

2017 W-2 and EARNINGS SUMMARY

This Summary is included with your W-2 to help describe portions in more detail. The reverse side includes information that will also be helpful.

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

Employee Reference Copy			
W-2 Wage and Tax Statement		2017	
Copy C for employee's records. OMB No. 1545-0008			
d Control number 7157105364 WNY	Dept. 01F652	Corp.	Employer use only S 846
c Employer's name, address, and ZIP code CDI CORPORATION 125 LAKEVIEW DR SUITE D CROSS LANES, WV 25313			
e/f Employee's name, address, and ZIP code JOBISH K SOMASUNDARAN 320 S PROSPECTS AVE APT 25 REDONDO BEACH, CA 90277-3559			
b Employer's FED ID number 23-1341909	a Employee's SSA number 071-63-5541		
1 Wages, tips, other comp. 4800.00	2 Federal income tax withheld 1250.16		
3 Social security wages 4800.00	4 Social security tax withheld 297.60		
5 Medicare wages and tips 4800.00	6 Medicare tax withheld 69.60		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other 43.20 CASDI	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 428.41	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

	Wages, tips, Other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2
GROSS PAY	4,800.00	4,800.00	4,800.00

W-2 WAGES 4,800.00 4,800.00 4,800.00

JOBISH K SOMASUNDARAN
320 S PROSPECTS AVE APT 25
REDONDO BEACH, CA 90277-3559

Social Security Number: 071-63-5541
Taxable Marital Status:
Single
Exemptions/Allowances:
Federal: 0
State: 0
Local: 0



© 2016 ADP, LLC

PAGE 01 OF 01

Fold and Detach Here

1 Wages, tips, other comp. 4800.00	2 Federal income tax withheld 1250.16		
3 Social security wages 4800.00	4 Social security tax withheld 297.60		
5 Medicare wages and tips 4800.00	6 Medicare tax withheld 69.60		
d Control number 7157105364 WNY	Dept. 01F652	Corp.	Employer use only 846
c Employer's name, address, and ZIP code CDI CORPORATION 125 LAKEVIEW DR SUITE D CROSS LANES, WV 25313			
b Employer's FED ID number 23-1341909	a Employee's SSA number 071-63-5541		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other 43.20 CASDI	12b		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
e/f Employee's name, address and ZIP code JOBISH K SOMASUNDARAN 320 S PROSPECTS AVE APT 25 REDONDO BEACH, CA 90277-3559			
15 State Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.		
17 State income tax 428.41	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

1 Wages, tips, other comp. 4800.00	2 Federal income tax withheld 1250.16		
3 Social security wages 4800.00	4 Social security tax withheld 297.60		
5 Medicare wages and tips 4800.00	6 Medicare tax withheld 69.60		
d Control number 7157105364 WNY	Dept. 01F652	Corp.	Employer use only 846
c Employer's name, address, and ZIP code CDI CORPORATION 125 LAKEVIEW DR SUITE D CROSS LANES, WV 25313			
b Employer's FED ID number 23-1341909	a Employee's SSA number 071-63-5541		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other 43.20 CASDI	12b		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
e/f Employee's name, address and ZIP code JOBISH K SOMASUNDARAN 320 S PROSPECTS AVE APT 25 REDONDO BEACH, CA 90277-3559			
15 State Employer's state ID no. CA 167-2340 5	16 State wages, tips, etc. 4800.00		
17 State income tax 428.41	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

1 Wages, tips, other comp. 4800.00	2 Federal income tax withheld 1250.16		
3 Social security wages 4800.00	4 Social security tax withheld 297.60		
5 Medicare wages and tips 4800.00	6 Medicare tax withheld 69.60		
d Control number 7157105364 WNY	Dept. 01F652	Corp.	Employer use only
c Employer's name, address, and ZIP code CDI CORPORATION 125 LAKEVIEW DR SUITE D CROSS LANES, WV 25313			
b Employer's FED ID number 23-1341909	a Employee's SSA number 071-63-5541		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other 43.20 CASDI	12b		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
e/f Employee's name, address and ZIP code JOBISH K SOMASUNDARAN 320 S PROSPECTS AVE APT 25 REDONDO BEACH, CA 90277-3559			
15 State Employer's state ID no. CA 167-2340 5	16 State wages, tips, etc. 4800.00		
17 State income tax 428.41	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

Federal Filing Copy
W-2 Wage and Tax Statement **2017**
OMB No. 1545-0008
Copy B to be filed with employee's Federal Income Tax Return.

CA. State Reference Copy
W-2 Wage and Tax Statement **2017**
OMB No. 1545-0008
Copy 2 to be filed with employee's State Income Tax Return.

CA. State Filing Copy
W-2 Wage and Tax Statement **2017**
OMB No. 1545-0008
Copy 2 to be filed with employee's State Income Tax Return.