		Employe	e I	Refe	erenc	e		Сору		
ı			Wage	á	and	Tax				
١.			Statemen	t			_	040		
V	V-2							2018		
Сор	y C for employ	ee's records	š.				OME	3 No. 1545-0008		
d	Control numl		Dept.	Con	D.			Employer use o		
793	3526		150				Α		36	
С	Employer'e	amo addi	ess, and ZIP	code		l				
		z-Leo		coue						
			Hollow							
	Rachel		MI 5	76	72-2	700				
	Racilei	rview	MI S	,,,	12-3	708				
				Ва	itch		7	#02021		
e/f	Employees	namo addi	ess and ZIP	odo						
6/1	Lilipioyees	iailie, auui	ess and zir v	Joue						
	David	Ob - :								
							_			
	543 J									
	North	Jorgel	perg	HI 78268-3846						
	0									
b	Employer's FED ID number 56-0832394			a Employee's SSA number 395-24-4924						
1	Wages, tips,	other com	p.	2	Feder	al income	tax w	ithheld		
	94854.66	5					278	56.75		
3	Social security wages			4	Socia	I security	tax wi	thheld		
	117534.2						899	1.37		
5	Medicare wa		os	6	Medic	are tax w				
	92354.49	,					267	8.28		
7	Social secur			8	Alloca	ited tips				
	117534.2	27					923	54.49		
9	Verification (	Code		10	Depe	ndent car	re bene	efits		
	0						209			
11	Nonqualifie	d nlane		122	See i	nstruction	ne for h	nov 12		
	164	a piulio						JON 12		
14				L	P		386	4		
14	Other			12b			471   268			
				12d			1 145			
				13 S		Ret. Plan	3rd pa	arty sick pay		
15	State	Employers	state ID no.	16	0 State	wages, 1	tine of	x		
	SD	301-83-9			Oluli	, wasten		46.55		
17	State incon									
17	1906.21	н сах		18 Local wages, tips, etc. 110864.43						
<u> </u>				20						
19					Loca	lity name		se Summit		
	13483.88									

## 2018 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 2018 pay stub plus any adjustments submitted by your employer.

Gross Pay		Social Security Tax Withheld	8991.37	SD.State Income Tax Box 17 of W-2	1906.21
		Box 4 of W-2		Local Income Tax	13483.88
				Box 19 of W-2	
Fed. Income	27856.75	Medicare Tax	2678.28		
Tax Withheld		Withheld		SUI/SDI/FLI	
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 Secu	r Medicare	SD.State Wages,	Jesse Summit
	Compensation	Wages	Wages Wages		Local Wages,
	Box 1 of W-2	Box 3 of W-	2 Box 5 of W-2	Box 16 of W-2	Tips, Etc. Box 18 of W2
Gross Pay	131702.78	1E+05	131702.8	131702.8	131702.8
Plus GTL (C-Box 12)	3864	3864	3864	3864	3864
Less 401(k) (D-Box 2) Less Other Café 125	471 27856.75	N/A 27856.75	N/A 27856.75	471 27856.75	N/A 27856.75
Reported W-2 Wages	94854.66	94854.66	94854.66	94854.66	94854.66

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

David Choi	Social Security Number: Taxable Marital Status:	395-24-49 MARRIED
David Choi	Exemptions/Allowances:	
543 Jonathan Motorway Suite 236	FEDERAL: 4	
545 Conachan Mocorway Durce 250	STATE: 4	
Rachelview MI 57672-	LOCAL:	

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1	Wages, tips, other cor 94854.66	2 Federal income tax withheld 27856.75						
3	Social security wages	:	4 Social security tax withheld					
•	117534.27		8991.37					
5	Medicare wages and t	ips	6 Medic	6 Medicare tax withheld				
	92354.49	-			2678.28			
d	Control number	Dept.	Corp.		Employer use on	lv		
- 793	3526	150			Α	36		
С	Employer's name, add	iress, and ZIP	code					
	Sanchez-Lec	n Inc						
	43106 April							
	-							
	Rachelview	MI 5	7672-3	708				
	0							
	F							
b	Employer's FED ID no	illipei	a Emple	oyee's SSA	number 0			
	J3-0032354			•				
7	Social security tips		8 Alloca	ted tips				
	117534.27			-	92354.49			
_								
9	Verification Code		10 Depe	ndent care	benefits 209			
	U		209					
11	Nonqualified plans		12a See i	nstruction	s for box 12			
	164							
			P		3864			
14	Other		12b		471			
			12c		268			
			12d		145			
			13 Stat emp. 0	Ret. Plan	3rd party sick pay			
e/f	Employees name, add	iress and ZIP of			_			
	David Choi							
	543 Tonatha	n Motorw						
	543 Jonatha		-					
	North Jorge		-	te 236 8268-3				
			-					
15	North Jorge	berg	HI 7	8268-3	3846			
15	North Jorge	berg	HI 7		3846			
15	North Jorge 0 State Employer SD 01-83-9	berg	HI 7	8268-3 e wages, ti	ips, etc. 43146.55			
	North Jorge  0 State Employer SD 01-83-9 State income tax	berg	HI 7	8268-3	ips, etc. 43146.55			
15	North Jorge 0 State Employer SD 01-83-9	berg	HI 7	8268-3 e wages, ti	ips, etc. 43146.55			
17	North Jorge 0  State Employer 01-83-9  State income tax 1906.21	berg	HI 7	8268-3 e wages, ti	ips, etc. 43146.55 ips, etc. 110864.43			
17	North Jorge 0  State Employer 01-83-9  State income tax 1906.21  Local income tax	berg	HI 7	8268-3 e wages, ti	ips, etc. 43146.55 ips, etc. 110864.43			
17	North Jorge 0  State Employer 01-83-9  State income tax 1906.21	berg	HI 7	8268-3 e wages, ti	ips, etc. 43146.55 ips, etc. 110864.43			
	North Jorge 0  State Employer 01-83-9  State income tax 1906.21  Local income tax	berg 's' state ID no. 36	HI 7	8268-3 e wages, ti	ips, etc. 43146.55 ips, etc. 110864.43			
17	North Jorge  State Employer SD 01-83-5  State income tax 1906.21  Local income tax 13483.88	berg s' state ID no. 36	HI 7  16 State  18 Loca  20 Loca  Filing	8268-3 e wages, ti al wages, ti	ips, etc. 43146.55 ips, etc. 110864.43			
17	North Jorge  State Employer SD 01-83-5  State income tax 1906.21  Local income tax 13483.88	s' state ID no.	HI 7  16 State  18 Loca  20 Loca  Filing and	8268-3 e wages, ti al wages, ti	ips, etc. 43146.55 ips, etc. 110864.43			
17	North Jorge  State Employer SD 01-83-5  State income tax 1906.21  Local income tax 13483.88	berg s' state ID no. 36	HI 7  16 State  18 Loca  20 Loca  Filing and	8268-3 e wages, ti al wages, ti	18846  198, etc. 198, etc. 110864.43  198, etc. 10094			
17 19	North Jorge  State Employer SD 01-83-5  State income tax 1906.21  Local income tax 13483.88	s' state ID no.	HI 7  16 State 18 Loca 20 Loca Filling and	8268-3 e wages, ti al wages, ti ality name	18846  198, etc. 198, etc. 110864.43  19888 Summit  19888 Copy  2018			

1	Wages, tips, other comp.		2 Fede	ral income	tax withheld				
	94854.66	27856.75							
3	Social security wages 117534.27			4 Social security tax withheld 8991.37					
5	Medicare wages and tips	6 Medi	6 Medicare tax withheld						
	92354.49			2678.28					
d	Control number	Dept.	Corp.	orp. Employer use only					
793	3526	150			A	36			
С	Employer's name, address	, and ZIP o	ode						
	Sanchez-Leor	Inc							
	43106 April	Hollov	W						
	Rachelview	MI	57672	-3708					
	0								
	•								
b	Employer's FED ID number	r	a Emp	loyee's SS	A number				
	56-0832394				0				
7	Social security tips		8 Alloc	ated tips					
	117534.27				92354.49				
9	Verification Code		10 Dep	10 Dependent care benefits					
9	0		10 Dependent care benefits 209						
			103						
11	Nonqualified plans		12a See instructions for box 12						
	164								
14	Other				3864 471				
14	Other				268				
					145				
				. Ret. Plan	3rd party sick pay				
			0	×	×				
e/f	Employees name, address	and ZIP co	ode						
	David Choi								
	543 Jonathan	Motor	rway S	uite 2	36				
	North Jorgel	nera	HI	78268	-3846				
	0	July		,0200	5010				
	•								
15	State Employers	state ID no	16 Star	te wages, t	ips, etc.				
	SD 01-83-93	6			43146.55				
17	State income tax		18 Loc	al wages, t	ine ate				
17	State income tax 1906.21		18 LOC	ai wages, t	tips, etc. 110864.43				
	1500.21				110004.45				
19	Local income tax		20 Loc	ality name					
	13483.88				Jesse Summit				
	SD.State	9	Filing		Сору				
		Wage	and	Tax					
٠.		Stateme	ont						
٧	<b>V-2</b>	Ciaconic			2018				
Con	y 2 to be filed with employee's	State Inco	me Tax Re	turn	OMB No. 1545-0008				
	,								

1	Wages, tips, oth 94854.66	2 Fe	2 Federal income tax withheld 27856.75						
3	Social security v	4 Social security tax withheld							
1	117534.2		8991.37						
5				6 Medicare tax withheld					
	92354.49					2678.28			
d	Control number	Dept.	Corp.			Employer use only			
793	13526	150				Α	36		
С	Employer's nam	e, address, and ZIP	code						
	Sanche	z-Leon Inc							
	43106	April Hollo	w						
	Rachel	.view MI	5767	72-37	80				
	0								
┖									
b	Employer's FED		a En	nployee'	s SSA	number			
	56-08323	94				0			
7	Social security t	ine	8 Al	ocated t	ine				
ľ	117534.2			ooutou t	.,,,	92354.49			
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9	Verification Cod	е	10 D	10 Dependent care benefits					
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11	Nongualified pla	ans	12a S	e instru	ctions	for box 12			
	164								
				P		3864			
14	Other		12b   471						
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				mp. Ret. F		3rd party sick pay			
			0 x x						
e/f	Employees nam	e, address and ZIP of	ode						
	David	Choi							
	543 Jo	nathan Moto	rway Suite 236						
	North	Jorgeberg	н	78	268-	-3846			
	0								
15	State	Employers' state ID n	16 S	tate was	es, tip				
	SD	01-83-936				43146.55			
17	State income ta	ax .	18 L	ocal was	ans, fir	ns. etc.			
	1906.21			oou. was	ąco, tij	110864.43			
19	Local income t		20 L	ocality n	ame				
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Н	Ci	ty or Local	Filin	ıa		Сору			
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Con	u 2 to be filed with	employee's City or Lo	cal Incon	no Tay P	oturn				
CUP	y 2 to be liled With	employee's City of Lo	cai illicul	ID I dX R	ptuill	OIVID 140. 1343-0000			