## 2017 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement Copy C for employee's records,

Dept. Corp. Employer use only d Control number

Employer's name, address, and ZIP code COGNIZANT TECHNOLOGY SOLUTIONS US CORPORATION 211 QUALITY CIR STE 150 COLLEGE STATION TX 77845

Batch #02673

3036

e/f Employee's name, address, and ZIP code MAINAK BHOWMICK 716 TAMARACK WAY APT 3D HERNDON VA 20170-4459

17 State income tax

19 Local income tax

355394 CL12/CTS SH0501

b Employer's FED ID number a Employee's SSA number 13-3924155 884-90-8570 2 Federal income tax withheld Wages, tips, other comp. 76198.61 14643.01 Social security wages 4 Social security tax withheld 4724.31 76198.61 Medicare wages and tips 76198.61 6 Medicare tax withheld 1104.88 B Allocated tips Social security tips Verification Code 10 Dependent care benefits e238-728e-2f9d-98a0 12a See instructions for how 12 11 Nonqualified plans 23.69 1816.29 12b P 12c DD 67.47 SDI 3512.91 TXREL 13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. TOTAL STATE

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.

The following information reflects your final 2017 pay stub plus any adjustments submitted by your employer.

Social Security Tax Withheld CA. State Income Tax 495.72 **Gross Pay** 80189.92 Box 17 of W-2 Box 4 of W-2 Local Income Tax Box 19 of W-2 Fed. Income 14643.01 **Medicare Tax** 1104.88 SUI/SDI 67.47 Tax Withheld Withheld Box 14 of W-2 Box 6 of W-2 Box 2 of W-2

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

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	CA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	80,189.92	80,189.92	80,189.92	7,633.34
Plus GTL (C-Box 12)	23.69	23.69	23.69	2.06
Less Other Cafe 125	4,015.00	4,015.00	4,015.00	137.00
Reported W-2 Wages	76,198.61	76,198.61	76,198.61	7,498.40

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

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D HERNDON VA 20170-4459 Social Security Number: 884-90-8570 Taxable Marital Status: SINGLE

Exemptions/Allowances:

FEDERAL: 0 STATE:

@ 2017 ADP. LLC

1	76198.61				
3			76198.61  Medicare wages and tips 6 Medicare t	security	tax withheld 4724.31
5				are tax withheld 1104.88	
d	Control number	Dept.	Corp.	Emplo	yer use only
35	55394 CL12/CTS	SH0501		T	3036
c	Employer's name, a	address, a	nd ZIP co	de	

4278.47

18 Local wages, tips, etc.

20 Locality name

COGNIZANT TECHNOLOGY SOLUTIONS US CORPORATION 211 QUALITY CIR STE 150 COLLEGE STATION TX 77845

b	Employer's FED ID number 13-3924155		o's SSA number 4-90-8570
7	Social security tips	8 Allocated	tips
9	Verification Code e238-728e-2f9d-98a0	10 Dependen	t care benefits
11	Nonqualified plans	12a See instr	ructions for box 12 23,69
14	Other 67.47 SDI	12b P	1816.29
		12c DD	9395.64
	3512.91 TXREL	12d	
		13 Stat emp. Re	t. plan 3rd party sick pay
e/f	Employee's name, address a	nd ZIP code	

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D

HERNDON VA 20170-4459

15 State Employer's state ID no. 16 State wages, tips, etc. 17 State income tax 1θ Local wages, tips, etc. 4278.47 20 Locality name 19 Local income tax

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

1 Wages, tips, other comp. 76198.61		2 Federal income tax withhe 14643.0			
3 Social security wages 76198.61		4 Social	security	tax withheld 4724.31	
5 Medicare wages and tips 76198.61		6 Medica	are tax w	thheld 1104.88	
d	Control number	Dept.	Corp.	Emplo	yer use only
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¢	Employer's name, a	ddress, ai	nd ZIP cod	e	
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COLLEGE STATION TX 77845

b	Employer's FED ID number 13-3924155	a Employee's SSA number 884-90-8570
7	Social security tips	8 Allocated tips
9	Verification Code	10 Dependent care benefits
11	Nonqualified plans	12a C 2.06
14	Other	12b P 1816.29
	67.47 CA SDI	12c
	3512.91 TXREL	12d
		13 Stat emp. Ret. plan 3rd party sick pa

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D HERNDON VA 20170-4459

15 State Employer's state ID no. 16 State wages, tips, etc. 7498 . 40 17 State income tax 18 Local wages, tips, etc. 495.72 19 Local income tax 20 Locality name

CA.State Reference Copy 2 Wage and Tax 20 Statement Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other 761	98.61	2	Federa	il income	tax withheld 14643.01
3	3 Social security wages 76198.61		4	Social	security	tax withheld 4724.31
5	Medicare wages an 761	d tips 98 , 61	6	Medica	are tax w	ithheld 1104.88
d	Control number	Dept.		Corp.	Emp	loyer use only
35	55394 CL12/CTS	SH0501			T	3036
_	Employer's name	ddroee a	nd	ZIP cod	0	

COGNIZANT TECHNOLOGY SOLUTIONS US CORPORATION 211 QUALITY CIR STE 150 COLLEGE STATION TX 77845

b	Employer's FED ID number 13-3924155	a Employee's SSA no 884-90-85	
7	Social security tips	8 Allocated tips	
9	Verification Code	10 Dependent care be	nefits
11	Nonqualified plans	12a C	2.06
14	Other	<sup>12b</sup> P 181	6.29
67.47 CA SDI 3512.91 TXREL	67.47 CA SDI	12c	
	12d		
		13 Stat emp. Ret. plan 3rd	party sick pay

eff Employee's name, address and ZIP code

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D

HERNDON VA 20170-4459

15 State Employer's state ID no. 16 State wages, tips, etc. 7498 . 40 17 State income tax 18 Local wages, tips, etc. 495.72 19 Local income tax 20 Locality name

CA State Filing Copy

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return. No. 1545

VA.State Reference Copy Wage and Tax Statement Copy 2 to be filed with employee's State income Tax Return.
d Control number Dept. Corp. Emp d Control number Corp. Employer use only Ť 355394 CL12/CTS SH0501

Employer's name, address, and ZIP code

COGNIZANT TECHNOLOGY SOLUTIONS US CORPORATION 211 QUALITY CIR STE 150 COLLEGE STATION TX 77845

Batch #02673

e/f Employee's name, address, and ZIP code

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D

HI	ERNDON VA 20170	-4459
b	Employer's FED ID number 13-3924155	a Employee's SSA number 884-90-8570
1	Wages, tips, other comp. 76198.61	2 Federal income tax withheld 14643.01
3	Social security wages 76198.61	4 Social security tax withheld 4724.31
5	Medicare wages and tips 76198.61	6 Medicare tax withheld 1104.88
7	Social security tips	8 Allocated tips
9	Verification Code	10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12 C 21.63
14	Other	12b DD 9395,64 12c
		12d
		13 Stat emp. Ret. plan 3rd party sick pa
	State Employer's state ID no	o. 16 State wages, tips, etc. 68700.21

18 Local wages, tips, etc. 17 State income tax

3562.57

19 Local income tax 20 Locality name

Wages, tips, other comp. 2 Federal income tax withheld 14643.01 76198.61 3 Social security wages 76198.61 4 Social security tax withheld Medicare wages and tips 76198.61 Medicare tax withheld 1104.88 d Control number Dept. Employer use only

Employer's name, address, and ZIP code

355394 CL12/CTS SH0501

COGNIZANT TECHNOLOGY SOLUTIONS US CORPORATION 211 QUALITY CIR STE 150 COLLEGE STATION TX 77845

b	Employer's FED ID number 13-3924155	a Employee's SSA number 884-90-8570	
7	Social security tips	8 Allocated tips	
9	Verification Code	10 Dependent care benefits	
11	Nonqualified plans	12a See instructions for box 12 C 21.63	
14	Other	12b DD 9395.64	
		12c	
		12d	
		13 Stat emp. Ret. plan 3rd party sick pay	

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D HERNDON VA 20170-4459

15 State | Employer's state ID no. | 16 State wages, tips, etc. | 30133924155F001 | 68700.21 17 State income tax 18 Local wages, tips, etc.

3562.57

19 Local income tax 20 Locality name

VA.State Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.

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. The following information reflects your final 2017 pay stub plus any adjustments submitted by your employer.

		VA. W-2	CA. W-2
Gross Pay		72556.58	13004.51
Federal Income Tax Withheld	Box 2 of W-2	14643.01	14643.01
Social Security Tax Withheld	Box 4 of W-2	4724.31	4724.31
Medicare Income Tax Withhele	d Box 6 of W-2	1104.88	1104.88
State Income Tax	Box 17 of W-2	3562.57	220.18
SUI/SDI Box 14 of W-2	Box 14 of W-2		

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

VA. State Wages, CA. State Wages, Tips, Etc. Box 16 of W-2 Tips, Etc. Box 16 of W-2 13,004.51 72,556.58 Gross Pay 3.09 Plus GTL (C-Box 12) 21.63 3,878.00 205.50 Less Other Cafe 125 68,700.21 12,802.10 Reported W-2 Wages

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

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D **HERNDON VA 20170-4459** 

Social Security Number:884-90-8570 Taxable Marital Status: SINGLE

2 Federal income tax withheld

4 Social security tax withheld 4724.31

14643.01

13 Stat emp. Ret. plan 3rd party sick pay

Exemptions/Allowances: FEDERAL: 0

76198.61

STATE:

Wages, tips, other comp.

Social security wages 76198.61

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1 Wages, tips, other comp. 76198.61 3 Social security wages 76198.61 5 Medicare wages and tips 76198.61		2 Federal income tax withher 14643.			
		4 Social security tax wi	tax withheld 4724.31		
		6 Medicare tax withheld 1104.8		ithheld 1104.88	
d	d Control number Dept.		Corp.	Emplo	yer use only
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С	Employer's name, a	ddress, a	nd ZIP cod	le	

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COGNIZANT TECHNOLOGY SOLUTIONS US CORPORATION 211 QUALITY CIR STE 150 COLLEGE STATION TX 77845

þ	Employer's FED ID number 13-3924155	a Employee's SSA number 884-90-8570	
7	Social security tips	8 Allocated tips	
9	Verification Code	10 Dependent care benefits	
11	Nonqualified plans	12a C   3.09	
14	Other	12b	
	.00 CA SDI	12c	
	, , , , , , , , , , , , , , , , , , , ,	12d	
		13 Stat emp. Ret. plan 3rd party sick pay	

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D

HERNDON VA 20170-4459 15 State Employer's state ID no. 16 State wages, tips, etc. CA 433-6247 4 1280

17 State income tax 220.18 19 Local income tax

> CA.State Reference Copy 2 Wage and Tax 2

18 Local wages, tips, etc.

20 Locality name

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

	, , , , , , , , , , , , , , , , , , , ,			
5	Medicare wages and tips 76198.61		6 Medicare tax withheld 1104.88	
d	Control number	Dept.	Corp.	Employer use only
355394 CL12/CTS SH0501				T 3037
c	Employer's name, address, and ZIP code			
	211 QUAL COLLEGE	LITY C	IR STI	
b	Employer's FED ID 13 - 392415		a Employee's SSA number 884-90-8570	
7	Social security tips		8 Allocated tips	
9	Verification Code		10 Dependent care benefits	
11	Nonqualified plans		<sup>12a</sup> C j	3.09
14	Other		12b	n e
	.00 CA SDI	12c		
	.00 CA	וטכ	12d	

e/f Employee's name, address and ZIP code

MAINAK BHOWMICK 716 TAMARACK WAY APT 3D

HERNDON VA 20170-4459

15 State Employer's state ID no. 16 State wages, tips, etc. 12802 . 10 17 State income tax 18 Local wages, tips, etc. 220.18

19 Local income tax 20 Locality name

CA.State Filing Copy 2 Wage and Tax Statement

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