## PAGE 2

NC.State R	eference Copy
Wage a	
VV — C Stateme	
Copy 2 to be filed with employee's Stat	e Income Tax Return. 00MB No. 1545-0008
u controi number Dept.	corp. Employer use only
000097 ATLA/PAH	A 40
c Employer's name, address, 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
PRANAV KHAPARDE	
7821 CHELSEA JADE LN	
APT # 328	
CHARLOTTE NC 28269	
b Employer's FED ID number	a Employee's SSA number
47-2051918	195-39-3975
1 Wages, tips, other comp.	<sup>2</sup> Federal income tax withheld
79236.00	12999.33
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 Nongualified plans	12a See instructions for box 12
n nonquaimeu piano	
14 Other	12b
	12c   12d
	13 Stat emp. Ret. plan 3rd party sick pay
• · · <b>I</b> • · · · · ·-	
15 State Employer's state ID no	
NC 601026303	76068.00
17 State income tax 3790.00	18 Local wages, tips, etc.
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 76068.00 Social Security NC. State Income Tax 3790.00 Tax Withheld Box 17 of W-2 Box 4 of W-2 SUI/SDI Box 14 of W-2 Fed. Income 12999.33 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 NC. State Wages, Tips, Etc. Box 16 of W-2 76,068.00 **76,068.00** 

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

PRANAV KHAPARDE 7821 CHELSEA JADE LN APT # 328 CHARLOTTE NC 28269

Social Security Number: **195–39–3975** Taxable Marital Status: **SINGLE** <u>Exemptions/Allowances:</u>

FEDERAL: 2 STATE: Single, 0

© 2017 ADP, LLC

## INTENTIONALLY LEFT BLANK

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
000097 ATLA/PAH	A 40
c Employer's name, address, 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 195–39–3975
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	
PRANAV KHAPARDE 7821 CHELSEA JADE LN APT # 328 CHARLOTTE NC 28269	
15 State Employer's state ID no. NC 601026303	<sup>16</sup> State wages, tips, etc. <b>76068.00</b>
17 State income tax 3790.00	18 Local wages, tips, etc.
19 Local income tax	20 Locality name
NC.State Fil	ling Copy

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

Wages, tips, other comp.

79236.00

2 Federal income tax withheld

12999.33