_ _	<u> </u>			
Employee Ref	erence Copy			
Wage a	\mathbf{M} \mathbf{O} Wage and Tax \mathbf{O} \mathbf{O} \mathbf{I} \mathbf{T}			
VV- Statem				
Copy C for employee'srecords.	OMB No. 1545-0008			
d Control number Dept.	Corp. Employer use only			
000013 RH/XYN	A			
c Employer's name, address, a	und ZIP code			
DENOVO SYSTE				
1445 WORTHING				
STE 107	TON WOODS BLVD			
WORTHINGTON,	OH 42095			
WORTHINGTON,	OH 43065			
	Batch #98701			
	Batch #90701			
e/f Employee's name, address, a	and ZIP code			
SAI YASASWI SREEK				
3198 PARKWOOD BL	VD APT 13073			
FRISCO, TX 75034				
b Employer's FED ID number	a Employee's SSA number			
47-1044050	353-99-3135			
1 Wages, tips, other comp.	2 Federal income tax withheld			
65122.00	8233.69			
3 Social security wages	4 Social security tax withheld			
65122.00	4037.56			
5 Medicare wages and tips	6 Medicare tax withheld			
65122.00	944.27			
7 Social security tips	8 Allocated tips			
9 Verification Code	40 Devendent som hansfilte			
9 Verification Code	10 Dependent care benefits			
11 Nongualified plans	12a See instructions for box 12			
Ti Nonquanned plans				
14 Other	12b			
	12c			
	12d			
	13 Stat emp. Ret. plan 3rd party sick pay			
15 State Employer's state ID no	. 16 State 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 hame			

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	65122.00	Social Security Tax Withheld Box 4 of W-2	4037.56	State Income Tax Box 17 of W-2 Local Income Tax
Fed. Income Tax Withheld	8233.69	Medicare Tax Withheld	944.27	Box 19 of W-2 SUI/SDI
Box 2 of W-2		Box 6 of W-2		Box 14 of W-2
. Your Gross Pay wa	s adjusted as f	ollows to produce y	our W-2 Statem	ent.
	Wages, Tips, Compensatio		urity Medica Wages	re

		Box 1 o
Gross Pay		
Reported W-2	Wages	

ed as follows to	produce your W-2	2 Statement.
s, Tips, other	Social Security	Medicare
ensation	Wages	Wages
⊨of W-2	Box 3 of W-2	Box 5 of W-2
65,122.00	65,122.00	65,122.00
65,122.00	65,122.00	65,122.00

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

SAI YASASWI SREEKANTA 3198 PARKWOOD BLVD APT 13073 FRISCO, TX 75034

Social Security Number: 353-99-3135 Taxable Marital Status: SINGLE Exemptions/Allowances: FEDERAL: 3

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1 Wages, tips, other comp.	2 Federal income tax withheld	1 Wages, tips, other comp.	2 Federal income tax withheld	1 Wages, tips, other comp.	2 Federal income tax withheld
65122.00	8233.69	65122.00	8233.69	65122.00	8233.69
3 Social security wages 65122.00	4 Social security tax withheld 4037.56	3 Social security wages 65122.00	4 Social security tax withheld 4037.56	³ Social security wages 65122.00	4 Social security tax withheld 4037.56
5 Medicare wages and tips 65122.00	6 Medicare tax withheld 944.27	5 Medicare wages and tips 65122.00	6 Medicare tax withheld 944.27	5 Medicare wages and tips 65122.00	6 Medicare tax withheld 944.27
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only
000013 RH/XYN	Α	000013 RH/XYN	Α	000013 RH/XYN	A
c Employer's name, address, a	and ZIP code	c Employer's name, address, a	nd ZIP code	c Employer's name, address, a	and ZIP code
DENOVO SYSTE 1445 WORTHING STE 107 WORTHINGTON,	-	DENOVO SYSTE 1445 WORTHING STE 107 WORTHINGTON,	-	DENOVO SYSTE 1445 WORTHING STE 107 WORTHINGTON,	
b Employer's FED ID number	a Employee's SSA number	b Employer's FED ID number	a Employee's SSA number	b Employer's FED ID number	a Employee's SSA number
47-1044050 7 Social security tips	353-99-3135 8 Allocated tips	47-1044050 7 Social security tips	353-99-3135 8 Allocated tips	47-1044050 7 Social security tips	353-99-3135 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	12a	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 part
e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address a	nd ZIP code
SAI YASASWI SREEK	(ANTA	SAI YASASWI SREEK	ANTA	SAI YASASWI SREEK	ANTA
3198 PARKWOOD BI	LVD APT 13073	3198 PARKWOOD BI	_VD APT 13073	3198 PARKWOOD BI	LVD APT 13073
FRISCO, TX 75034		FRISCO, TX 75034		FRISCO, TX 75034	
15 State Employer's state ID no	. 16 State wages, tips, etc.	15 State Employer's state ID no	. 16 State wages, tips, etc.	15 State Employer's state ID no	b. 16 State wages, tips, etc.
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 Fi	iling Copy	State Refe	erence Copy	City or Local	Reference Copy
W-2 Wage a Statem	and Tax 2017	W-2 Wage a Stateme	nt <u>(MB</u> No 1545-0008	W-2 Wage a Statem	
Copy B to be filed with employee's F	ederal income lax Return.	Copy 2 to be filed with employee'sStat	e income i ax Keturn.	Copy 2 to be filed with employee'sCity	or Local Income Lax Return.