| Form W-2 Wage and Tax Statement                                     | 2017                                   |                  | 7 Social security tips                                     |                         | 1 Wages, tips, other comp  | ensation                          | 2 Federa                               | al income tax withheld 14594.85  |  |  |
|---|--|------------------|--|-------------------------|--|-----------------------------------|--|--|--|--|
| c Employer's name, address, and ZIP code                            |  | 8 Allocated tips |  | 3 Social security wages |  | 4 Social security tax withheld    |  |  |  |  |
| OPTUM SERVICES, INC   |  |                  | 9 Verification code  |                         | 99794.50 5 Medicare wages and tips                                     |                                   | 6 Medicare tax withheld                |  |  |  |
| ATTNOPERATIONS MN008-B213   |  |                  | 9 Verification code  |                         | 99794.50   |                                   | 6 Medicare tax Withheld 1447.02        |  |  |  |
| PO BOX 1459   |  |                  | 10 Dependent care benefits                                 |                         | 11 Nonqualified plans  |                                   | C                                      | instructions for box 12  |  |  |
| MINNEAPOLIS MN 55440-1459  e Employee's name, address, and ZIP code |  |                  | 13 Statutory Retirement Third-<br>employee plan Sick p     | -party                  | 14 Other   |                                   | å C<br>12b                             | 794.56   |  |  |
| LESZEK LASKOWSKI  |  |                  | ×  |                         | ESPP 1720.   | 83                                | <sup>©</sup> D                         | 24000.00   |  |  |
|   |  |                  | <b>b</b> Employer identification number $45-4683454$       | r (EIN)                 |  |                                   | <b>12c</b><br>DD                       | 28.20  |  |  |
| 6 WHISPER WAY EAST<br>LEDGEWOOD NJ 07852                            |  |                  | a Employee's social security number                        |                         | 1  |                                   | 12d                                    | 1  |  |  |
|   |  |                  | XXX-XX-5752  |                         |  |                                   | de                                     |  |  |  |
| 1   | 16 State wages, tips, etc.             |                  | 17 State income tax  | 18 Lo                   | ocal wages, tips, etc.   | 19 Local in                       |  | 20 Locality name   |  |  |
| NJ 454683454000   | 77515.                                 | . 33             | 3251.39  |                         |  |                                   |  | 2.38   UI/WF/S<br>0.40   DI  |  |  |
| Copy B-To Be Filed With Employee's FEDI                             | This information is being furnished to | o the Inte       |  | l                       | Dept. of the Treasury - IRS  |                                   |  |  |  |  |
| OMB No. 1545-0008 Visit the IRS website at www.irs                  |  |                  |  |                         |  |                                   |  |  |  |  |
|   | _                                      |                  |  | This in<br>neglige      | formation is being furnished to the ence penalty or other sanction may | Internal Revenue<br>be imposed on | e Service. If you                      | ou are required to file a tax return, a ome is taxable and you fail to report it |  |  |
| Form W-2 Wage and Tax Statement 2017                                |  |                  | 7 Social security tips                                     |                         | 1 Wages, tips, other compensation 77515.33                             |                                   | 2 Federal income tax withheld 14594.85 |  |  |  |
| c Employer's name, address, and ZIP code                            | 2021                                   |                  | 8 Allocated tips   |                         | 3 Social security wages  |                                   | 4 Social                               | security tax withheld  |  |  |
| OPTUM SERVICES, INC   |  |                  | O Verification and   |                         | 99794.50   |                                   | 6187.26                                |  |  |  |
| ATTNOPERATIONS MN008-B2   | 13                                     |                  | 9 Verification code  |                         | 5 Medicare wages and tips 99794.50                                     |                                   | 6 Medicare tax withheld 1447.02        |  |  |  |
| PO BOX 1459   |  |                  | 10 Dependent care benefits                                 |                         | 11 Nonqualified plans  |                                   | C                                      | instructions for box 12  |  |  |
| MINNEAPOLIS MN 55440-1459  e Employee's name, address, and ZIP code |  |                  | 13 Statutory Retirement Third-<br>sick p                   | -party                  | 14 Other   |                                   | ≗ C<br>12b                             | 794.56   |  |  |
| LESZEK LASKOWSKI  |  |                  | X  |                         | ESPP 1720.   | 83                                | g D                                    | 24000.00   |  |  |
| 6 WHISPER WAY EAST  |  |                  | <b>b</b> Employer identification number $45-4683454$       | r (EIN)                 |  |                                   | 12c<br>DD                              | 28.20  |  |  |
| LEDGEWOOD NJ 07852  |  |                  | a Employee's social security number                        |                         | 1  |                                   | 12d                                    |  |  |  |
|   |  |                  | XXX-XX-5752  |                         | -  |                                   | o<br>d<br>e                            |  |  |  |
| 15 State Employer's state ID number                                 | 16 State wages, tips, etc.             |                  | 17 State income tax  | 18 Lo                   | cal wages, tips, etc.  | 19 Local in                       |  | 20 Locality name   |  |  |
| NJ 454683454000   | 77515                                  | .33              | 3251.39  |                         |  |                                   |  | 2.38 UI/WF/S<br>0.40 DI  |  |  |
| Copy C-For EMPLOYEE'S RECORDS (See                                  | Notice to Employe                      | e on 1           | the back of Copy B.)                                       | ON                      | MB No. 1545-0008   | 1                                 | Dept.                                  | . of the Treasury - IRS se IRS website at www.irs.gov/efil                       |  |  |
| Form W-2 Wage and Tax Statement                                     | 2017                                   |                  | 7 Social security tips                                     |                         | 1 Wages, tips, other comp  | ensation                          | 2 Federa                               | al income tax withheld   |  |  |
| c Employer's name, address, and ZIP code                            |  |                  | 8 Allocated tips   |                         | 3 Social security wages  |                                   | 4 Social                               | security tax withheld  |  |  |
| OPTUM SERVICES, INC   |  |                  | 9 Verification code  |                         | 99794.50  5 Medicare wages and tips                                    |                                   | 6 Medicare tax withheld                |  |  |  |
| ATTNOPERATIONS MN008-B213 PO BOX 1459 MINNEAPOLIS MN 55440-1459     |  |                  |  |                         | 99794.50   |                                   | 1447.02                                |  |  |  |
|   |  |                  | 10 Dependent care benefits                                 |                         | 11 Nonqualified plans  |                                   | <b>12a</b><br>∜ C                      | 794.56   |  |  |
| e Employee's name, address, and ZIP code                            |  |                  | 13 Statutory Retirement Third-<br>sick p                   | -party<br>nay           | 14 Other   |                                   | 12b                                    | 1  |  |  |
| LESZEK LASKOWSKI  |  |                  | <b>b</b> Employer identification number                    | r (EINI)                | ESPP 1720.   | 83                                | D 12c                                  | 24000.00   |  |  |
| 6 WHISPER WAY EAST  |  |                  | 45-4683454   |                         |  |                                   | DD                                     | 28.20  |  |  |
| LEDGEWOOD NJ 07852  |  |                  | a Employee's social security nur                           | mber                    | ]  |                                   | <b>12d</b><br>ទ                        |  |  |  |
|   |  |                  | XXX-XX-5752  |                         |  |                                   | e<br>e                                 |  |  |  |
|   | 16 State wages, tips, etc.<br>77515    | 22               | 17 State income tax  | <b>18</b> Lo            | ocal wages, tips, etc.   | 19 Local inc                      |  | 20 Locality name   |  |  |
| NJ 454683454000   | 7/313                                  | . 33             | 3251.39  |                         |  |                                   |  | 2.38   UI/WF/S<br>0.40   DI  |  |  |
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|   |  |                  |  |                         |  |                                   |  |  |  |  |
|   | Г                                      |                  | 1=   |                         | T  |                                   | 1                                      |  |  |  |
| Form W-2 Wage and Tax Statement                                     | 2017                                   |                  | 7 Social security tips                                     |                         | 1 Wages, tips, other comp<br>77!                                       | ensation<br>515.33                | 2 Federa                               | al income tax withheld 14594.85  |  |  |
| C Employer's name, address, and ZIP code                            |  |                  | 8 Allocated tips   |                         | 3 Social security wages  | 704 50                            | 4 Social security tax withheld         |  |  |  |
| OPTUM SERVICES, INC   |  |                  | 9 Verification code  |                         | 99794.50 <b>5</b> Medicare wages and tips                              |                                   | 6 Medicare tax withheld                |  |  |  |
| ATTNOPERATIONS MN008-B213 PO BOX 1459                               |  |                  |  |                         | 99'  | 794.50                            | 1447.02                                |  |  |  |
| MINNEAPOLIS MN 55440-1459   |  |                  | 10 Dependent care benefits                                 |                         | 11 Nonqualified plans  |                                   | <b>12a</b><br>战 C                      | 794.56   |  |  |
| e Employee's name, address, and ZIP code                            |  |                  | 13 Statutory Retirement Third-<br>sick p                   | -party<br>ay            | 14 Other   |                                   | 12b                                    | 1  |  |  |
| LESZEK LASKOWSKI  |  |                  | X  |                         | ESPP 1720.   | 83                                | 12c                                    |  |  |  |
| 6 WHISPER WAY EAST  |  |                  | <b>b</b> Employer identification number (EIN) $45-4683454$ |                         |  |                                   | DD                                     | DD 28.20   |  |  |
| LEDGEWOOD NJ 07852  |  |                  | a Employee's social security nur                           | mber                    |  |                                   | <b>12d</b>                             |  |  |  |
|   |  |                  | XXX-XX-5752  |                         | -  |                                   | d<br>e                                 |  |  |  |
|   | 16 State wages, tips, etc.             | 2.2              | 17 State income tax  | <b>18</b> Lo            | ocal wages, tips, etc.   | 19 Local inc                      |  | 20 Locality name   |  |  |
| NJ 454683454000   | 77515                                  | . 33             | 3251.39  | ł                       |  |                                   |  | 2.38 UI/WF/S<br>0.40 DI  |  |  |
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| Form W-2 Wage and Tax Statement   | 2017                                       | 7 Social security tips                          |  | 1 Wages, tips, other comp   | ensation  | 2 Federa                        | I income   | tax withheld                               |  |
|---|--|---|--|---|---|---------------------------------|--|--|--|
| C Employer's name, address, and ZIP code  |  | 8 Allocated tips                                | 8 Allocated tips   |   | 3 Social security wages                           |                                 | 4 Social security tax withheld                         |  |  |
| OPTUM SERVICES, INC ATTNOPERATIONS MN008-B  | 9 Verification code                        | 9 Verification code                             |  | 5 Medicare wages and tips   |   | 6 Medicare tax withheld         |  |  |  |
| PO BOX 1459   | 10 Dependent care benefits                 | 10 Dependent care hanefite                      |  | 11 Nonqualified plans   |   | 12a See instructions for box 12 |  |  |  |
| MINNEAPOLIS MN 55440-1459   |  |   |  | 11 Nonquaimed plans   |   | C od o                          | ii isti ucti   | 0115 101 DOX 12                            |  |
| e Employee's name, address, and ZIP code  |  | 13 Statutory Retirement Th sic                  | ird-party<br>k pay   | 14 Other  |   | 12b                             |  |  |  |
| LESZEK LASKOWSKI  |  | <b>b</b> Employer identification numb           | er (EIN)   | 1   |   | 12c                             |  |  |  |
| 6 WHISPER WAY EAST  | 45-4683454  a Employee's social security n | a Employee's social security number XXX-XX-5752 |  | FED W-2 DATA IS   |   |                                 |  |  |  |
| LEDGEWOOD NJ 07852  | XXX-XX-5752                                |   |  |   | C o d e   |                                 |  |  |  |
| 15 State Employer's state ID number   | 16 State wages, tips, etc.                 | 17 State income tax                             | 18 Lo  | ON SEPARATE W-<br>ocal wages, tips, etc.  | 19 Local in                                       | come tax                        |  | 20 Locality name                           |  |
| NJ 454683454000   |  |   |  |   |   | 33                              | .50  | FLI  |  |
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|   |  |   | This is  | OMB No. 1545-0008   | latarral Davis                                    |                                 |  | -  |  |
|   | _  | 7 Social security tips                          | neglige  | formation is being furnished to the ence penalty or other sanction may  1 Wages, tips, other comp |   |                                 |  | tax withheld                               |  |
| Form W-2 Wage and Tax Statement   | 2017                                       | 7 Social security tips                          |  | wages, ups, other comp  | erisation   | Z i edela                       | rincome  | tax withheld                               |  |
| c Employer's name, address, and ZIP code OPTUM SERVICES, INC  |  | 8 Allocated tips                                |  | 3 Social security wages   |   | 4 Social s                      | security t   | ax withheld                                |  |
| ATTNOPERATIONS MN008-B  | 213  | 9 Verification code                             | 9 Verification code  |   | 5 Medicare wages and tips                         |                                 | 6 Medicare tax withheld                                |  |  |
| PO BOX 1459   |  | 10 Dependent care benefits                      | 10 Dependent care benefits   |   | 11 Nonqualified plans                             |                                 | 12a See instructions for box 12                        |  |  |
| MINNEAPOLIS MN 55440-1459<br>e Employee's name, address, and ZIP code                                     |  | 13 Statutory Retirement Th                      | 13 Statutory Retirement Third-party sick pay   |   |   | 12b                             |  |  |  |
| LESZEK LASKOWSKI  |  | employée plan sic                               | k páy ´  | 14 Other  |   | Code                            |  |  |  |
| 6 WHISPER WAY EAST  |  |   | b Employer identification number (EIN)  45-4683454  a Employee's social security number  |   |   |                                 | 12c  |  |  |
| LEDGEWOOD NJ 07852  |  | a Employee's social security n                  |  |   | S   | 12d                             |  |  |  |
|   |  | XXX-XX-5752                                     |  | ON SEPARATE W-  | 2   | de                              |  |  |  |
| <b>15</b> State Employer's state ID number NJ 454683454000  | 16 State wages, tips, etc.                 | 17 State income tax                             | 18 Lo  | ocal wages, tips, etc.  | 19 Local in                                       |                                 | 2 F.O  | 20 Locality name FLI                       |  |
| NJ 454683454000  Copy C-For EMPLOYEE'S RECORDS (See   |  |   |  |   |   | J.                              | 5.50   | F T1T                                      |  |
| Form W-2 Wage and Tax Statement   | 2017                                       | 7 Social security tips                          |  | 1 Wages, tips, other comp   | ensation  |                                 |  | tax withheld                               |  |
| c Employer's name, address, and ZIP code OPTUM SERVICES, INC  | Employer's name, address, and ZIP code     |   | 8 Allocated tips     9 Verification code     10 Dependent care benefits  |   | Social security wages     Medicare wages and tips |                                 | Social security tax withheld     Medicare tax withheld |  |  |
| ATTNOPERATIONS MN008-B213<br>PO BOX 1459  |  | 9 Verification code                             |  |   |   |                                 |  |  |  |
|   |  | 10 Dependent care benefits                      |  |   |   | 12a                             |  |  |  |
| MINNEAPOLIS MN 55440-1459<br>e Employee's name, address, and ZIP code                                     |  | 13 Statutory Retirement The employee plan sic   | ird-party<br>k pay   | 14 Other  |   | 12b                             |  |  |  |
| LESZEK LASKOWSKI  |  |   |  |   |   |                                 |  |  |  |
| 6 WHISPER WAY EAST  |  | 45-4683454                                      | <b>b</b> Employer identification number (EIN) $45-4683454$   |   |   |                                 |  |  |  |
| LEDGEWOOD NJ 07852  |  | <b>a</b> Employee's social security n           | umber  | FED W-2 DATA I  | S   | 12d                             |  |  |  |
|   |  |   |  | ON SEPARATE W-  |   | ē                               |  |  |  |
| <b>15</b> State Employer's state ID number NJ 454683454000  | 16 State wages, tips, etc.                 | 17 State income tax                             | 18 Lo  | ocal wages, tips, etc.  | 19 Local in                                       |                                 | 3.50   | 20 Locality name<br>FLI                    |  |
| Copy 2-To Be Filed With Employee's Stat   | c City or Local Inc                        | omo Toy Poturn                                  | 01   | MB No. 1545-0008  |   |                                 |  | Treasury - IRS                             |  |
| Copy 2-10 be Flied With Employee's Stat   | e, City, or Local life                     | one rax neturn                                  | Oli  | ND 140. 1343-0000   |   | Бері.                           | OI tile  | Treasury - IIIO                            |  |
|   |  |   |  |   |   |                                 |  |  |  |
| Form W-2 Wage and Tax Statement 2017  |  | 7 Social security tips                          | 7 Social security tips   |   | 1 Wages, tips, other compensation                 |                                 | I income   | tax withheld                               |  |
| c Employer's name, address, and ZIP code  | 2021                                       | 8 Allocated tips                                |  | 3 Social security wages   |   | 4 Social                        | security t   | ax withheld                                |  |
| OPTUM SERVICES, INC   | 9 Verification code                        | 9 Verification code                             |  | 5 Medicare wages and tips   |   | 6 Medicare tax withheld         |  |  |  |
| ATTNOPERATIONS MN008-B213 PO BOX 1459 MINNEAPOLIS MN 55440-1459  e Employee's name, address, and ZIP code |  | 10 Dependent care hanefite                      |  |   | ,   |                                 | 12a  |  |  |
|   |  | ·   | 10 Dependent care benefits  13 Statutory Pedirement Third-party sick play  b Employer identification number (EIN)  45-4683454  a Employee's social security number |   | 11 Nonqualified plans  14 Other  FED W-2 DATA IS  |                                 |  |  |  |
|   |  | 13 Statutory Retirement The sic                 |  |   |   |                                 |  |  |  |
| LESZEK LASKOWSKI  |  |   |  |   |   |                                 |  |  |  |
| 6 WHISPER WAY EAST<br>LEDGEWOOD NJ 07852  |  |   |  |   |   |                                 |  |  |  |
| 02002 1.0 0.002   |  | XXX-XX-5752                                     |  | ON SEPARATE W-  |   | ode                             |  |  |  |
| 15 State Employer's state ID number   | 16 State wages, tips, etc.                 | 17 State income tax                             | 18 Lo  | ocal wages, tips, etc.  | 19 Local in                                       |                                 |  | 20 Locality name                           |  |

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