Employee Ref	erence Copy				
Wage a	nd Tax 2017				
VV⁻ Statement ZUI					
Copy C for employee's records.	OMB No. 1545-0008				
d Control number Dept.	Corp. Employer use only A 42				
000057 RM/6DI					
c Employer's name, address, a					
SINGULAR ANA					
17440 DALLAS SUITE 250	PARKWAY				
DALLAS, TX 75	287				
	201				
	Batch #96775				
e/f Employee's name, address, a	ind ZIP code				
RAMYA VENNAMANEN	I				
10005 PINE SHADOW	DRIVE				
APT 203					
CHARLOTTE, NC 282	62				
b Employer's FED ID number a Employee's SSA number					
46-1614086 1 Wages, tips, other comp.	2 Federal income tax withheld				
28000.00	2477.52				
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 Nonqualified plans	12a See instructions for box 12				
14 Other	12b				
14 Other	12c				
	12d 13 Stat emp Ret. plan 3rd party sick pa				
15 State Employer's state ID no					
NC 600997042	28000.00				
17 State income tax	18 Local wages, tips, etc.				
19 Local income tax	20 Locality name				

2017 W-2 and 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	28000.00	Social Security Tax Withheld Box 4 of W-2	NC. State Income Tax Box 17 of W-2 SUI/SDI
Fed. Income Tax Withheld	2477.52	Medicare Tax Withheld	Box 14 of W-2
Box 2 of W-2		Box 6 of W-2	

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

	Wages, Tips, other	Social Security	Medicare	NC. State Wages,
	Compensation	Wages	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 Reported W-2 Wages	28,000.00	28,000.00	28,000.00	28,000.00
	28,000.00	0.00	0.00	28,000.00

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

RAMYA VENNAMANENI 10005 PINE SHADOW DRIVE APT 203 CHARLOTTE, NC 28262

Social Security Number: 779-55-0538 Taxable Marital Status: MARRIED

Exemptions/Allowances:

FEDERAL: 2 STATE: Married, 2

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1 Wages, tips, other comp. 28000.00	2 Federal income tax withheld 2477.52	1 Wages, tips, other comp. 28000.00	2 Federal income tax withheld 2477.52	1 Wages, tips, other comp. 28000.00	2 Federal income tax withheld 2477.52
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept. 000057 RM/6DI	Corp. Employer use only A 42	d Control number Dept. 000057 RM/6DI	Corp. Employer use only A 42	d Control number Dept.	Corp. Employer use only A 42
c Employer's name, address, a		c Employer's name, address, a		c Employer's name, address, a	
SINGULAR ANALYSTS INC		SINGULAR ANALYSTS INC		SINGULAR ANALYSTS INC	
17440 DALLAS PARKWAY		17440 DALLAS PARKWAY		17440 DALLAS PARKWAY	
SUITE 250		SUITE 250		SUITE 250	
DALLAS, TX 75	287	DALLAS, TX 75	287	DALLAS, TX 75287	
b Employer's FED ID number 46-1614086	a Employee's SSA number 779-55-0538	b Employer's FED ID number 46-1614086	a Employee's SSA number 779-55-0538	b Employer's FED ID number 46-1614086	a Employee's SSA number 779-55-0538
7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips	7 Social security tips	8 Allocated tips
9 Verification Code	10 Dependent care benefits	9 Verification Code	10 Dependent care benefits	9 Verification Code	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	1 2 a	11 Nonqualified plans	12a
14 Other	12b	14 Other	12b	14 Other	12b
	12c		12c		12c
	12d		12d		12d
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pa
e/f Employee's name, address an	d ZIP code	e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	nd ZIP code
RAMYA VENNAMANEN	I	RAMYA VENNAMANENI		RAMYA VENNAMANENI	
10005 PINE SHADOW	DRIVE	10005 PINE SHADOW DRIVE		10005 PINE SHADOW DRIVE	
APT 203		APT 203		APT 203	
CHARLOTTE, NC 282		CHARLOTTE, NC 28262		CHARLOTTE, NC 28262	
15 State Employer's state ID no. NC 600997042	16 State wages, tips, etc. 28000.00	15 State Employer's state ID no NC 600997042	. 16 State wages, tips, etc. 28000.00	15 State Employer's state ID no NC 600997042	. 16 State wages, tips, etc. 28000.00
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fil	ing Copy	NC.State R	eference Copy	NC.State Fi	ling Copy
W-2 Wage all Statem Copy B to be filed with employee's Fe	nd Tax 2017	W-2 Wage a Stateme	nd Tax 2017	W-2 Wage a Statem	nd Tax 2017