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. From 10 you do not 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 recdit (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 credit is based on income and family size.

Workers without châlren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that 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 intante at a penal institution. For 2017 in come lamits and more information, vist w www. sp. govietic.

Also see Pub. 590, Earnel Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor 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-2 from your employer for all corrections made so you may fift 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 mame at any SSA office or by calling 1-800-772-1213. You may also visit the SSA at www.SSA, gov. Cost of employer-sponsored beath coverage (is ache tost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage (is ache tost 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 First 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your feder alm come tax. If you had more than ore than \$1,630.50 in Ter 2 RRTA tax was withheld, you also may be able to claim a credit for Form 1040 or Form 1040A instructions and Pub. 505, Tax Wahholding and Estimated Tax. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

## 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. Tourn any 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 3, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown

\$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 onless 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 actual 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 if when prompted by your software. The only valid characters are the letters AF and numerals 0-9. 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) plani). Any amount over \$5,000 also is 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 for (b) included in box 3 and/or 5 if it is a prior year deferred unount. This box should the two 457(b) plan the 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 fit be true diff you had a deferral amount for Shot 131, we should fit be year, your employer should fits Form SSA-131, 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

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Blexive deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EL) under all plans are generally limited to a total of \$18,000 (\$12,200 if you only have SIMPLE plans; \$21,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. \$71). Deferrals under code G are limited to \$18,000. Deferrals under code H are limited to \$18,000.

have SIMPLE plans; \$21,000 for section 403(b) plans if you quality for the 15-year rate expunses, at Pubs. 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 dought 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 retrement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral intimate be included in income. See the "Wages, Salaries, Tips, etc." Into instructions for Form 1040. Note, If a year followis code D through H, S. V. As, 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.

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 Six 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

\$50,0000 (former employees only), See "Other Taxes" in the Form 1000 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 1000 instructions.

P—Excludable moving expense reimbursements paid directly to employee (not included in boxes 1, 3, or 5)

O—Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A for details on

Q—consalastic consumptions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Tern Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box

—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to impute any taxable and nontaxable amounts.

compute any taxable and nontaxable amounts.

W—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).

\*\*Z—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 plas interest. See "Other Taxes" in the Form 1040 instructions under a section 401(k) plan.

\*\*AA—Designated Roth contributions under a section 403(b) plan.

\*\*DD—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.

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. Ad. Bb, or EE, you made a make-up person contribution for a prior year(s) show you were in unliture service. To glicus whether you made access deferreds, consider these amounts for the years shown, not the current year. If no year is shown, the contributions under a new property of the current year. If you year is shown, the contributions were a transcensor of the property of the current year. If no year is shown, the contributions under a new property of the current year. If no year is shown, the contributions were at an exceeping or an exceeping the property of the current year. If no year is shown, the contributions under a new property of the property of the year is the year of the

## Form W-2 Wage and Tax Statement

Copy C, for employee's records

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 immosed on you if this income is suble and you fail to report it.

1 01111 11 2 11				_	2017		, -, ici cilipicy	may be imposed	on you if this income is taxable and you fai
0942-16028737 0000EE0464-		Void	c Employer's name, address, and ZIP code IMPACT RADIUS			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
26-1120226 13 Statutory	13 Statutory Retirement Third-parts		77-5317 Third-party	mber	223 EAST DE LA GUERRA STREET SANTA BARBARA CA 93101			1 Wages, tips, other compensation 47842.30	2 Federal Income tax withheld 9707.78
Employee  12 See Instrs. for Box 12	plan	Other	sick pay		- Familional and	ne, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
12 See HISTIS. TO BOX 12		ASDI	4	30.57	RAJASEK 1231 GAR	HAR KALAMATA DEN STREET ARBARA CA 93101		7 Social Security tips  10 Dependent care benefits	8 Allocated Tips  11 Nonqualified plans
								Verification Code 672e-d4b5	-06ca-c517
CA State Employee STATE	er's state I.D 1-0	. No.	16 State wages,	47	7842.30 1289.75	7 State income tax 3768.04	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

# Form W-2 Wage and Tax Statement

2017

2017

# Copy B, to be filed with employee's FEDERAL tax return

	6028737			Void	c Employer's name, address, and ZIP code IMPACT RADIUS			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
				IIVII AC	IMPACI RADIUS			SIID 10. 10-10 0000			
b Emplo	yer's identificat	ion number		s social security nu	mber	223 EA	ST DE LA GUERRA ST	ΓREET	1 Wag	es, tips, other compensation	2 Federal Income tax withheld
26-1	120226		363-	77-5317		CANTA	A BARBARA CA 93101			47842.30	9707.78
	itutory	Retirem	ent	Third-party		SANIA	BARBARA CA 93101				
Emp	oloyee	plan		sick pay					3 5001	al Security wages	4 Social Security tax withheld
12 See I	nstrs. for Box 1		Other		20.55	e Employee	's name, address, and ZIP code		5 Med	care wages and tips	6 Medicare tax withheld
		I C	ASDI	4	30.57						
						RAJAS	EKHAR KALAMATA		7 Soci	al Security tips	8 Allocated Tips
						1231 G	ARDEN STREET				
						SANTA	BARBARA CA 93101		10 Deg	pendent care benefits	11 Nonqualified plans
									Ver	fication Code	
										672e-d4b5-	·06ca-c517
15 State	Employ	er's state I.D.	. No.	16 State wages,	tips, etc.		17 State income tax	. 18 Local wages, tips, etc.		19 Local income tax	20 Locality name
CA	315-851	11-0			47	7842.30	3768.04				
MN					1.	1289.75					
					•	207.75					

## Form W-2 Wage and Tax Statement

## Copy 2, to be filed with employee's tax return for CA

d Control number		Void	c Employer	's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service					
0942-160	028737	0000	DEE0464	-		IMPAC	T RADIUS		OMB No. 1545-0008		
b Employer's identification number a Employee's social so		s social security nu	mber	223 EAST DE LA GUERRA STREET			4 19/	•			
26-1120226 363-77-5317			SANTA BARBARA CA 93101				es, tips, other compensation 47842.30	2 Federal Income tax withheld 9707.78			
13 Statut Employ		Retirement Third-party plan sick pay			SANTA BARBARA CA 93101			3 Socia	al Security wages	4 Social Security tax withheld	
12 See Inst	trs. for Box 12		Other ASDI	4	30.57	e Employee	's name, address, and ZIP code		5 Medi	care wages and tips	6 Medicare tax withheld
						RAJASEKHAR KALAMATA 1231 GARDEN STREET SANTA BARBARA CA 93101			7 Social Security tips  10 Dependent care benefits	al Security tips	8 Allocated Tips
										11 Nonqualified plans	
									Veri	fication Code	
15 State	Employ	er's state I.D	. No.	16 State wages	, tips, etc.		17 State income tax	18 Local wages, tips, etc.		19 Local income tax	20 Locality name
CA :	315-851	11-0			4	7842.30	3768.04				

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. Free my flow do not have to file a tax return, you may be eligible for a refund if box 2 show an amount or if you are eligible for any credit.

Earned innome credit (EIC). Voy may be able to take the EIC for 2017 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without châldren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can take the EIC for your investment income is more than the specified amount for 2017 or if income is carned for services provided while you were a timate at a penal institution. For 2017 in come limits and more information, vist www.wis.gov/eic.

Ako see Pub. 596, Earnel Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor 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-2 from your employer for all corrections made so you may fift 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 mame at any SSA office or by calling 1-800-772-1213. You may also visit the SSA at www.SSA, gov. Cost of employer-sponsored beath coverage (is ache tost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage (is ache tost 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 First 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your feder alm come tax. If you had more than ore than \$1,630.50 in Ter 2 RRTA tax was withheld, you also may be able to claim a credit for Form 1040 or Form 1040A instructions and Pub. 505, Tax Wahholding and Estimated Tax. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

## 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. Tourn any 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 3, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown

\$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 onless 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 actual 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 if when prompted by your software. The only valid characters are the letters AF and numerals 0-9. 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) plani). Any amount over \$5,000 also is 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 for (b) included in box 3 and/or 5 if it is a prior year deferred unount. This box should the two 457(b) plan the 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 fit be true diff you had a deferral amount for Shot 131, we should fit be year, your employer should fits Form SSA-131, 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

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Blective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EB), under all plans are generally limited to a total of \$18,000 (\$12,500 if you only have SIMPLE plans; \$21,000 for section 40(5b) plans if you qualify for the 15-year rule explained in Pub. \$711). Deferrals under code G are limited to \$18,000. Deferrals under code H are limited to

(1000 No. 10. and 12.) are supported by the State of the

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 Six 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

\$50,0000 (former employees only), See "Other Taxes" in the Form 1000 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 1000 instructions.

P—Excludable moving expense reimbursements paid directly to employee (not included in boxes 1, 3, or 5)

O—Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A for details on

Q—(Unaskans Control p.). See a more reporting this amount in stoyour 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

—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to impute any taxable and nontaxable amounts.

compute any taxable and nontaxable amounts.

W—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).

\*\*Z—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 plas interest. See "Other Taxes" in the Form 1040 instructions under a section 401(k) plan.

\*\*AA—Designated Roth contributions under a section 403(b) plan.

\*\*DD—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.

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. Ad. Bb, or EE, you made a make-up person contribution for a prior year(s) show you were in unliture service. To glicus whether you made access deferreds, consider these amounts for the years shown, not the current year. If no year is shown, the contributions under a new property of the current year. If you year is shown, the contributions were a transcensor of the property of the current year. If no year is shown, the contributions under a new property of the current year. If no year is shown, the contributions were at an exceeping or an exceeping the property of the current year. If no year is shown, the contributions under a new property of the property of the year is the year of the

## Form W-2 Wage and Tax Statement

## Copy 2, to be filed with employee's tax return for MN

Tom W 2 Wag				2017 00ру	,	with employee a tax ret		
07 12 20020707 0	42-16028737 0000EE0464- DEMPloyer's identification number a Employee's social security number 26-1120226 363-77-5317		IN	Employer's name, address, and ZIP code MPACT RADIUS		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008  1 Wages, tips, other compensation 47842.30  2 Federal Income tax withheld 9707.78  4 Social Security wages 4 Social Security tax withheld		
26-1120226 13 Statutory Re			2.	223 EAST DE LA GUERRA STR SANTA BARBARA CA 93101	EET			
12 See Instrs. for Box 12	14 Other		e	Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
			1	RAJASEKHAR KALAMATA 231 GARDEN STREET		7 Social Security tips	8 Allocated Tips	
			S.	SANTA BARBARA CA 93101		10 Dependent care benefits	11 Nonqualified plans	
						Verification Code		
15 State Employer's stat	I te I.D. No.	16 State wages, ti		17 State income tax	8 Local wages, tips, etc.	19 Local income tax	20 Locality name	

### Form W-2 Wage and Tax Statement 2017

d Control number	a Employee's social security as	Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenu OMB No. 1545-0008	Je Service
b Employer's identification number a Employee's social security number					1 Wages, tips, other compensation	2 Federal Income tax withheld
13 Statutory Retire Employee plan	ement Third-party sick pay				3 Social Security wages	4 Social Security tax withheld
12 See Instrs. for Box 12	4 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
					7 Social Security tips	8 Allocated Tips
					10 Dependent care benefits	11 Nonqualified plans
					Verification Code	
15 State Employer's state I.	.D. No. 16 State wages	, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

#### Form W-2 Wage and Tax Statement 2017

d Control number		Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenu OMB No. 1545-0008	e Service
b Employer's identification nu	nber a Employee's social security n	umber				
					1 Wages, tips, other compensation	2 Federal Income tax withheld
	etirement Third-party an sick pay				3 Social Security wages	4 Social Security tax withheld
12 See Instrs. for Box 12	14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld
					7 Social Security tips	8 Allocated Tips
					10 Dependent care benefits	11 Nonqualified plans
					Verification Code	
15 State Employer's st	tte I.D. No. 16 State wage	s, tips, etc	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
i i	<b>I</b>		1	I		1