Notice to Employee Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tar ctrum. Even if 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. Emmed income credit (BGL), Nou may be able to take the EIC for 2018 if your adjusted gross income (AGI) is less than a certain amount. The annount of credit is based on income and family size. Workers without children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your aivestment income is more than the specified amount for 2018 or if income is carred for services provided while you were an immate at a penal institution. For 2018 in come hims and more information, vist www srs. gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return. Also see Pub. 590, taiment income creater, sur lace una to more una series and series and and and a series of the 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 employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Sulencient, with the Social Security Administration (SSA) to correct any name. SSN, or morey anomat error reported to the SSA on Form W-2. Be sure to gety our copies of Form W-2: from your employee for all corrections made so you may file them with your tax return. If your name and SSN are correct but march the same as shown on your social security cared, you should ask for a new card that display your correct name at any SSA office or by calling 800:772-1213. You may also with the SSA at www.SSA.gov. Cost of employer-sponsored health 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 57:960.80 in social security and/of TFr 1 raikoard creitement (RRFA) taxes were withheld, you any be able to chim a credit for the eaces against your federal in come tax. If you had more than one raikoad employer and more than 54,746 to 15 for 17 stable. 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. You may be required to report this amount on Form 8999. Additional Medicare Tax. See the Form 1040 instructions to determine: if you are required to complete Form 8999.
Box 6. This amount includes the 1.45% Medicare Tax withheld an all Medicare wages and tips show in Box 5, an well as the 0.9% Additional Medicare Tax on any of house Medicare wages and tips abov

\$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 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. Do Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that yo

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 it when prompted by your software. The only valid characters are the ketters AF and numents (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 (nc huding amounts from a section 125 (cafderina) plan). Any amount over 55,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Experses, to compute any taxable and nontaxable amounts. Box 11. This amount is (0) a producified in box 13 mid (57(b) plan that heacma taxable for social ascurity and Medicare taxas: this year because there is no longer a substantial risk of forferiture of your activation down and the and the code of grant and the provide the social of the social of the social for the social of the form a social of security and the specific down and the deferral and an creviced a distribution in the same calendar year. If you made a deferral and recrived a distribution in the same calendar year. If you made a deferral and the creviced a solution for Sm SN-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 return. Beckvice deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$18,500 (\$12,500 if you only here SIMPLE plans). S21,500 for scion 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$18,500. Deferrals under code H are limited to

have SharrLE pans: Sci. 1000 tot section movely pans a year product to the panel interest of pans. 571). Deferming under code Gare finited to SIS.500. Deferrals under code H are limited to \$7,000. However, if you were at kast 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 anount is not subject to the overall limit on deciti deferrals. For code G, the limit on decit deferrals may be higher for the last 3 years before you reach retriement age. Contact your plan administrator for more information. Amounts in excess of the overall decitive deferral limit must be included in income. See the instructions for Form 1040. More than the set of the set of

Inclusion in mechanics we are absorbed using the first of the first observation obs i made exces 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.

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

2018

G-Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) 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 site hay (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—Substinuitated employee business expense reimbursements (nontaxable) M—Lincollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only).

phytese only). See the Form 1040 instructions. —Excludable moning expense reinhursements paid directly to a member of the U.S. Armed Forces ot included in boxes 1, 3, or 5) —Nontavable 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 Contractor. —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 mpute 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 (cafteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

(HSA8), V—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 the Form 1040 instructions. AA—Designated Roth contributions under a section 401(k) plan.

Induit matrictoms.
 An-Designated Roth contributions under a section 401(k) plan.
 Bh-Destignated Roth contributions under a section 403(b) plan.
 Bh-Destignated Roth contributions under a section 403(b) plan.
 The amount reported with Code DD is not transported by the section 457(b) plan. This amount does not payly to contributions under at a governmental section 457(b) plan. This amount does not payly to contributions under at a governmental section 81(b) plan.
 FF-Permittel benefits under a qualified small employer beath reimbursement arrangement (GG-Income from qualified small employer beath reimbursement arrangement (GG-Income from qualified small employer beath reimbursement arrangement (GR-Income from box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Reirement Arrangements (RAA).
 Box 14, 11 fre *Reirement path" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Reirement Arrangements, leafth insurance permitted healterd, nontaxiab income, educational assistance payments, end materiance permitted healterd, nontaxiab income, educational assistance payments, end materiance permitted healterd, nontaxiab income, educational assistance payments, end materiance transmitter (RAA).
 Box 14, Grey Coyy C Or Grow 12 for a lead 3 years after the dual date for films your income tax runn. However, to help protest your acids assemptible healting, healting, and the application and the specific healting and the specific healting

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 security.

Form	W-2	Wage	and	Тах	Statement
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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 imposed on you if this income is taxable and you fail to report it. c Employer's name, address, and ZIP code Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 d Control numbe Void 0942-16028008 0000010293-ALL EM INNOVATIVE INTELLIGENT SOLUTIO mplover's identification numbe a Employee's social security number 2419 COIT RD STE A 2 Federal Income tax withh 1 Wages, tips, other comp 20-5207587 827-55-2855 98900.00 15181.19 PLANO TX 75075 13 Statutory Employee Retire plan Third-party sick pay 3 Social Security wages 4 Social Security tax with 98900.00 6131.80 12 See Instrs. for Box 12 e Employee's name, address, and ZIP code 5 Medicare wages and tip: 6 Medicare tax withhel 14 Other ORSTTWA 57100.00 989<u>00.00</u> 1434.05 ORSTTWH 57.10 NIHANTI RED CHILAKAPATI JHANSI 7 Social Security tips 8 Allocated Tips 211 NW GINA WAY 10 Dependent care benefits 11 Nongualified plans APT# 209 **BEAVERTON OR 97006** Verification Code 8099-522a-3cde-90da 15 Sta state ID No 16 State wages, tips, etc 18 Local wages, tips, etc Eme 17 State income tax 19 Local income tax 20 Locality name 98900.00 OR 1415096-4 7644.49

Form W-2 Wage and Tax Statement 2018

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

d Control number 0942-16028008 b Employer's identificati		1	ALL EM	1		c Employer's name, address, and ZIP code INNOVATIVE INTELLIGENT SOLUTIO				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
20-5207587				2419 COIT RD STE A PLANO TX 75075			1 Wage	s, tips, other compensation 98900.00	2 Federal Income tax wit	^{hheld} 15181.19			
Employee	plan	ent	sick pay				3 Socia	l Security wages 98900.00	4 Social Security tax wit	6131.80			
12 See Instra. for Box 12 14 Other ORSTTWA 57100.00 ORSTTWH 57.10			e Employee's name, address, and ZIP code NIHANTI RED CHILAKAPATI JHANSI 211 NW GINA WAY				care wages and tips 98900.00 I Security tips	6 Medicare tax withheld 8 Allocated Tips	1434.05				
					APT# 209			10 Dep	endent care benefits	11 Nonqualified plans			
		I	BEAVERTON OR 97006				Verification Code 8099-522a-3cde-90da						
OR 1415090	yer's state I.D. 6-4	No.	16 State wages, t	• •	8900.00	17 State income tax	7644.49	18 Local wages, tips, etc.		19 Local income tax	20 Locality name		

Form W-2 Wage and Tax Statement 2018

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

d Control number Void		c Employer	's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service			
0942-16028008 0	000010293-	ALL EM	INNOV	ATIVE INTELLIGENT	SOLUTIO	OMB No. 1545-0008		
b Employer's identification number a Employee's social security number		2419 C	OIT RD STE A		1 Wages, tips, other compensation 2 Federal Income tax withheld			
20-5207587		55-2855	PLAN) TX 75075		98900.00	15181.19	
13 Statutory Re Employee pla	tirement In	Third-party sick pay				3 Social Security wages	4 Social Security tax withheld	
						98900.00	6131.80	
12 See Instrs. for Box 12	14 Other			's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
	ORSTTWA	57100.				98900.00	1434.05	
	ORSTTWH	57.	⁰ NIHAN	NIHANTI RED CHILAKAPATI JHANSI		7 Social Security tips	8 Allocated Tips	
			211 NV	V GINA WAY				
		APT# 2	209		10 Dependent care benefits	11 Nonqualified plans		
		BEAVE	ERTON OR 97006					
		DLAVI	ERION OR 97000		Verification Code			
15 State Employer's stat	te I.D. No.	16 State wages, tips,	etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
OR 1415096-4			98900.00	7644.49				