Notice to Employee Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tar ctrum. Even if 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. Emmed income credit (BC). You may be able to take the EIC for 2018 if your adjusted gross income (AGI) is less than a certain amount. The annount of 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 institution. For 2018 is of if meome is earned for services provided while you were an immate at a peak institution. For 2018 as norme limits and more information, vist www.sr.govEFTC. Also see Pub. 596, Earned Income Credit. Any IEC that is more than your tax hability is refunded to you, but only if you file a tax return.

Also see Pub. 590, taiment income creater, sur lace una to more una series and series an Service of the servic Corrected Wage and Tax Sulencient, with the Social Security Administration (SSA) to correct any name. SSN, or morey anomat error reported to the SSA on Form W-2. Be sure to gety our copies of Form W-2: from your employee for all corrections made so you may file them with your tax return. If your name and SSN are correct but march the same as shown on your social security cared, you should ask for a new card that displays your correct name at any SSA office or by calling 800:772-1213. You may alko with 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 2018 and more than 57:960.80 in social security and/of TFr 1 raikoard creitement (RRFA) taxes were withheld, you any be able to chim a credit for the eaces against your federal in come tax. If you had more than one raikoad employer and more than 54,746 to 15 for 17 stable.

## 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. Your 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 6. This amount includes the 1.45% Medicare Tax withheld an 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 abov

\$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. 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 yo

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. The only valid characters are the ketters AF and numents (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 (nc huding amounts from a section 125 (cafderina) plan). Any amount over 55,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Experses, to compute any taxable and nontaxable amounts. Box 11. This amount is (0) a producif in box 1 fit is a distribution made to you from a nonqualified defored compensation rongovernmental section 457(b) plan the heacma taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forferiture of your ight to the deforeral duncar. In this so should the town of your, your employer paids of the socie of the care tax is the seq of you had a deforral and a scherize of your are or will be age 62 by the end of the caledard pare, ruger, your employer should fibe form SA-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 100 L 2: The ion/wing isse expansis the codes show in it on L2: for any recurs into a match to complex your target return. Bective deferrals (codes 0), E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$18,500 (\$12,500 if you only have SIMPLE plans): \$21,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. \$711). Deferrals under code G are limited to \$18,500. Deferrals under code H are limited to

Inter Sinu LL pairs, scheror die Centre (1997), 1998. Scher LL pairs, Scheror des Carlos (1998), 1999. Defensals under code H are limited to \$7,000. However, if you were at kast age 50 in 2018, your employer may have allowed an additional deferral of up to \$6,000 (\$3,000 for section 401(\$)(11) and 408(\$p) SIMPLE plans). This additional deferral and is not subject to the overall limit on deciti deferrals. For code G, the limit on decit 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 limit on decit is deferral limit must be included in income. See the instructions for Form 1040.

Inclusion in mechanics we are absorbed using the interval M and M. When M is a start of the interval M is M is M and M is a start of the interval M is M. At A, B, B, 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 exact deformations for the year shown, not the current year. If no year is shown, the other terms year is shown. The prior is the prior interval of the prior is the prior interval of t a made exces. tributions are for the current ye

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

 $\begin{array}{l} \textbf{B} \\ \textbf{-} Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instruction \\ \textbf{C} \\ \textbf{-} \\ \textbf{Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social to social$ urity 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

2018

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 the Form 1040 instructions for how to deduct. J—Nontaxable site hay (information only, not included in boxes 1, 3, or 5) K—20%, excise tax on excess golden parachute payments. See the Form 1040 instructions. L—Substinuitated employee business expense reimbursements (nontaxable) M—Lincollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only).

phoyees only). See the Form 1040 instructions. — Excludable moving expease refinituresments paid directly to a member of the U.S. Armed Forces or included in boxes 1, 3, or 5) — Nontrache combat pay. See the instructions for form 1040 for details on reporting this amount. — Employee contributions to your Archer MSA. Report on Form 8853, Archer MSAs and mg. Term Care Insurance Contract. — 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 mpute any taxable and nontaxable amounts. 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 (cafteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

(HSA8), V—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 the Form 1040 instructions. AA—Designated Roth contributions under a section 401(k) plan.

Induit matrictions.
 An-Designated Roth contributions under a section 401(k) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Interpretation and the section of the amount reported with Code DD is not the amount reported with Code DD is not the section 457(b) plan. This amount does not pply to contributions under at a governmental section 457(b) plan. This amount does not pply to contributions under at a governmental section 81(b) plan.
 FF-Permittel benefits under a qualified small employer beath reimbursement arrangement GG-Income from qualified entry grams under section 83(b) plan.
 HH-Aggregate deferrats under section 83(c) dections as of the close of the calendar year Box 13. (1the "Retirement plan") how is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement Arrangement (IRA).
 Box 14, Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permitted healted red, notaxiable necome, educational assistance payments, ent a methor of the clergy's parsonge allowance and utilities. Raiload employses use this hox to report allowance tarement (RFA) compression. The Tax, Include tips reported by the employee to the employer in allowat element (RFA) compression. The protect sum acida search plane and solve and a system solve the date for filling your income tax return. However, to help protect your acida search plane fills.

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 security.

Form W-2 Wage and Ta	ax 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 imposed on you if this income is taxable and you fail to report it. Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 d Control numbe Void c Employer's name, address, and ZIP code 0050-1<u>9049981</u> 000000065-PAYROL COMPUTEK SOULUTIONS INC b Employer's identification number a Employee's social security numbe 24155 DRAKE RD 2 Federal Income tax withhe 1 Wages, tips, other comp 27-3229076 041-23-6334 69688.96 9150.27 SUITE 145 13 Statutory Employee Retire plan Third-party sick pay 3 Social Security wages 4 Social Security tax withheld FARMINGTON HILLS MI 48335 12 See Instrs. for Box 12 e Employee's name, address, and ZIP code 5 Medicare wages and tips 6 Medicare tax withheld 14 Other UI/HC/WD 12.76 DI 5.70 RISHEKA SEELAM 7 Social Security tips 8 Allocated Tips 4850 SHELBOURNE DR 10 Dependent care benefits 11 Nongualified plans CUMMING GA 30041 Verification Code 4250-77c6-242d-eab3 15 Stat 16 State wages, tips, etc 17 State income tax 18 Local wages, tips, etc Employer's state I.D. No 19 Local income tax 20 Locality name 20091.84 GA 3181242-OD NJ 273-229-076/000 21144.00 53.25

## Form W-2 Wage and Tax Statement 2018

## Copy C, for employee's records

											on you in this moonie to taxable and you tail		
d Control	d Control number Void			c Employer's name, address, and ZIP code					Department of the Treasury - Internal Revenue Service				
0050-19	0050-19049981 000000065-PAYROL		COMPUTEK SOULUTIONS INC				OMB No. 1545-0008						
b Employ	er's identification nur	nber a Employee's	social security nu	mber	24155 DRAKE RD								
27-3229076 041-23-6334							1 Wages, tips, other compensation		2 Federal Income tax withheld				
13 Stat		etirement	Third-party		SUITE	145							
Empl		an	sick pay		FARMINGTON HILLS MI 48335				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					care wages and tips	6 Medicare tax withheld			
				RISHEKA SEELAM				7 Social Security tips		8 Allocated Tips			
			4850 SHELBOURNE DR										
					CUMMING GA 30041				10 Dep	endent care benefits	11 Nonqualified plans		
									Veri	fication Code			
									4250-77c6-242d-eab3				
15 State	Employer's sta	ate I.D. No.	16 State wages,	tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name		
NJ	FLI						2.70						

## Form W-2 Wage and Tax Statement 2018

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					
				COMPUTEK SOULUTIONS INC					OMB No. 1545-0008					
b Employ	er's identification nur	nber	a Employee's s	ocial security nu	mber	24155 DRAKE RD								
27-3229076 041-23-633					- SUITE 145					es, tips, other compensation 69688.96	2 Federal Income tax withheld 9150.27			
	13 Statutory Retirement Third-part Employee plan sick pay		Third-party sick pay		FARMINGTON HILLS MI 48335					al Security wages	4 Social Security tax withheld			
			HC/WD 12.76				e Employee's name, address, and ZIP code				icare wages and tips	6 Medicare tax withheld		
		DI	5.70		5.70	RISHEKA SEELAM 4850 SHELBOURNE DR CUMMING GA 30041				7 Soci	al Security tips	8 Allocated Tips		
										10 Dep	pendent care benefits	11 Nonqualified plans		
										Ver	ification Code			
								4250-77c6-242d-eab3						
15 State	Employer's sta	te I.D. N	No.	16 State wages,	tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name		
GA	3181242-Q	)			20	0091.84								
NJ 273-229-076/00		0		21	144.00		53.25							

Notice to Employee Do you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tar ctrum. Even if 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. Emmed income credit (BGL), Nou may be able to take the EIC for 2018 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 children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your aivestment income is more than the specified amount for 2018 or if income is carried for services provided while you were an immate at a penal institution. For 2018 in come hims and more information, vist www srs. gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return. Also see Pub. 590, taiment income creater, sur lace una to more una series and series an

Service of the servic Corrected Wage and Tax Sulencient, with the Social Security Administration (SSA) to correct any name. SSN, or morey anomat error reported to the SSA on Form W-2. Be sure to gety our copies of Form W-2: from your employee for all corrections made so you may file them with your tax return. If your name and SSN are correct but march the same as shown on your social security cared, you should ask for a new card that displays your correct name at any SSA office or by calling 800:772-1213. You may alko with 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 2018 and more than 57:960.80 in social security and/of TFr 1 raikoard creitement (RRFA) taxes were withheld, you any be able to chim a credit for the eaces against your federal in come tax. If you had more than one raikoad employer and more than 54,746 to 15 for 17 stable.

## 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. Your 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 6. This amount includes the 1.45% Medicare Tax withheld an 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 abov

\$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. 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 yo

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. The only valid characters are the ketters AF and numents (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 (nc huding amounts from a section 125 (cafderina) plan). Any amount over 55,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Experses, to compute any taxable and nontaxable amounts. Box 11. This amount is (0) a producif in box 1 fit is a distribution made to you from a nonqualified defored compensation rongovernmental section 457(b) plan the heacma taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forferiture of your ight to the deforeral duncar. In this so should the town of your, your employer paids of the socie of the care tax is the seq of you had a deforral and a scherize of your are or will be age 62 by the end of the caledard pare, ruger, your employer should fibe form SA-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 return. Beckvice 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 \$18,500 (\$12,500 if you only here SIMPLE plans). S21,500 for scion 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$18,500. Deferrals under code H are limited to

have SharrLE pans: Sci. 1000 tot section movely pans as you quark to use or odd Hare limited to 57,000. The pansion of 57,000. However, if you were at least age 50 in 2018, your employer may have allowed an additional deferral of up to 56,000 (53,000 for section 401(b)(11) and 408(p) SIMPLE plans). This additional deferral anount is not subject to the overall limit on decite deferrals may be higher for the last 3 years before you reach retriement age. Contact your plan administrator for more information. Amounts in excess of the overall limit on decite included in income. See the instructions for Form 1040. *Network of work collower of the D struct by B. B. as T.E. you made a make-up pension* 

Inclusion in mechanics we are absorbed using the interval M and M. When M is a start of the interval M is M is M and M is a start of the interval M is M. At A, B, B, 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 exact deformations for the year shown, not the current year. If no year is shown, the other terms year is shown. The prior is the prior interval of the prior is the prior interval of t i made exces tributions are for the current ye

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

 $\begin{array}{l} \textbf{B} \\ \textbf{-} Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instruction \\ \textbf{C} \\ \textbf{-} \\ \textbf{Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social to social$ urity 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

2018

2018

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 the Form 1040 instructions for how to deduct. J—Nontaxable site hay (information only, not included in boxes 1, 3, or 5) K—20%, excise tax on excess golden parachute payments. See the Form 1040 instructions. L—Substinuitated employee business expense reimbursements (nontaxable) M—Lincollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only). See the Form 1040 instructions. N—Checklerid Medicare tax on taxable cost of group-term life insurance over \$50,000 (former Deployee only).

phoyees only). See the Form 1040 instructions. — Excludable moving expease refinituresments paid directly to a member of the U.S. Armed Forces or included in boxes 1, 3, or 5) — Nontrache combat pay. See the instructions for form 1040 for details on reporting this amount. — Employee contributions to your Archer MSA. Report on Form 8853, Archer MSAs and mg. Term Care Insurance Contract. — 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 mpute any taxable and nontaxable amounts.

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 (cafteria) plan) to your Health Savings Account. Report on Form 8889, Health Savings Accounts (HSAs).

(HSA8), V—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 the Form 1040 instructions. AA—Designated Roth contributions under a section 401(k) plan.

Induit matrictions.
 An-Designated Roth contributions under a section 401(k) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Bh-Dessignated Roth contributions under a section 403(b) plan.
 Interpretation and the section of the amount reported with Code DD is not the amount reported with Code DD is not the section 457(b) plan. This amount does not pply to contributions under at a governmental section 457(b) plan. This amount does not pply to contributions under at a governmental section 81(b) plan.
 FF-Permittel benefits under a qualified small employer beath reimbursement arrangement GG-Income from qualified entry grams under section 83(b) plan.
 HH-Aggregate deferrats under section 83(c) dections as of the close of the calendar year Box 13. (1the "Retirement plan") how is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A. Contributions to Individual Retirement Arrangement (IRA).
 Box 14, Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance permitted healted red, notaxiable necome, educational assistance payments, ent a methor of the clergy's parsonge allowance and utilities. Raiload employses use this hox to report allowance tarement (RFA) compression. The Tax, Include tips reported by the employee to the employer in allowat element (RFA) compression. The protect sum acida search plane and solve and a system solve the date for filling your income tax return. However, to help protect your acida search plane fills.

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 security.

Form W-2 Wage and Tax Statement

# 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					
0050-19049981 000000065-PAYROL				COMPUTEK SOULUTIONS INC				OMB No. 1545-0008					
b Employer's identification number a Employee's social security number				24155 DRAKE RD									
27-32	27-3229076 041-23-6334					SUITE 145					es, tips, other compensation	2 Federal Income tax withheld	
	tutory	Retire	ment	Third-party		SOLL	145						
Emp	loyee	plan		sick pay		FARM	INGTON HILLS N	AI 483	35	3 Socia	al Security wages	4 Social Security tax withheld	
12 See In	nstrs. for Box 1	2 1	4 Other			e Employee	e's name, address, and ZIP code			5 Medi	care wages and tips	6 Medicare tax withheld	
					RISHEKA SEELAM					al Security tips	8 Allocated Tips		
					4850 SHELBOURNE DR								
						CUMMING GA 30041					endent care benefits	11 Nonqualified plans	
										Verification Code			
									4250-77c6-242d-eab3				
15 State	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			
NJ	FLI							2.70					

## Form W-2 Wage and Tax Statement

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

d Contro	d Control number Void			c Employer's	s name, address, and ZIP code		Department of the Treasury - Internal Revenue Service						
0050-19049981 000000065-PAYROL				COMPUTEK SOULUTIONS INC				OMB No. 1545-0008					
b Employ	/er's identificati	on number	a Employee'	s social security nu	mber	24155 DRAKE RD							
07.00	00076		0.41	22 (224						es, tips, other compensation	2 Federal Income tax withheld		
	229076		0.2	23-6334		SUITE	145			69688.96	9150.27		
	utory	Retire plan	nent	Third-party sick pay				10005	3 Soci	al Security wages	4 Social Security tax withheld		
Empl	oyee	pian		SICK pay		FARMI	FARMINGTON HILLS MI 48335			al Security wages	4 occar occurry tax withiniti		
12 See In	strs. for Box 12	2 14	Other			e Employee's name, address, and ZIP code				care wages and tips	6 Medicare tax withheld		
											1		
				RISHE	KA SEELAM		7 Soci	al Security tips	8 Allocated Tips				
					4850 SHELBOURNE DR								
						1.000.000			10 Dor	pendent care benefits	11 Nongualified plans		
					CUMM	ING GA 30041		1 10 000		11 Nonquaimed plans			
									Ver	ification Code			
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			
GA 3181242-OD		• • •	0091.84	1			1						
UA	3101242	2-QD			2	5091.64							

## Form W-2 Wage and Tax Statement 2018

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

c Employer's name, address, and ZIP code d Control numbe Void Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 0050-19049981 000000065-PAYROL COMPUTEK SOULUTIONS INC b Employer's identification number a Employee's social security number 24155 DRAKE RD 1 Wages, tips, other compensation 2 Federal Income tax withheld 27-3229076 041-23-6334 SUITE 145 69688.96 9150.27 13 Retire plan Statutory Third-party sick pay 3 Social Security wages 4 Social Security tax withheld FARMINGTON HILLS MI 48335 12 See Instrs. for Box 12 e Employee's name, address, and ZIP code 5 Medicare wages and tips 6 Medicare tax withheld 14 Other UI/HC/WD 12.76 7 Social Security tips DI 5 70 RISHEKA SEELAM 8 Allocated Tips 4850 SHELBOURNE DR 10 Dependent care benefits 11 Nonqualified plans CUMMING GA 30041 Verification Code 16 State wages, tips, et 17 State income tax 19 Local income tax 20 Locality name 15 Stat Employer's state I.D. No 18 Local wages, tips, etc 21144.00 NJ 273-229-076/000 53.25 NJ FLI 2.70