Employee Reference Copy D Wage and Tax 20 Statement Copy C for employee's records. Dent Employer use only 001379 CHAR/2F3 000250

c Employer's name, address, and ZIP code SCTG INTERNET LP 1500 HAMPTON ST #101 COLUMBIA SC 29201

Batch #00393

e/f Employee's name, address, and 7IP code DEEPAK BEGRAJKA 1644 MAIN ST APT 406 COLUMBIA SC 29201

b		oyer's FED ID number 58-2291056	a	Em		yee's SS 328-97		
1	Wage	es, tips, other comp.	2	Fed		I income		
		27014.45						0.37
3	Socia	al security wages	4	Soc	ial	security		
		7.95				C Respective		.49
5	Medi	care wages and tips	6	Med	lica	re tax wi	ithheld	
		7.95						.12
7	Socia	I security tips	8	Allo	cat	ed tips		
9	9 Verification Code 89f5-b4da-2efc-7888		10	10 Dependent care benefits				
11	Nonq	ualified plans	12		inst	ructions fo	or box 12	
14	Other			b D			2630	
	30.000		12		1			
			12		1			
						Ret. plan		sick pay
15	State	Employer's state ID no 254271746	. 16	Stat	e w	ages, tip		- AE
_			27014.45					1.40
	100000000000000000000000000000000000000	income tax 1594.40	18	Loca	al w	ages, tip	s, etc.	
19	19 Local income tax			20 Locality name				

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.

LATE MATE WITH FULL TO THE MATE AND THE MATE

Gross Pay 27516.50 Social Security 49 SC. State Income Tax Tax Withheld Box 17 of W-2 Box 4 of W-2 **Local Income Tax** Box 19 of W-2 Fed. Income 3990.37 **Medicare Tax** . 12 Tax Withheld Withheld SUI/SDI Box 2 of W-2 Box 6 of W-2 Box 14 of W-2

2. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other	Social Security	Medicare	SC. State Wages,	
	Compensation	Wages	Wages	Tips, Etc.	
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2	
Gross Pay Plus GTL (C-Box 12) Less Other Cafe 125 Less Exempt Wages Reported W-2 Wages	27,516.50	27,516.50	27,516.50	27,516.50	
	13.41	13.41	13.41	13.41	
	515.46	515.46	515.46	515.46	
	N/A	27,006.50	27,006.50	N/A	
	27,014.45	7.95	7.95	27,014.45	

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

DEEPAK BEGRAJKA 1644 MAIN ST APT 406 COLUMBIA SC 29201

Social Security Number: 828-97-3441 Taxable Marital Status: SINGLE Exemptions/Allowances:

FEDERAL: 1 STATE:

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27014.45 3990.37 3 Social security wages 7.95 Medicare wages and tips 7.95 .49 .12 d Control number Dept. Corp. Employer use only 001379 CHAR/2F3 000250

Employer's name, address, and ZIP code SCTG INTERNET LP 1500 HAMPTON ST #101 COLUMBIA SC 29201

Employer's FED ID number 58 - 2291056 828-97-3441 9 Verification Code 10 Dependent care benefits 89f5-b4da-2efc-7888 11 Nonqualified plans 12a See instructions for box 12 C 13.41 14 Other 12b DD 2630.70 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code

DEEPAK BEGRAJKA 1644 MAIN ST APT 406 COLUMBIA SC 29201

15 State | Employer's state ID no. | 16 State wages, tips, etc. | 254271746 | 27014.45 17 State income tax 8 Local wages, tips, etc. 1594.40 19 Local income tax 20 Locality name

Federal Filing Copy W-2 Wage and Tax 2017
Statement OMB No. 1545-0008
Copy B to be filed with employee's Federal Income Tax Heturn.

1	Wages, tips, other comp. 27014.45			2 Federal income tax withheld 3990.37			
3	Social security wages 7.95			4 Social security tax withheld			
5	5 Medicare wages and tips 7.95			Medic	are tax wit	hheld .12	
d d	Control number 01379 CHAR/2F3	Dept. 000250		Corp.	Employ A	er use only	

Employer's name, address, and ZIP code SCTG INTERNET LP 1500 HAMPTON ST #101 COLUMBIA SC 29201

b	Employer's FED ID number 58-2291056	a Employee's SSA number 828-97-3441			
7	Social security tips	8 Allocated tips			
9	Verification Code	10 Dependent care benefits			
11	Nonqualified plans	12a C 13.41			
14	Other	^{12b} DD ₁ 2630.70			
		12c			
		12d			
		13 Stat emp. Ret. plan 3rd party sick pay			
0/6	Employee's name address	170			

e/f Employee's name, address and ZIP code

DEEPAK BEGRAJKA 1644 MAIN ST APT 406 COLUMBIA SC 29201

15 State Employer's state ID no. 16 State wages, tips, etc. SC 254271746 2701 27014.45 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

SC.State Reference Copy W-2 Wage and Tax 2017
Statement
Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other comp. 27014.45			2 Federal income tax withhe 3990.3			
3	Social security wages 7.95			4 Social security tax withheld			
5	Medicare wages and tips 7.95			Medica	are tax with	held	
d	Control number	Dept.		Corp.	Employ	er use only	
001379 CHAR/2F3 000250			-	Α	23		

Employer's name, address, and ZIP code SCTG INTERNET LP 1500 HAMPTON ST #101 COLUMBIA SC 29201

58-2291056		3-97-3441
Social security tips	8 Allocated	
Verification Code	10 Dependent	care benefits
Nonqualified plans	12a C	13.41
Other	12b DD	2630.70
	12c	
	12d	
	13 Stat emp. Re	t. plan 3rd party sick pay
FEmployee's name, add EEPAK BEGRA		

1644 MAIN ST APT 406 COLUMBIA SC 29201

15 State SC	Employer's state ID no. 254271746	16 State wages, tips, etc. 27014.45
17 State	income tax 1594.40	18 Local wages, tips, etc.
19 Local	income tax	20 Locality name

SC.State Filing Copy W-2 Wage and Tax 2017
Statement
Copy 2 to be filed with employee's State Income Tax Return.

		j		_1	<u> </u>		ernal Revenue Service	
Wage and Tax Statement	2017	OMB No	. 1545-0008	Wages, tips, other co	CONTRACTOR OF THE PARTY OF THE	2 Federal incon	WHITE THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER, THE PERSON NAMED IN	
opy B - To Be Filed With Employee's FEDERAL Tax his information is being furnished to the Internal Revenue	Return.	7 Social security tips		Social security wag		4 Social securit		
Employer's name, address, and ZIP code	e Service.	8 Allocated tips	5	Medicare wages an	.00 d tips	6 Medicare tax	withheld	
UNIV.OF S. CAROLINA 1600 HAMPTON ST.	** 15500**	9 Verification code	10	Dependent care be		11 Nonqualified		
COLUMBIA, S.C. 29208		12a See instructions for be	ox 12 12b	1		12c	,	
Employee's name, address, and ZIP code		12d	13	Statutory Retirement plan	Third-party sick pay	14 Other	140	
BEGRAJKA, DEEPAK 1520 SENATE ST APT2 COLUMBIA SO	21 2 29201	b Employer identification no 57 - 60011		Employee's social se 828 97				
SC25031181-7	9000.00	240.29_						
5 State Employer's state ID number 1	6 State wages, tips, etc.	17 State income tax	18 Local	wages, tips, etc.	19 Local inc		20 Locality name	
wage and Tax Statement Copy C - For EMPLOYEE'S RECORDS (See Notice	2017	OMB No	o. 1545-0008	Wages, tips, other co	ompensation 00.00	2 Federal incor 4 Social securi	580.61	
Employee on the back of Copy B.) Employer's name, address, and ZIP code		8 Allocated tips		Medicare wages ar		6 Medicare tax		
	# # # # # # # # # # # # # # # # # # #	9 Verification code	EDEDED:	Dependent care be	.00	11 Nonqualified	.00	
UNIV.OF S. CAROLINA 1600 HAMPTON ST.	** 15500**		THEHT		.00		lill - IIIII - II	
COLUMBIA, S.C. 29208		12a See instructions for b	00x 12 12l			12c		
Employee's name, address, and ZIP code		12d	13	Statutory Retirement	Third-party sick pay	14 Other		
BEGRAJKA, DEEPAK 1520 SENATE ST APT2		b Employer identification n 57 - 60011		Employee's social se				
	29201	This information is being required to file a tax retu imposed on you if this in	furnished to the I	nternal Revenue Servi	ce. If you are on may be			
SC 25031181-7	9000.00	240.29	Come is taxable a	La L	JEL.			
15 State Employer's state ID number	6 State wages, tips, etc.	17 State income tax	18 Local	wages, tips, etc.	19 Local inc	come tax	20 Locality name	
				Wages, tips, other co		7	me tax withheld	
Wage and Tax Statement		OMB No.	o. 1545-0008	9,00 Social security was	00.00	4 Social secur	580.61	
Copy 2 – To Be Filed With Employee's State, Cit ncome Tax Return.	y, or Local		.00		.00		.00	
Employer's name, address, and ZIP code		8 Allocated tips	5	Medicare wages a	nd tips . 0 0	6 Medicare tax	withheld .00	
UNIV.OF S. CAROLINA 1600 HAMPTON ST.	** 15500**	9 Verification code	10	Dependent care b	enefits .00	11 Nonqualified	plans	
COLUMBIA, S.C. 29208		12a	12			12c	TENTHERT	
e Employee's name, address, and ZIP code		12d	13	Statutory Retiremen	t Third-party sick pay	14 Other		
BEGRAJKA, DEEPAK		b Employer identification r	number (EIN) a	Employee's social s	ecurity number			
1520 SENATE ST APT2 COLUMBIA	29201	57-6001153 828 97 344			3441			
						ILIELITIE		
SC 25031181-7 15 State Employer's state ID number	9_0_00_0	240 .29	18 Loca	l wages, tips, etc.	19 Local in	come tax	20 Locality name	
To date Employer o date is its most					The last of the same of the same		nternal Revenue Service	
Wage and Tax	2017	OMB N	lo. 1545-0008	Wages, tips, other of	compensation	2 Federal inco	ome tax withheld 580.61	
Form WW Statement Copy 2 – To Be Filed With Employee's State, Ci		7 Social security tips	3	Social security wa	ges	4 Social secur	rity tax withheld	
Income Tax Return. c Employer's name, address, and ZIP code		8 Allocated tips	.00	Medicare wages a	.00	6 Medicare ta	x withheld	
UNIV.OF S. CAROLINA	9 Verification code	10	Dependent care b	. 00 enefits	11 Nonqualified	.00		
1600 HAMPTON ST. COLUMBIA, S.C. 29208		12a	12	łb	.00	12c		
		Code	Code			d e		
e Employee's name, address, and ZIP code	12d		Statutory Retirement plan		14 Other			
BEGRAJKA, DEEPAK 1520 SENATE ST APT2 COLUMBIA SC	b Employer identification 57-60011		Employee's social s 828 97					
SC 25031181-7	000.00	240.29_			1			
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Loca	al wages, tips, etc.	19 Local in	ncome tax	20 Locality name	
	AUGUATA	1	X-12-11-11		L			