2017 W-2 and EARNINGS SUMMARY



1352.77

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

Dept. Control number RO/NYO

Employer use only 15

Employer's name, address, and ZIP code ICON IT GROUP INC 6813 TROY LANE NORTH MAPLE GROVE, MN 55311

Batch #96832

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

BHAVANA RAYAPANENI 635 PRAIRIE CENTER DRIVE EDEN PRAIRIE, MN 55344

b	Employer's FED ID number 46 - 2004234	a Employee's SSA number 710-24-2057			
1	Wages, tips, other comp.	2 Federal income tax withheld			
	30488.00	3049.00			
3	Social security wages	4 Social security tax withheld			
	30488.00	1890.26			
5	Medicare wages and tips	6 Medicare tax withheld			
	30488.00	442.08			
7	Social security tips	8 Allocated tips			
9	Verification Code	10 Dependent care benefits			
11	Nonqualified plans	12a See instructions for box 12			
4.4	Other	12b			
14	Other	12c			
		12d			
		13 Stat emp. Ret. plan 3rd party sick pay			
	State Employer's state ID no	b. 16 State wages, tips, etc. 30488.00			
17	State income tax 1352.77	18 Local wages, tips, etc.			
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.

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

Gross Pay 30488.00 Social Security Tax Withheld Box 4 of W-2

MN. State Income Tax 1890.26 Box 17 of W-2

SUI/SDI Box 14 of W-2

Fed. Income 3049.00 **Medicare Tax** Tax Withheld Withheld Box 2 of W-2 Box 6 of W-2

442.08

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 Box 3 of W-2

Medicare Box 5 of W-2

MN. State Wages, Tips, Etc. Box 16 of W-2

Gross Pay Reported W-2 Wages 30,488.00

30,488.00

30,488.00

30,488.00

30,488.00

30,488.00

30,488.00

30,488.00

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

BHAVANA RAYAPANENI 635 PRAIRIE CENTER DRIVE EDEN PRAIRIE, MN 55344

Social Security Number: 710-24-2057 Taxable Marital Status: MARRIED

Exemptions/Allowances:

FEDERAL: 2 STATE:

@ 2017 ADP, LLC

1 Wages, tips, other c 3048	omp. 38.00	2 Federa	l income tax withheld 3049.00
3 Social security wage 3048	es 38.00	4 Social	security tax withheld 1890.26
Medicare wages and 3048	1 tips 38.00	6 Medica	re tax withheld 442.08
Control number	Dept.	Corp.	Employer use only

mployer's name, address, and ZIP code

ICON IT GROUP INC 6813 TROY LANE NORTH MAPLE GROVE, MN 55311

Employer's FED ID number 46-2004234	a Employee's SSA number 710-24-2057
Social security tips	8 Allocated tips
Verification Code	10 Dependent care benefits
Nonqualified plans	12a See instructions for box 12
Other	12b
	12c
	12d
×	13 Stat emp. Ret. plan 3rd party sick pay
	Verification Code Nonqualified plans Other

BHAVANA RAYAPANENI 635 PRAIRIE CENTER DRIVE EDEN PRAIRIE, MN 55344

	Employer's state ID no. 2955192	16 State wages, tips, etc. 30488.00
17 State	income tax 1352.77	18 Local wages, tips, etc.
19 Local	income tax	20 Locality name

Federal Filing Copy Wage and Tax Statement

30488.00 442.08						
30488.00 1890.26	1	Wages,			2 Federa	
30488.00	3	Social s			4 Social	
000050 RO/NYO 15	5	Medicar			6 Medic	
	d	Control	number	Dept.	Corp.	Employer use only
c Employer's name, address, and ZIP code	00	00050	RO/NYO			15
	С	Employe	er's name, ad	ldress, a	nd ZIP cod	le

ICON IT GROUP INC 6813 TROY LANE NORTH MAPLE GROVE, MN 55311

b	Employer's FED ID number 46-2004234	a Employee's SSA number 710-24-2057
7	Social security tips	8 Allocated tips
9	Verification Code	10 Dependent care benefits
11	Nonqualified plans	12a
14	Other	12b
		12c
		12d
		13 Stat emp. Ret. plan 3rd party sick pay
e/f	Employee's name, address a	and ZIP code

BHAVANA RAYAPANENI 635 PRAIRIE CENTER DRIVE EDEN PRAIRIE, MN 55344

15 State Employer's state ID no. MN 2955192	16 State wages, tips, etc. 30488.00
17 State income tax 1352.77	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

MN.State Reference Copy Wage and Tax Statement

1	Wages, tips, other o	omp. 88.00	2	Federal	income tax withheld 3049.00
3	Social security wag	es 38.00	4	Social s	security tax withheld 1890.26
5	Medicare wages and 3048	d tips 38.00	6	Medica	re tax withheld 442.08
d	Control number	Dept.		Corp.	Employer use only
00	00050 RO/NYO				15
C	Employer's name, a	ddress, a	nd	ZIP code	1

ICON IT GROUP INC 6813 TROY LANE NORTH MAPLE GROVE, MN 55311

b	Employer's FED ID number 46-2004234	a Employee's SSA number 710-24-2057
7	Social security tips	8 Allocated tips
9	Verification Code	10 Dependent care benefits
11	Nonqualified plans	12a
14	Other	12b
		12c
		12d
		13 Stat emp. Ret. plan 3rd party sick par
0/5	Employee's name address a	and 7IB code

BHAVANA RAYAPANENI 635 PRAIRIE CENTER DRIVE EDEN PRAIRIE, MN 55344

Local wages, tips, etc.
Locality name

MN.State Filing Copy Wage and Tax Statement