2017 W-2 and Earnings Summary

Wage and Tax Statement Form W-2 Copy C -- For EMPLOYEE'S RECORDS 2017 This information is being furnished to IRS. If you are required to OMB No. 1545-0000 file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

OMB No. 1545-0000 Department of Treasury — Internal Revenue Service Control OCC01 A491 01186 Employer's name, address, and ZIP code SIGNATURE COMMERCIAL SOLUTIONS 200 W CYPRESS CREEK ROAD SUITE 400 FORT LAUDERDALE FL 33309 Employee's name, address, and ZIP code
RAJASHEKAR REDD PALLE 11116 WILLOW MEADOW LANE APT CHARLOTTE NC 28277 95 , 393 . 04 15 , 800 . 2 other comp. 2 Fed. income tax withheld 15,866.26 1 Wages, tips, other comp. 4 Soc. sec. tax withheld 3 Social security wages 5 Medicare wages and tips 6 Medicare tax withheld 7 Social security tips 8 Allocated tips 9 Verification code 10 Dependent care benefits AD1E-F25B-CCC7-DE71 11 Nonqualified plans 12a 12b 12c 12d Employee's SSN 831-60-7382

14

16 State wages, tips, etc.

19 Local income tax

95393.04

17 State income tax

4948.00

20 Locality name

Employer ID number (EIN) 27-0221186 15 St. Employer's state ID number

NC 600737680

18 Local wages, tips, etc.

	Wages, Tips, Other Comp.	Social Security Wages	Medicare Wages and Tips
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
Gross Pay	\$95,393.04	\$95,393.04	\$95,393.04
Less: Non-Taxable Earnings	\$0.00	(\$95,393.04)	(\$95,393.04)
Less: Retirement Deductions	\$0.00	N/A	N/A
Less: Other Pre-tax Deductions	\$0.00	\$0.00	\$0.00
Less: Third Party Sick Pay	\$0.00	\$0.00	\$0.00
Less: Excess Wages Total Reported Wages	N/A	\$0.00	N/A
	\$95,393.04	\$0.00	\$0.00
	Fed Income	Social Security	Medicare
	Box 2 of W-2	Box 4 of W-2	Box 6 of W-2
Tax Withheld	\$15,866.26		

NC State Wages, Tips, etc. Box 16 of W-2 Gross Pay Less: Non-Taxable Earnings Less: Retirement Deductions Less: Other Pre-tax Deductions Less: Third Party Sick Pay \$95,393,04 \$0.00 \$0.00 \$0.00 \$0.00 **Total Reported Wages** \$95,393.04

Tax Withheld

Form W-2

Copy 2 -- To Be Filed With

NC State Income Tax Box 17 of W-2 \$4,948.00

RAJASHEKAR REDD PALLE 11116 WILLOW MEADOW LANE APT#813 CHARLOTTE, NC 28277

Wage and Tax Statement

The Form W-2 Box 1 wages are the Gross Wages as of your last pay statement for the year minus any non-taxable earnings or deductions, plus any additional compensation received after the last pay statement. Gross pay may not match Box 1 wages due to deductions for retirement deferrals, health insurance, or other Sec. 125 cafeteria plan deductions, etc.

2017

Form W-2 Wage and Tax Statement 2017 Copy B -- To Be Filed With OMB No. 1545-0008 Employee's FEDERAL Tax Return. Department of Treasury --Internal Revenue Service This information is being furnished to the IRS. Control OCC01 A491 01186 Employer's name, address, and ZIP code

SIGNATURE COMMERCIAL SOLUTIONS 200 W CYPRESS CREEK ROAD SUITE 400 FORT LAUDERDALE FL 33309

RAJASHEKAR REDD PALLE 11116 WILLOW MEADOW LANE APT CHARLOTTE NC 28277

95,393.0 1 Wages, tips, other comp.	
3 Social security wages	4 Soc. sec. tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
7 Social security tips	8 Allocated tips
9 Verification code AD1E-F25B-CCC7-DE	10 Dependent care benefits
11 Nonqualified plans	12a 12b
13 Statutory Retirement plan Third-party sick pay	y 12c 12d
Employee's SSN 831-60-7382	14
Employer ID number (EIN) 27-0221186	
15 St. Employer's state ID number NC 600737680	16 State wages, tips, etc. 17 State income tax 95393.04 4948.00
18 Local wages, tips, etc.	19 Local income tax 20 Locality name

Copy 2 10 Be Filed Will							
Employee's State, City, or Lo	OMB No. 1545-0008 Department of Treasury						
Income Tax Return. Department of Treasury Internal Revenue Service							
Control OCC01 A491	01186						
Employer's name, address, and ZIP code							
SIGNATURE COMMERCIAL SOLUTIONS							
200 W CYPRESS CRE	EEK ROAD SUITE 400						
FORT LAUDERDALE FL 33309							
Employee's name, address, and ZIP code	DD D3111						
RAJASHEKAR REI							
11116 WILLOW	MEADOW LANE AP:						
CHARLOTTE NC 2	28277 l						
CILLICITE INC 20211							
95,393.04	15,866.26						
1 Wages, tips, other comp.	2 Fed. income tax withheld						
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3 Social security wages	4 Soc. sec. 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						
AD1E-F25B-CCC7-DE71							
11 Nonqualified plans	12a						
	12b						
13 Statutory Retirement Third-party sick pay	12c						
- employee plan sick pay							
	12d						
Employee's SSN	14						
831-60-7382							
Employer ID number (EIN)	7						
27-0221186							
	1						
15 St. Employer's state ID number 16	6 State wages, tips, etc. 17 State income tax						
NC 600737680	95393.04 4948.00						
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18 Local wages, tips, etc.	9 Local income tax 20 Locality name						

Copy 2 To Be Filed W	ах	Statement 2017							
Employee's State, City, or	Loc	al	Den	OMB No.					
Income Tax Return.			Inter	nal Revenue					
number 0CC01 A491	Control number 0CC01 A491 01186								
Employer's name, address, and ZIP code SIGNATURE COMMERCIAL SOLUTIONS 200 W CYPRESS CREEK ROAD SUITE 400 FORT LAUDERDALE FL 33309									
Employee's name, address, and ZIP code RAJASHEKAR REDD PALLE 11116 WILLOW MEADOW LANE AP'. CHARLOTTE NC 28277									
95,393.0	4	15,866.26							
1 Wages, tips, other comp.	-	2 Fed. income tax withheld							
3 Social security wages		4 Soc. sec. tax withheld							
5 Medicare wages and tips		6 Medicare tax withheld							
7 Social security tips	-	8 Allocated tips							
9 Verification code AD1E-F25B-CCC7-DE7	71	10 Dependent care benefits							
11 Nongualified plans		12a							
4	ı	12b							
13 Statutory Retirement Third-party sick pay		12c							
employée plan sick pay	ı	12d							
Employee's SSN 831-60-7382		14							
Employer ID number (EIN) 27-0221186									
15 St. Employer's state ID number 16		State wages, tips,	etc.	17 State i	ncome tax				
NC 600737680		95393.04		4948	.00				
18 Local wages, tips, etc.		Local income tax		20 Locality name					

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. Even if you don't 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 credit (EIC). You may be able to take EIC for 2017 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2017 or if income is earned for services provided while you were an inmate at a penal institution. For 2017 income limits and more information, visit www.irs.gov/etc. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return. Clergy and religious workers. If you aren't subject to social 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 employement 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-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but 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 calling 1-800-772-1213. You also may visit the SSA at www.SSA.gov. Cost of employer-sponsored health coverage (if such cost is provided by employer). The reporting in box 12, using code DD, of th

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. You may 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

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$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 & Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless 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 calculate 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 soc. sec. record (used to figure your benefits). Box 9. If you are e-filing and if there is a code in this box, enter it when prompted by your software. 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 total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also 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, or (b) included in box 3 &/or 5 if it is prior year deferral under nonqualified or section 457(b) plan that became taxable for social security & Medicare taxes this year or will be age 62 by end of calendar year, your employer should file Form SSA-131, Employer Report of Special Wa

(Instructions for Employee continued on back of Copy C.)

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Instructions for Employee (continued)

Instructions for Employee (continued)

However, if you were at least age 50 in 2017, 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 elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the "Wages, Salaries, Tips, etc." line instructions for Form 1040. 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 year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year. A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form 1040 instructions.

C—Taxable cost of group—term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals under a SIMPLE retirement account that is part of a section 401(k) carangement.

401(k) arrangement.

E--Elective deferrals under a section 408(k)(6) salary reduction agreement

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

G--Elective deferrals and employer contributions (including nonelective deferrals)

G--Elective deterrals and employer contributions (including nonelective deterrals) to a section 457(b) deferred compensation plan
H--Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See "Adjusted Gross Income" in the Form 1040 instructions for how to deduct.
J--Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)
K--20% excise tax on excess golden parachute payments. See "Other Taxes" in the Form 1040 instructions.

Form 1040 instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

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

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.

P—Excludable moving expense reimbursements paid directly to employee (not included in boxes 1, 3, or 5)

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

details on reporting this amount

R--Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.
S--Employee salary reduction contributions under a section 408(p) SIMPLE plan

(not included in box 1)

(not included in box 1)
T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to 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).
Y—Deferrals 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 plus interest. See "Other Taxes" in the Form 1040 instructions.
AA—Designated Roth contributions under a section 401(k) plan BB—Designated Roth contributions under a section 403(b) plan DD—Cost of employer-sponsored health coverage. The amount reported with

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

EE—Designated Roth contribs. under a governmental section 457(b) plan. This amt.

does not apply to contributions under a tax–exempt organization section 457(b) plan. FF-–Permitted benefits under a qualified small employer health reimbursement

FF--Permitted benefits under a qualified small employer health reimbursement arrangement
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).
Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filling your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

(Also see Notice to Employee on back of Copy B.)

(Also see Notice to Employee on back of Copy B.)