k) plan.

BB—Designated Roth contributions under a section 403(b) plan.

BB—Designated Roth contributions under a section 403(b) plan.

DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not taxable.

BE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-except or organization section 457(b) plan. This amount does not apply to contributions under a tax-except organization section 457(b) plan. This amount does not apply to contribution from qualified equity grants under section 83(i) election as of the close of the calendar year HB—Aggregate deferrals under a cettor 83(i) elections as of the close of the calendar year HB—Aggregate deferrals under a cettor 83(i) elections as of the close of the calendar year HB—Aggregate deferrals under a cettor 83(i) elections as of the close of the calendar year HB—Aggregate (RRA).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permiting deducted, notinxable income, educational assistance payments, or a member of the clergy's parsonage allow ance and utilities. Ratificad employers use this box to report airdion arteriment (RRTA) compensation, Tier 1 tax, Tie-clude tips reported by the employer to the employer in ratifical reference (RRTA) compensation.

F—Elective deferrals under a section 408(k)(6) salary reduction SEP

return. However, to help protect your social security benefits, keep Copy C until you begin receiving

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b)

social security benefits, just in case there is a question about your work record and/or earnings in a

deferred comencusation blan

return. However, to help protect your social security benefits, just in case there is a question about your work record and/or earnings in a

deferred comencusation blan

Form W-2 Wage and Tax Statement

2018

Copy B, to be filed with employee's FEDERAL tax return

b Employer's identification num	043-	s social security nur 63-4257 Third-party sick pay	Void	c Employer's name, address, and ZIP code HERMITAGE INFO TECH 50 CRAGWOOD RD SUITE 30: SOUTH PLAINFIELD NJ 07080		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 1 Wages, tips, other compensation 2 Federal Income tax withheld 3 Social Security wages 4 Social Security tax withheld		
12 See Instrs. for Box 12	14 Other			e Employee's name, address, and ZIP code RAJASEKHAR REDDY CHINT 511 ARBOR DR	ΓAPALLI	5 Medicare wages and tips 7 Social Security tips 10 Dependent care benefits	6 Medicare tax withheld 8 Allocated Tips	
				CARMEL IN 46032		Verification Code	11 Nonqualified plans -af4a-e43d	
15 State Employer's sta NJ FLI	te I.D. No.	16 State wages,	tips, etc.	17 State income tax 21.03	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement

2018

2018

Copy 2, to be filed with employee's tax return for IN

		a Employee's social security number 043-63-4257		HERMITAGE INFO TECH			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 1 Wages, tips, other compensation 56958.26 2 Federal Income tax withheld 6566.26			
Employee plan		sick pay				3 Social Security wages	4 Social Security tax withheld			
12 See Instrs. for Box 12 14 Other				e Employee's name, address, and ZIP code			5 Medicare wages and tips	6 Medicare tax withheld		
					EKHAR REDDY CHIN' BOR DR	TAPALLI	7 Social Security tips	8 Allocated Tips		
				CARMEL IN 46032			10 Dependent care benefits	11 Nonqualified plans		
							Verification Code			
15 State Employer's state I.D. No. 16 State wages, tip		tips, etc.		17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
IN 013947258	84 001		33	3583.29	1049.78					

Form W-2 Wage and Tax Statement

Copy 2, to be filed with employee's tax return for NJ

d Control number			Void	c Employer	's name, address, and ZIP code	·	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
0028-19014274 0000000144-		000144-				ITAGE INFO TECH					
b Employer's identification number a Employee's social see			social security nu	mber	50 CR A	GWOOD RD SUITE 30					1 R
26-1196281 043		043-0	53-4257					1 Wages, tips, other compensation		2 Federal Income tax withheld	
	tutory	Retirem	0.0	Third-party		SOUTE	I PLAINFIELD NJ 0708	0		56958.26	6566.26
Empl		plan		sick pay					3 Social Securit	ty wages	4 Social Security tax withheld
12 See In	nstrs. for Box 12		14 Other		00.25	e Employee's name, address, and ZIP code		5 Medicare wag	ges and tips	6 Medicare tax withheld	
		1	/HC/WD		99.35						
		DI		44.39		RAJASEKHAR REDDY CHINTAPALLI			7 Social Securit	ty tips	8 Allocated Tips
						511 AR	BOR DR				
						CARM	EL IN 46032		10 Dependent o	care benefits	11 Nonqualified plans
									Verification (Code	
15 State	Employer's	state I.D.	No.	16 State wages,	, tips, etc.		17 State income tax	18 Local wages, tips, etc.	19 Lo	ocal income tax	20 Locality name
NJ 261-196-281/00		00		23	3374.97	763.22					
NJ	FLI						21.03				
											1