

Form **W-2 Wage and Tax Statement 2018**

c Employer's name, address, and ZIP code INSURANCE SERVICES OFFICE, INC 545 WASHINGTON BOULEVARD JERSEY CITY NJ 07310		7 Social security tips	1 Wages, tips, other compensation 109699.54	2 Federal income tax withheld 10164.66
		8 Allocated tips	3 Social security wages 117544.54	4 Social security tax withheld 7287.76
		9 Verification code	5 Medicare wages and tips 117544.54	6 Medicare tax withheld 1704.40
		10 Dependent care benefits 5000.00	11 Nonqualified plans	12a See instructions for box 12 C 87.30
e Employee's name, address, and ZIP code BHASKAR DHONTHA 2208 PLAZA DRIVE WOODBRIAGE NJ 07095		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	14 Other MED 7552.32 HCRA 500.00 VIS 146.40 TRAN 1724.00	12b D 7845.00 12c DD 22449.60 12d
15 State NJ	Employer's state ID number 133131412000	16 State wages, tips, etc. 125492.26	17 State income tax 4627.54	18 Local wages, tips, etc.
			19 Local income tax 30.33	20 Locality name FLI

Copy B-To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.
OMB No. 1545-0008

Dept. of the Treasury - IRS
Visit the IRS website at www.irs.gov/efile.

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.

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Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

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