	oyer identification number (EIN)	71-0794409		12a See ir	nstructions for box 12	1 Wages, tips, other compe		2 Federal incom	
© Employer's name, address, and ZIP code WAL-MART ASSOCIATES, INC.				\$ 3248.77	70359.15		13692.13		
W. E. M. K. T. Lobo C. M. Z.S., M. C.			12b	l c	3 Social security wages 10274.86		4 Social security tax withheld		
			§ \$ 12c		5 Medicare wages and tips		637.04		
702 \$1	W 8TH STREET			l c	\$		4.86	o iviedicare tax	148.99
BENTONVILLE, AR 72716-0135				12d		7 Social security tips		8 Allocated tips	
e Employee's first name and initial Last name Suff.				\$	_				
00000007763 1 of 1			12e ្ទ	l\$	9 Verification Code		10 Dependent	care benefits	
VIJAYA MADHURI DEVARAPALLI				ion is being furnished to the					
VBATA MADITORI DEVARRATALLI			Internal Reve	nue Service.	11 Nonqualified plans		13 Statutory employee	Retirement Third-party plan sick pay	
300 NE MOBERLY LN APT I 11			Copy B To Be Filed With		14.00				
BENTONVILLE, AR 72712				Employee's FEDERAL		14 Other		10000) C2
DENTORVILLE, AR 12/12				Tax Return		MOVING EXP		10899	7.62
		Import Code	e: 6D8MW3QF	a Employe	ee's social security number	r			
f Emplo	oyee's address and ZIP code	Import Code	e. oDow w sQr	6	593-11-1026				
	Employer's state ID number		17 State income t		18 Local wages, tips, etc.	19 Local income tax	20 Locality	name	
AR_	12286157WHW	$ \frac{70359.15}{}$	$ \frac{3}{2} $	973.37		+			
	0.00	D	L		0110 # 4545 0000				
Form W	-2 Wage and Tax Statement 2017	Department of the Treasu	ry–Internal Revenu	ie Service	OMB # 1545-0008	Copy B 1	o Be Filed \	With Employee's	FEDERAL Tax Return
	oyer identification number (EIN)	71-0794409		12a		1 Wages, tips, other compe		2 Federal incor	
c Employer's name, address, and ZIP code					\$ 3248.77		9.15		13692.13
WAL-	MART ASSOCIATES, INC.			12b	1.0	3 Social security wages	14.06	4 Social securit	-
				12c	\$		74.86	6 Medicare tax	637.04
				lc	\$	5 Medicare wages and tips	74.86	6 Medicare tax	148.99
	W 8TH STREET			12d	ĮΨ	7 Social security tips	4.60	8 Allocated tips	
	ONVILLE, AR 72716-0135		0#		\$	7 Social security ups		6 Anocated tips	•
0000000	•	st name	Suff.	12e		9 Verification Code		10 Dependent of	care benefits
				d	\$	_			
VIJA	'A MADHURI DEVARAPALLI					11 Nonqualified plans		13 Statutory employee	Retirement Third-party plan sick pay
200 NI	E MODEDI VI N ADTI 11			Conv. 2 To Do Filad With		· · · · —			
300 NE MOBERLY LN APT I 11 BENTONVILLE, AR 72712			Copy 2 To Be Filed With Employee's STATE, CITY or		14 Other				
DENI	ON VILLE, AR 72/12			LOCAL Income Tax Return		MOVING EXP		10899.62	
			con mucos		ee's social security number				
f Empl	oyee's address and ZIP code	Import Code	e: 6D8MW3QF		593-11-1026				
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income t	ax '	18 Local wages, tips, etc.	19 Local income tax	20 Locality	name	
AR	12 <u>28</u> 6 <u>15</u> 7 <u>WHW</u>		3	39 <u>73.</u> 3 <u>7</u>		 	L — —		
Form W-2 Wage and Tax Statement 2017 Department of the Treasury-Internal Revenue					OMB # 1545-0008	Copy 2 To Be Filed With Employee's STATE, CITY or LOCAL Income Tax Return			
h Emple	over identification number (EINI)					1 Wages tips other compa	nection	2 Fodorol incon	no toy withhold
	oyer identification number (EIN) oyer's name, address, and ZIP code	71-0794409		12a	3248.77	1 Wages, tips, other compe	nsation 59.15	2 Federal incon	
c Emplo		71-0794409		12a - ਊ DD	\$ 3248.77	703:			13692.13
c Emplo	oyer's name, address, and ZIP code	71-0794409		12a - § DD 12b	\$ 3248.77	703:		2 Federal incom	13692.13
c Emplo	oyer's name, address, and ZIP code	71-0794409		12a - § DD 12b	ļΨ	703:	59.15		13692.13 ty tax withheld 637.04
c Emple WAL-	oyer's name, address, and ZIP code	71-0794409		12a -	ļΨ	703: 3 Social security wages 102' 5 Medicare wages and tips	59.15	4 Social securit	13692.13 ty tax withheld 637.04
c Emple WAL-	oyer's name, address, and ZIP code MART ASSOCIATES, INC.	71-0794409		12a 	\$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips	74.86	4 Social securit	13692.13 ty tax withheld 637.04 withheld 148.99
WAL- 702 SV BENT	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial	st name	Suff.	12a 	\$	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips	74.86	4 Social securit 6 Medicare tax 8 Allocated tips	13692.13 by tax withheld 637.04 withheld 148.99
WAL-	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial	st name	Suff.	12a	\$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips 102'	74.86	4 Social securit 6 Medicare tax	13692.13 by tax withheld 637.04 withheld 148.99
VAL- 702 SV BENT e Emple	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial	st name	Suff.	12a	\$ \$ \$	703: 3 Social security wages 102: 5 Medicare wages and tips 102: 7 Social security tips 9 Verification Code	74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of	13692.13 by tax withheld 637.04 withheld 148.99 care benefits
VAL- 702 SV BENT e Emple	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial La: 1 of 1	st name	Suff.	12a	\$ \$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips	74.86	4 Social securit 6 Medicare tax 8 Allocated tips	13692.13 by tax withheld 637.04 withheld 148.99
702 SV BENT e Emplo	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial La: 1 of 1	st name	Suff.	12a § DD 12b § 12c § 12d 12d 12d 5 12d	\$ \$ \$ S	703: 3 Social security wages 102: 5 Medicare wages and tips 102: 7 Social security tips 9 Verification Code 11 Nonqualified plans	74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of	13692.13 by tax withheld 637.04 withheld 148.99 care benefits
702 SV BENT e Emple 0000000 VIJAY	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial Lai 7763 A MADHURI DEVARAPALLI	st name	Suff.	12a \$\frac{1}{2}DD 12b 12c \$\frac{1}{2}\text{12d} 12e \$\frac{1}{2}\text{12d} \$\frac{1}{2}	\$ \$ \$ S S To Be Filed With ee's STATE, CITY or	703: 3 Social security wages 102: 5 Medicare wages and tips 102: 7 Social security tips 9 Verification Code 11 Nonqualified plans	74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick play
702 SV BENT e Emple 0000000 VIJAY	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial Take 1 of 1 A MADHURI DEVARAPALLI E MOBERLY LN APT I 11	st name	Suff.	12a 12b 12c 12c 12c 12c Employ	\$ \$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102: 5 Medicare wages and tips 102: 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of six	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick play
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT	weer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial T/763 lof: A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712	st name I	Suff.	12a DD 12b 12c 12c 12c Employ LOCAL a Employe	\$ \$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102: 5 Medicare wages and tips 102: 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of six	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick play
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT	wee's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial T763 'A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 oyee's address and ZIP code	st name I Import Code		12a DD 12b 12c 12c 12c Employ 2 Employ LOCAL a Employee	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102: 5 Medicare wages and tips 102: 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	74.86 74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of Saturory employee	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick play
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT	weer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial T/763 lof: A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712	st name I	e: 6D8MW3QF	12a DD 12b 12c 12c 12c Employ 2 Employ LOCAL a Employee	\$ \$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of Saturory employee	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick play
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial I of: A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Deve's address and ZIP code Employer's state ID number	st name I Import Code	e: 6D8MW3QF	12a Î DD 12b 12c 12c 12d LOCAL a Employe ax	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	74.86 74.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of Saturory employee	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick play
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial I of: A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Deve's address and ZIP code Employer's state ID number	st name I Import Code	e: 6D8MW3QF	12a DDD 12b 12c 12c 12e Copy 2 Employ LOCAL a Employee ax 973.37	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	74.86 74.86 20 Locality	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of single problems of the security of the securi	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick play
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl 15 State AR	wee's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial YA MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Devee's address and ZIP code Employer's state ID number 12286157WHW	Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur	e: 6D8MW3QF	12a SDD 12b S 12c S 12c S 12e	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	74.86 74.86 20 Locality	4 Social securii 6 Medicare tax 8 Allocated tips 10 Dependent of a statutory employee 10899	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan sick pay 2.62 CAL Income Tax Return
702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR Form W	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial I of: A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Oyee's address and ZIP code Employer's state ID number 12286157WHW	Import Code 16 State wages, tips, etc. 70359.15	e: 6D8MW3QF	12a 12b 12c	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er	74.86 74.86 20 Locality	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of single problems of the security of the securi	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Skk pey 20.62 CAL Income Tax Return ne tax withheld
Form W	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial I of: A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Oyee's address and ZIP code Employer's state ID number 12286157WHW	Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur	e: 6D8MW3QF	12a 12b 12c	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er	74.86 74.86 20 Locality	4 Social securii 6 Medicare tax 8 Allocated tips 10 Dependent of a statutory employee 10899	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Stock play CAL Income Tax Return ne tax withheld 13692.13
Form W	wer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Devee's address and ZIP code Employer's state ID number 12286157WHW -2 Wage and Tax Statement 2017 oyer identification number (EIN) oyer's name, address, and ZIP code	Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur	e: 6D8MW3QF	12a DDD 12b 12c 12c 12e Copy 2 Employ LOCAL a Employe a Service 12a See in DD 12b	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages	74.86 74.86 20 Locality	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of the properties o	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Stock play CAL Income Tax Return ne tax withheld 13692.13
Form W	wer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Devee's address and ZIP code Employer's state ID number 12286157WHW -2 Wage and Tax Statement 2017 oyer identification number (EIN) oyer's name, address, and ZIP code	Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur	e: 6D8MW3QF	12a DDD 12b 12c 12c 12e Copy 2 Employ LOCAL a Employe a Service 12a See in DD 12b	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages	20 Locality	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of the properties o	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick pay 0.62 CAL Income Tax Return ne tax withheld 13692.13 ty tax withheld 637.04
f Emple form WAL-	wer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Devee's address and ZIP code Employer's state ID number 12286157WHW -2 Wage and Tax Statement 2017 oyer identification number (EIN) oyer's name, address, and ZIP code	Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur	e: 6D8MW3QF	12a DD 12b 12c 12c 12c 12c 12c 12c 12c 12c	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips	20 Locality	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of semployee 10895 10895 name 12 Federal incon 4 Social securit	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick pay 0.62 CAL Income Tax Return ne tax withheld 13692.13 ty tax withheld 637.04
c Emple WAL- 702 SV BENT e Emple 0000000 VIJAY 300 NI BENT f Emple 15 Stata AR Form W L 5 Emple c Emple WAL-	over's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 over's first name and initial A MADHURI DEVARAPALLI E MOBERLY LN APT I II ONVILLE, AR 72712 Over's address and ZIP code Employer's state ID number 12286157WHW -2 Wage and Tax Statement 2017 over identification number (EIN) over's name, address, and ZIP code MART ASSOCIATES, INC.	Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur	e: 6D8MW3QF	12a DD 12b 12c	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of semployee 10895 10895 name 12 Federal incon 4 Social securit	ty tax withheld 637.04 withheld 148.99 care benefits Retirement Third-party plan Sick pay 2.62 CAL Income Tax Return ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99
c Emple WAL- 702 SV BENT e Emple 00000000 VIJAY 300 NI BENT f Empl 15 Stat AR b Emple c Emple WAL-	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Description of the state of the st	Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur	e: 6D8MW3QF	12a DD 12b 12c	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of a station of a	ty tax withheld 637.04 withheld 148.99 Care benefits Relirement Third-party plan Sick pay 2.62 CAL Income Tax Return ————————————————————————————————————
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR Form W b Emple c Emple WAL-	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Description of the state of the st	Import Code Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t	12a \$\frac{1}{2}DD\$ 12b 12c 12c 12e 2Employ LOCAL a Employe 6 Service 12a See ir 5 DD 12b 12c 12c 12d 12d 12d 12e 12d 12e 12d 12e	\$ \$ S S S S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips 1027	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securii 6 Medicare tax 8 Allocated tips 10 Dependent of security employee 10899 10899 10899 10899 10896 10896 10896 10896 10896 10896 10896 10896 10896 10896 10896 10896 10896 10896	ty tax withheld 637.04 withheld 148.99 Care benefits Relirement Third-party plan Sick pay 2.62 CAL Income Tax Return ————————————————————————————————————
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR Form W L Form W	wyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Description of the state of the st	Import Code Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t	12a	S S S S S S S S S S	3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 7035 3 Social security wages 1027 5 Medicare wages and tips 1027 7 Social security tips	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of security employee	ty tax withheld 637.04 withheld 148.99 care benefits Relirement Third-party plan sick pay 2.62 CAL Income Tax Return ————————————————————————————————————
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR Form W L Form W	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Description of the code of the co	Import Code Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t	12a \$\frac{1}{2}\text{DD}\$ 12c \$\frac{1}{2}\text{12c}\$ 12c \$\frac{1}{2}\text{12c}\$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips 1027 7 Social security tips 9 Verification Code	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of a station of a	ty tax withheld 637.04 withheld 148.99 Care benefits Relirement Third-party plan Sick pay 2.62 CAL Income Tax Return ————————————————————————————————————
c Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR Form W L Form W L FORM WAL- 702 SV BENT e Empl 0000000 VIJAY	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Description of the code of the co	Import Code Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t	12a	S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips 1027 7 Social security tips 9 Verification Code 11 Nonqualified plans	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of security employee	ty tax withheld 637.04 withheld 148.99 care benefits Relirement Third-party plan sick pay 2.62 CAL Income Tax Return ————————————————————————————————————
C Emple WAL- 702 SV BENT e Emple 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR Form W b Emple C Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Divee's address and ZIP code Employer's state ID number 12286157WHW -2 Wage and Tax Statement 2017 oyer identification number (EIN) oyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial A MADHURI DEVARAPALLI	Import Code Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t	12a 12c	S S S S S S S S S S	703: 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips 1027 7 Social security tips 9 Verification Code 11 Nonqualified plans	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of security employee	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99
C Emple WAL- 702 SV BENT e Emple 0000000 VIJAY 300 NI BENT f Empl 15 Stat AR Form W b Emple C Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyoe's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Dece's address and ZIP code Example of the code and the code	Import Code Import Code 16 State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t	12a DD 12b 12c 12c 12d 12e Employe Esteroice 12a See in DD 12b 12c 12c 12d 12e 12d 12e 12e 12e 12e 12e	S S S S S S S S S S	3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703' 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securii 6 Medicare tax 8 Allocated tips 10 Dependent of Statutory employee 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99
c Emple WAL- 702 SV BENTI e Emple 0000000 VIJAY 300 NI BENT f Emple 15 State AR Form W b Emple WAL- 702 SV BENTI e Emple 0000000 VIJAY 300 NI BENTI	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyee's first name and initial A MADHURI DEVARAPALLI E MOBERLY LN APT I 11 ONVILLE, AR 72712 Deve's address and ZIP code Employer's state ID number 12286157WHW -2 Wage and Tax Statement 2017	Import Code Inspect Code If State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t	12a \$\frac{1}{2}\text{DD}\$ 12c \$\frac{1}{2}\text{12c}\$ \$\frac{1}{2}	S S S S S S S S S S	3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703' 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securii 6 Medicare tax 8 Allocated tips 10 Dependent of Statutory employee 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899 10899	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99
c Emple WAL- 702 SV BENT e Emple 0000000 VIJAY 300 NI BENT f Emple c Emple c Emple 0000000 VIJAY 300 NI BENT f Emple c Emple 0000000 VIJAY	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 ovee's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Description of the code of the co	Import Code Inspect Code Inspect Code Inspect Code Inspect Code Inspect Code Import Code	e: 6D8MW3QF 17 State income t	12a \$\frac{1}{2}\text{DD}\$ 12b \$\frac{1}{2}\text{DD}\$ 12c \$\frac{1}{2}\text{12c}\$ \$\frac{1}{2}\text{2}\text{Employe}\$ 12c \$\frac{1}{2}\text{Employer}\$ \$\frac{1}{2}\text{Employer}\$ \$\frac{1}{2}Asee in formalia Revenue Sen return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return a negli be imposed of indition for first in the return and i	S S S S S S S S S S	3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips 1027 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	20 Locality 20 Locality 21 Locality 22 Locality 23 Locality 24.86 24.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of Semployee Semploye	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99
c Emple WAL- 702 SV BENTI e Emple 0000000 VIJAY 300 NI BENT f Emple 15 State AR Form W b Emple WAL- 702 SV BENTI e Emple 0000000 VIJAY 300 NI BENTI	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 ovee's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Description of the code of the co	Import Code Inspect Code If State wages, tips, etc. 70359.15 Department of the Treasur 71-0794409	e: 6D8MW3QF 17 State income t ry-Internal Revenu Suff. e: 6D8MW3QF	12a \$\frac{1}{2}\text{DD}\$ 12b \$\frac{1}{2}\text{DD}\$ 12c \$\frac{1}{2}\text{12c}\$ \$\frac{1}{2}\text{2}\text{Employe}\$ 12c \$\frac{1}{2}\text{Employer}\$ \$\frac{1}{2}\text{Employer}\$ \$\frac{1}{2}Asee in formalia Revenue Sen return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return, a negli be imposed of indition for first in the return a negli be imposed of indition for first in the return and i	S S S S S S S S S S	3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703' 3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	20 Locality 20 Locality pployee's \$1 nastion 19.15	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of Semployee Semploye	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99
C Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT f Empl C Emple WAL- 702 SV BENT e Empl 0000000 VIJAY 300 NI BENT	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyoe's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Dyee's address and ZIP code Employer's state ID number 12286157WHW 2-2 Wage and Tax Statement 2017	Import Code 16 State wages, tips, etc. 71-0794409 Import Code Import Code 16 State wages, tips, etc.	e: 6D8MW3QF 17 State income t ry-Internal Revenu Suff. e: 6D8MW3QF	12a DD 12b 12c 12c 12d 12e Employe Copy 2 Employe 12a See in DD 12b 12c 12c 12d 12d 12d 12d 12d 12d	S S S S S S S S S S	3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips 1027 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	20 Locality 20 Locality 21 Locality 22 Locality 23 Locality 24.86 24.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of Semployee Semploye	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99
C Emple WAL- 702 SV BENT e Emple 0000000 VIJAY 300 NI BENT f Emple C Emple WAL- 702 SV BENT e Emple 0000000 VIJAY 300 NI BENT	pyer's name, address, and ZIP code MART ASSOCIATES, INC. W 8TH STREET ONVILLE, AR 72716-0135 oyoe's first name and initial E MOBERLY LN APT I 11 ONVILLE, AR 72712 Dyee's address and ZIP code Employer's state ID number 12286157WHW 2-2 Wage and Tax Statement 2017	Import Code 16 State wages, tips, etc. 71-0794409 Import Code Import Code 16 State wages, tips, etc.	e: 6D8MW3QF 17 State income t ry-Internal Revenu Suff. e: 6D8MW3QF 17 State income t 3	12a DD 12b 12c 12c 12d 12e 12e 12e 12e 12e 12e 12e	S S S S S S S S S S	3 Social security wages 102' 5 Medicare wages and tips 102' 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP 19 Local income tax Copy 2 To Be Filed With Er 1 Wages, tips, other compe 703: 3 Social security wages 1027 5 Medicare wages and tips 1027 7 Social security tips 9 Verification Code 11 Nonqualified plans 14 Other MOVING EXP	20 Locality 20 Locality 21 Locality 22 Locality 23 Locality 24.86	4 Social securit 6 Medicare tax 8 Allocated tips 10 Dependent of a statutory employee 10899 10899 10899 10899 10899 10899	ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99 Care benefits Retirement Third-party plan ne tax withheld 13692.13 ty tax withheld 637.04 withheld 148.99

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. 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.

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.

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.

Instructions for Employee

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.
- $\mbox{\bf B-}$ 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.
- $\mbox{\bf J-}$ 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.
- 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** $\hat{\mathbf{C}}$ 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.

Walmart Associates, Inc.

To: All Associates
From: Payroll Services
Date: January 1, 2018

Subject: 2017 W-2 Wage and Tax Statement

To assist you in understanding the 2017 W-2 forms, the following information is provided:

General Information:

- Please verify upon receipt that your name and social security number are correct. If incorrect, refer to the section entitled "Corrections" on the back of the W-2 form.
- If your Federal tax withholding was not sufficient to meet your tax liability, you might want to file a new Form W-4 for 2018.
- If you received compensation in more than 2 states or 2 localities, you will receive as many copies of Form W-2 as is necessary to list the amounts separately. However, all wages reported in Boxes 1, 3 and 5 will be printed on only 1 copy of Form W-2.
- The W-2 form includes an Import Code. This code is an eight digit alpha numeric value that can be used with tax preparation software to import your W-2 information. The import code is located in the lower right corner of the employee address box on the W-2. More information regarding the use of the new import code can be found on the tax preparer's website.
- Box 13: The "Retirement Plan" box will be marked for anyone who contributed to their 401(k) plan for the plan year ending January 31, 2018. If the box is marked, special limits may apply to the amount of IRA contributions you may deduct.

Notice to California, Texas, and Illinois Associates - Federal Earned Income Tax Credit

If you have earned less than \$53,930 last year, you may be eligible to receive the earned income tax credit of up to \$6,318 from the federal government. The earned income tax credit is a refundable federal income tax credit for low-income working individuals and families. The earned income tax credit has no effect on certain welfare benefits. In most cases, earned income tax credit payments will not be used to determine eligibility for Medicaid, supplemental security income, food stamps, low-income housing or most temporary assistance for needy families' payments. Even if you do not owe federal taxes, you must file a tax return to receive the earned income tax credit. For information regarding your eligibility to receive the earned income tax credit, including information on how to obtain the IRS Notice 797, or any other necessary forms and instructions, contact the Internal Revenue Service by calling 1-800-829-3676 or through its web site at www.irs.gov.

Oregon residents- www.oregon.gov/dor

Philadelphia residents- www.YouEarnedItPhilly.com

Additional information for California residents:

You may also be eligible to receive the California Earned Income Tax Credit (California EITC) starting with the calendar year 2015 tax year. The California EITC is a refundable state income tax credit for low-income working individuals and families. The California EITC is treated in the same manner as the Federal EITC and generally will not be used to determine eligibility for welfare benefits under California law. To claim the California EITC, even if you do not owe California taxes, you must file a California income tax return and complete and attach the California EITC form (FTB 3514). For information on the availability of the credit, eligibility requirements, and how to obtain the necessary California forms and get help filing, contact the franchise tax board at 1-800-852-5711 or through the website at www.ftb.ca.gov.

Notice to Associates with New York Wages

If you received compensation in the State of New York, Box 16 for the State of New York will match the amount in Box 1. For questions pertaining to this state law, you may call the New York State Department of Taxation and Finance at 1(518) 485-6654.

For questions concerning your W-2 contact Payroll Services at (479) 273-4323.