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 may also vise the SSA at www. SSA, gov. Cost of employre-sponsored health coverage (if such cost is provided by the employrer). The reporting in Box 12, using Code DO, of the cost of employre-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 employre in 2017 and more than \$7,886.40 in social security and/or Tier 1 raitroad retirement (RRTA) taxes were withheld, you may be able to chim a credit for the excess against your federal more tax. If you had more than 0-4,630.50 in Tier 2 RRTA tax was withheld, you also may be able to chim a credit. Fore Your Form 10400 r 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 retu Box Z, Linter inis amount on the federal income tax withheld line of your tax return. Box S, You may be required to report this amount on form 8999, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8999. Box G. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box S, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above 6000.000.

in Box 5, as well as the 0.9% Additional Medicare 1 are on any of those Medicare wages and tips abox \$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 1000 instructions. You muss tills Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount tubes 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 tip. Or 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, ent r 4 when prompted by your software. The only valid characters are the letters A-P and numerals 0-9. This code assists the IRS in validing 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 \$5,000 also is included in box 1. Complete Form 2411, Child and Dependent Care Expenses, to commute any usable and notaris dhe amounts.

\$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 nonqualified or 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 ight to the deferred amount. This box shouldn't 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 6.2 by the end of the calendary year, your employer should file Form SSA:131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

copy. Box 12, The following list explains the codes shown in hox 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) how SUMPLE plans, \$21,000 for section 40(3b) 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 \$5,000.

57,000. However, if you were at least age 50 in 2017, your employer may have allowed an additional deferral of up to 56,000 (53,000 for section 401(a)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on decive deferrals. For code G, the limit on decive deferrals may be higher for the list 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall decive deferral main times the included in income. See the "Wages, Salaries, Tips, Act." In instructions for Form 1040. Note, II a year/follows code D through IL S, Y. AA, BB, or EL, you made a made-up pension contribution for a prior yard(s) when you were in military service. To figure whether you made excet deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contribution for for the year.

1040 instructions. C—Taxable cost of group-term life insurance over \$\$0,000 (included in boxes 1, 3 (up to social security wage base), and 5) D—Excite deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retrement account that is part of a section 401(k) arrangement. E—Excite deferrals under a section 403(k) sulary reduction agreement F—Excite deferrals under a section 408(k) (s) sulary reduction SIP G—Excite deferrals under a section 408(k) (s) sulary reduction SIP G—Excite deferrals under a section 408(k) (s) sulary reduction SIP

2017

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See "Adjusted Gross Iacome" in the Form 1040 instructions for how to deduct.
I—Nortaxable site, pay (information only, not iscluded in boxes 1, 3, or 5)
K—20% excise tax on excess golden parachate payments. See "Other Taxes" in the Form 1040 instructions.
I—Sublumitated employee business expense reimbursements (nontaxable)
M—Uscollevel social security or RRTA tax on taxable cost of groups term fit insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.
—Incollevel Medivater tax on taxable cost of group-term fit insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.
—Uscollevel Medivater tax on taxable cost of group-term disc insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.
—Uscollevel Medivater tax on taxable cost of group-term disc insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.
—Uscollevel Medivater tax on taxable cost of group-term disc 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,

5) -Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A for details on Q—xionaxane connar pay. See use austractions for Point 1990 of Point 1990 for details reporting this amount. R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

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

1) — To-Adoption Berginson (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. V—Income from vertexic 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 plana

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 plas 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. DB—Dcost of employer-sponsored health coverage. The amount reported with Code DD is not taxable.

IAC controlutions you may secure. See Pub. 590-54, Controlutions to individual netterment Arrangements (IRAs).
Box 14, Emphysers may use this box to report information such as state disability insurance taxes withhelk, unito dues, uniform payments, health insurance premiums deducted, nonixable income, educational assistance payments, or a member of the ckrgy's parsonage allowance and utilities. Railvoid employees use this box to report raiload eritement (RRTA) compensation, Ter 1 tax, Ter 2 tax, Medicare tax and Additional Medicare Tax, Include tips reported by the employee to the employer in raiload eritement (RRTA) compensation, Ter 1 tax, Ter 2 tax, Medicare tax and Additional Medicare Tax, Include tips reported by the employee to the employer intraload eritement (RRTA) compensation. Ter 1 tax, Ter 2 tax, See Compensation, Ter 1 tax, Ter 2 tax, Medicare tax and Additional Medicare Tax, Include tips reported by the employee to the employer trained networks, the hop most your social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin receiving social security benefits, keep Copy Couli you begin

Form W-2 Wage and Tax Statement

Copy C, for employee's records If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you'l this income is taxable and you fail to report it. c Employer's name, address, and ZIP code d Control numbe Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 0072-EC000122 0000011642-POITLLC b Employer's identification number a Employee's social security number 1801 N LAMAR ST SUITE 450 1 Wages, tips, other compensation 2 Federal Income tax w 201-87-1918 27-2839336 DALLAS TX 75202 132067.32 22668.46 Retire plan Statutory Employee Third-party sick pay 3 Social Security wage 4 Social Security tax wit Х 127200.00 7886.40 12 See Instrs. for Box 12 AA 9830.46 14 Other e Employee's name, address, and ZIP code 5 Medicare wages and tips 6 Medicare tax withheld 132067.32 1914.98 AVIK SINHA ROY 7 Social Security tips 8 Allocated Tips 14520 BRIAR FOREST DRIVE 10 Dependent care benefits 11 Nongualified plans **APT NO 2208** 1500.00 HOUSTON TX 77077 Verification Code 26d4-8aa4-ccba-1958 16 State wages, tips, etc. 18 Local wages, tips, etc. 17 State income tax 19 Local income tax 15 State Employer's state I.D. No 20 Locality name

Form W-2 Wage and Tax Statement 2017 Copy B, to be filed with employee's FEDERAL tax return

d Control number Void			c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008					
0072-EC000122 0000011642-			POIT LLC								
b Employer's identification number a Employee's social security number			1801 N LAMAR ST SUITE 450								
27 2020226	201-87-1918			1601 N LAWAR ST SUITE 450				es, tips, other compensation	2 Federal Income tax withheld		
27-2839336	2007000			DALLAS TX 75202			132067.32 2266			68.46	
13 Statutory Retirement Employee plan		Third-party sick pay					3 Social Security wages		4 Social Security tax withheld		
Linpioyee	plan	Х	olok pay						127200.00		86.40
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	
AA 9830.46									132067.32	19	14.98
					AVIK S	SINHA ROY		7 Socia	I Security tips	8 Allocated Tips	1 11/0
						BRIAR FOREST DRIVE					
					A DT NO	2208		10 Dep	endent care benefits	11 Nongualified plans	
			APT NO 2208 HOUSTON TX 77077				1500.00				
					110031			Veri	fication Code		
									26d4-8aa4-	ccba-1958	
15 State Employer's state I.D. No. 16 State wages, tips, etc.				, 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 Revenue Service OMB No. 1545-0008			
b Employer's identification number a Employee's social security number				1 Wages, tips, other compensation 2 Federal Income tax withheld							
da Statutari Dationati Third anti-											
13 Statutory Retirement Employee plan		Third-party 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 Socia	I Security tips	8 Allocated Tips
									10 Dep	endent care benefits	11 Nonqualified plans
									Veri	fication Code	
15 State Employer's state I.D. No.		No.	. 16 State wages, tips, etc.		17 State income tax		1	18 Local wages, tips, etc.	19 Local income tax		20 Locality name