



<b>W-2</b>		Employee Reference Copy		Wage and Tax Statement		<b>2017</b>	
Copy C for employee's records.		Dept.		Corp.		Employer use only	
d Control number	RH/OW2			A		32	
c Employer's name, address, and ZIP code							
ARCHENTS INC 5890 SAWMILL RD STE 200 DUBLIN, OH 43017							
Batch #96241							
e/f Employee's name, address, and ZIP code							
SANTOSH KUMAR PODISHETTI 5200 GREYSTONE SUMMIT DR APT 914 COLUMBUS, GA 31909							
b Employer's FED ID number	38-3129575			a Employee's SSA number	855-77-2179		
1 Wages, tips, other comp.	52440.00			2 Federal income tax withheld	7147.26		
3 Social security wages	52440.00			4 Social security tax withheld	3251.28		
5 Medicare wages and tips	52440.00			6 Medicare tax withheld	760.38		
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	31.02 SUI			12b			
				12c			
				12d			
				13 Stat emp	Ret. plan	3rd party sick pay	
15 State	Employer's state ID no.	TOTAL STATE		16 State wages, tips, etc.			
17 State income tax	1583.72			18 Local wages, tips, etc.			
19 Local income tax	960.18			20 Locality name	TOTAL CITY		

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	52440.00	Social Security Tax Withheld	3251.28	OH. State Income Tax	223.26
		Box 4 of W-2		Box 17 of W-2	
Fed. Income Tax Withheld	7147.26	Medicare Tax Withheld	760.38	Local Income Tax	960.18
Box 2 of W-2		Box 6 of W-2		Box 19 of W-2	
				SUI/SDI	31.02
				Box 14 of W-2	

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

	Wages, Tips, other Compensation	Social Security Wages	Medicare Wages	OH. State Wages, Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2
Gross Pay	52,440.00	52,440.00	52,440.00	8,125.33
Reported W-2 Wages	52,440.00	52,440.00	52,440.00	8,125.33

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

**SANTOSH KUMAR PODISHETTI**  
5200 GREYSTONE SUMMIT DR  
APT 914  
COLUMBUS, GA 31909

Social Security Number: 855-77-2179  
Taxable Marital Status: MARRIED  
Exemptions/Allowances:  
FEDERAL: 1  
STATE: 0

© 2017 ADP, LLC

1 Wages, tips, other comp.	52440.00			2 Federal income tax withheld	7147.26		
3 Social security wages	52440.00			4 Social security tax withheld	3251.28		
5 Medicare wages and tips	52440.00			6 Medicare tax withheld	760.38		
d Control number	Dept.	Corp.	Employer use only				
000101	RH/OW2		A	32			
c Employer's name, address, and ZIP code							
ARCHENTS INC 5890 SAWMILL RD STE 200 DUBLIN, OH 43017							
b Employer's FED ID number	38-3129575			a Employee's SSA number	855-77-2179		
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	31.02 SUI			12b			
				12c			
				12d			
				13 Stat emp	Ret. plan	3rd party sick pay	
15 State	Employer's state ID no.	TOTAL STATE		16 State wages, tips, etc.			
17 State income tax	1583.72			18 Local wages, tips, etc.			
19 Local income tax	960.18			20 Locality name	TOTAL CITY		
Federal Filing Copy				OH.State Reference Copy			
<b>W-2</b>		Wage and Tax Statement		<b>2017</b>		Copy B to be filed with employee's Federal Income Tax Return.	
Copy B to be filed with employee's		Federal Income Tax Return.		Copy 2 to be filed with employee's State Income Tax Return.		Return.	

1 Wages, tips, other comp.	52440.00			2 Federal income tax withheld	7147.26		
3 Social security wages	52440.00			4 Social security tax withheld	3251.28		
5 Medicare wages and tips	52440.00			6 Medicare tax withheld	760.38		
d Control number	Dept.	Corp.	Employer use only				
000101	RH/OW2		A	32			
c Employer's name, address, and ZIP code							
ARCHENTS INC 5890 SAWMILL RD STE 200 DUBLIN, OH 43017							
b Employer's FED ID number	38-3129575			a Employee's SSA number	855-77-2179		
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	
15 State	Employer's state ID no.	OH 52-551611 8		16 State wages, tips, etc.	8125.33		
17 State income tax	223.26			18 Local wages, tips, etc.	8125.33		
19 Local income tax	162.51			20 Locality name	DUBLIN		
Federal Filing Copy				OH.State Reference Copy			
<b>W-2</b>		Wage and Tax Statement		<b>2017</b>		Copy 2 to be filed with employee's State Income Tax Return.	
Copy 2 to be filed with employee's		State Income Tax Return.		Copy 2 to be filed with employee's State Income Tax Return.		Return.	

1 Wages, tips, other comp.	52440.00			2 Federal income tax withheld	7147.26		
3 Social security wages	52440.00			4 Social security tax withheld	3251.28		
5 Medicare wages and tips	52440.00			6 Medicare tax withheld	760.38		
d Control number	Dept.	Corp.	Employer use only				
000101	RH/OW2		A	32			
c Employer's name, address, and ZIP code							
ARCHENTS INC 5890 SAWMILL RD STE 200 DUBLIN, OH 43017							
b Employer's FED ID number	38-3129575			a Employee's SSA number	855-77-2179		
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	
15 State	Employer's state ID no.	OH 52-551611 8		16 State wages, tips, etc.	8125.33		
17 State income tax	223.26			18 Local wages, tips, etc.	8125.33		
19 Local income tax	162.51			20 Locality name	DUBLIN		
Federal Filing Copy				OH.State Filing Copy			
<b>W-2</b>		Wage and Tax Statement		<b>2017</b>		Copy 2 to be filed with employee's State Income Tax Return.	
Copy 2 to be filed with employee's		State Income Tax Return.		Copy 2 to be filed with employee's State Income Tax Return.		Return.	



City or Local Reference Copy		Wage and Tax Statement		2017	
Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008					
d Control number	Dept.	Corp.	Employer use only		
000101	RH/OW2		A	33	
c Employer's name, address, and ZIP code					
ARCHENTS INC 5890 SAWMILL RD STE 200 DUBLIN, OH 43017					
Batch #96241					
e/f Employee's name, address, and ZIP code					
SANTOSH KUMAR PODISHETTI 5200 GREYSTONE SUMMIT DR APT 914 COLUMBUS, GA 31909					
b Employer's FED ID number	a Employee's SSA number				
38-3129575	855-77-2179				
1 Wages, tips, other comp.	2 Federal income tax withheld				
52440.00	7147.26				
3 Social security wages	4 Social security tax withheld				
52440.00	3251.28				
5 Medicare wages and tips	6 Medicare tax withheld				
52440.00	760.38				
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		
15 State Employer's state ID no.	16 State wages, tips, etc.				
OH 52-551611 8	8125.33				
17 State income tax	18 Local wages, tips, etc.				
	8125.33				
19 Local income tax	20 Locality name				
162.51	DUBLIN				

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	8125.33	Social Security Tax Withheld	3251.28	Local Income Tax	162.51
		Box 4 of W-2		Box 19 of W-2	
				SUI/SDI	
				Box 14 of W-2	
Fed. Income Tax Withheld	7147.26	Medicare Tax Withheld	760.38		
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	8,125.33	DUBLIN Local Wages, Tips, Etc. Box 18 of W-2	8,125.33
Reported W-2 Wages			8,125.33

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

SANTOSH KUMAR PODISHETTI  
5200 GREYSTONE SUMMIT DR  
APT 914  
COLUMBUS, GA 31909

Social Security Number: 855-77-2179  
Taxable Marital Status: MARRIED  
Exemptions/Allowances:  
FEDERAL: 1  
LOCAL: 0

© 2017 ADP, LLC

1 Wages, tips, other comp.	2 Federal income tax withheld				
52440.00	7147.26				
3 Social security wages	4 Social security tax withheld				
52440.00	3251.28				
5 Medicare wages and tips	6 Medicare tax withheld				
52440.00	760.38				
d Control number	Dept.	Corp.	Employer use only		
000101	RH/OW2		A	33	
c Employer's name, address, and ZIP code					
ARCHENTS INC 5890 SAWMILL RD STE 200 DUBLIN, OH 43017					
b Employer's FED ID number	a Employee's SSA number				
38-3129575	855-77-2179				
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		
15 State Employer's state ID no.	16 State wages, tips, etc.				
OH 52-551611 8	8125.33				
17 State income tax	18 Local wages, tips, etc.				
	8125.33				
19 Local income tax	20 Locality name				
162.51	DUBLIN				
e/f Employee's name, address and ZIP code					
SANTOSH KUMAR PODISHETTI 5200 GREYSTONE SUMMIT DR APT 914 COLUMBUS, GA 31909					
15 State Employer's state ID no.	16 State wages, tips, etc.				
OH 52-551611 8	8125.33				
17 State income tax	18 Local wages, tips, etc.				
	8125.33				
19 Local income tax	20 Locality name				
162.51	DUBLIN				

INTENTIONALLY  
LEFT BLANK

City or Local Filing Copy		Wage and Tax Statement		2017	
Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008					



<b>W-2</b>		PA, State Reference Copy	Wage and Tax Statement		<b>2017</b>
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008					
d Control number	Dept.	Corp.	Employer use only		
000101	RH/OW2		<b>A</b>	<b>34</b>	
c Employer's name, address, and ZIP code					
<b>ARCHENTS INC</b> <b>5890 SAWMILL RD STE 200</b> <b>DUBLIN, OH 43017</b>					
<b>Batch #96241</b>					
e/f Employee's name, address, and ZIP code					
<b>SANTOSH KUMAR PODISHETTI</b> <b>5200 GREYSTONE SUMMIT DR</b> <b>APT 914</b> <b>COLUMBUS, GA 31909</b>					
b Employer's FED ID number	a Employee's SSA number				
38-3129575	855-77-2179				
1 Wages, tips, other comp.	2 Federal income tax withheld				
52440.00	7147.26				
3 Social security wages	4 Social security tax withheld				
52440.00	3251.28				
5 Medicare wages and tips	6 Medicare tax withheld				
52440.00	760.38				
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				
31.02 SUI	12c				
	12d				
	13 Stat emp. Ret. plan 3rd party sick pay				
15 State Employer's state ID no.	16 State wages, tips, etc.				
PA 9071 0026	44314.67				
17 State income tax	18 Local wages, tips, etc.				
1360.46	44314.67				
19 Local income tax	20 Locality name				
797.67	390902				

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.

<b>Gross Pay</b>	44314.67	<b>Social Security Tax Withheld</b>	3251.28	<b>PA. State Income Tax</b>	1360.46
		Box 4 of W-2		Box 17 of W-2	
				<b>Local Income Tax</b>	797.67
				Box 19 of W-2	
<b>Fed. Income Tax Withheld</b>	7147.26	<b>Medicare Tax Withheld</b>	760.38	<b>SUI/SDI</b>	31.02
Box 2 of W-2		Box 6 of W-2		Box 14 of W-2	

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

Gross Pay	44,314.67	PA. State Wages, Tips, Etc. Box 16 of W-2	390902	Local Wages, Tips, Etc. Box 18 of W-2	44,314.67
Reported W-2 Wages	44,314.67				44,314.67

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

**SANTOSH KUMAR PODISHETTI**  
**5200 GREYSTONE SUMMIT DR**  
**APT 914**  
**COLUMBUS, GA 31909**

Social Security Number: 855-77-2179  
Taxable Marital Status: MARRIED  
Exemptions/Allowances:  
FEDERAL: 1  
STATE: 0

© 2017 ADP, LLC

1 Wages, tips, other comp.	2 Federal income tax withheld				
52440.00	7147.26				
3 Social security wages	4 Social security tax withheld				
52440.00	3251.28				
5 Medicare wages and tips	6 Medicare tax withheld				
52440.00	760.38				
d Control number	Dept.	Corp.	Employer use only		
000101	RH/OW2		<b>A</b>	<b>34</b>	
c Employer's name, address, and ZIP code					
<b>ARCHENTS INC</b> <b>5890 SAWMILL RD STE 200</b> <b>DUBLIN, OH 43017</b>					
b Employer's FED ID number	a Employee's SSA number				
38-3129575	855-77-2179				
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				
31.02 SUI	12c				
	12d				
	13 Stat emp. Ret. plan 3rd party sick pay				
15 State Employer's state ID no.	16 State wages, tips, etc.				
PA 9071 0026	44314.67				
17 State income tax	18 Local wages, tips, etc.				
1360.46	44314.67				
19 Local income tax	20 Locality name				
797.67	390902				

1 Wages, tips, other comp.	2 Federal income tax withheld				
52440.00	7147.26				
3 Social security wages	4 Social security tax withheld				
52440.00	3251.28				
5 Medicare wages and tips	6 Medicare tax withheld				
52440.00	760.38				
d Control number	Dept.	Corp.	Employer use only		
000101	RH/OW2		<b>A</b>	<b>34</b>	
c Employer's name, address, and ZIP code					
<b>ARCHENTS INC</b> <b>5890 SAWMILL RD STE 200</b> <b>DUBLIN, OH 43017</b>					
b Employer's FED ID number	a Employee's SSA number				
38-3129575	855-77-2179				
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				
15 State Employer's state ID no.	16 State wages, tips, etc.				
PA 9071 0026	44314.67				
17 State income tax	18 Local wages, tips, etc.				
1360.46	44314.67				
19 Local income tax	20 Locality name				
797.67	390902				

1 Wages, tips, other comp.	2 Federal income tax withheld				
52440.00	7147.26				
3 Social security wages	4 Social security tax withheld				
52440.00	3251.28				
5 Medicare wages and tips	6 Medicare tax withheld				
52440.00	760.38				
d Control number	Dept.	Corp.	Employer use only		
000101	RH/OW2		<b>A</b>	<b>34</b>	
c Employer's name, address, and ZIP code					
<b>ARCHENTS INC</b> <b>5890 SAWMILL RD STE 200</b> <b>DUBLIN, OH 43017</b>					
b Employer's FED ID number	a Employee's SSA number				
38-3129575	855-77-2179				
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				
15 State Employer's state ID no.	16 State wages, tips, etc.				
PA 9071 0026	44314.67				
17 State income tax	18 Local wages, tips, etc.				
1360.46	44314.67				
19 Local income tax	20 Locality name				
797.67	390902				

<b>W-2</b>	PA, State Filing Copy	Wage and Tax Statement		<b>2017</b>
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008				

<b>W-2</b>	City or Local Reference Copy	Wage and Tax Statement		<b>2017</b>
Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008				

<b>W-2</b>	City or Local Filing Copy	Wage and Tax Statement		<b>2017</b>
Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008				

## 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 Form 8959.

**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 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. 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 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. 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 (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 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box should not be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and 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 copy.

**Box 12.** The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective 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 \$18,000 (\$12,500 if you only have SIMPLE plans; \$21,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$18,000. Deferrals under code H are limited to \$7,000.

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 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

**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 "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.

**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 the Form 1040 instructions.

**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.

**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)

**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 Code DD is not taxable.**

**EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

**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 filing 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.

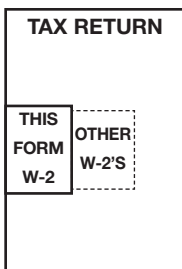
Department of the Treasury - Internal Revenue Service

**NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.**

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.

### IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



## 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 the 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/eitc](http://www.irs.gov/eitc). 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 employment 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](http://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 2017 and more than \$7,886.40 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,630.50 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 or Form 1040A instructions and Pub. 505, Tax Withholding and Estimated Tax.