		Employe	e f	Refe	erenc	e		Сору	
			Wage	a	and	Tax			
١,	V-2		Statemen	ıt				2018	
V	V-Z								
Сор	y C for employ	ee's record:	i.				ON	IB No. 1545-0008	
d	Control num	ber	Dept.	Cor	p.			Employer use onli	
842	20614		150				Α		36
С	Employer's I	name, addı	ess, and ZIP	code	,				
	Sawyer	-Harm	n PLC						
	000 Va	alerie	Summit	Ap	t. 9	87			
	East I	atric:	iaview	MN	91	506-2	521		
	0								
				R	atch			#02021	
e/f	Employees i	name, addr	ess and ZIP of	code					
	Jason	Stewa	art						
	189 G	omez Pi	Lains Su	iite	e 20	8			
		chelle	eland V	T		87002	-76	86	
	0								
b	Employer's	FED ID nur	nber	a	Emplo	yee's SS	A nu	mber	
	57-63931	.77					03	5-51-2588	
1	Wages, tips,	other com	D.	2	Feder	al income	tax	withheld	
	147640.2	25					32	861.78	
3	Social secur	ity wages		4	Social	security	tax v	vithheld	
	155560.6			-				900.39	
_				H					
5	Medicare wa 124123.5		ıs	6	Medic	are tax w		ld 99.58	
	124123.5	95					35	99.58	
7	Social secur			8	Alloca	ted tips			
	155560.6	5					12	4123.55	
9	Verification (Code		10	Depe	ndent car			
	0						13	6	
11	Nonqualifie	plans		12a	See ii	nstruction	s for	box 12	
	173								
14	Other			12b	Y		30		
				12c			67		
				12d		Ret. Plan	84	9 party sick pay	
				13 3	0 0	X X	Siu	0	
15	State		state ID no.	16	State	wages, t			
	ID	791-42-9	194				78	593.0	
17	State incon	ne tax		18	Loca	l wages,			
	4121.55			1			14	8741.18	
19	Local incor			20	Loca	lity name			
	28011.93	3		1			Cr	awford Falls	

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	192402.4	Social Security Tax Withheld Box 4 of W-2	11900.39	ID.State Income Tax Box 17 of W-2 Local Income Tax Box 19 of W-2	4121.55 28011.93
Fed. Income	32861.78	Medicare Tax	3599.58		
Tax Withheld Box 2 of W-2		Withheld Box 6 of W-2		SU/SDI/FLI 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	ID.State Wages,	Crawford Falls
	Compensation Box 1 of W-2	Wages Box 3 of W-	Wages 2 Box 5 of W-2	Tips, Etc. Box 16 of W-2	Local Wages, Tips, Etc. Box 18 of W2
Gross Pay	192402.42	2E+05	192402.4	192402.4	192402.4
Plus GTL (C-Box 12)	4088	4088	4088	4088	4088
Less 401(k) (D-Box 2) Less Other Café 125	302 32861.78	N/A 32861.78	N/A 32861.78	302 32861.78	N/A 32861.78
Reported W-2 Wages	147640.25	147640.25	147640.25	147640.25	147640.25

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

Jason Stewart 189 Gomez Plains Suite 208 East Patriciaview MN 9 Social Security Number: 035-51-251
Taxable Marital Status: MARRIED
Exemptions/Allowances:
FEDERAL: 4
STATE: 4

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	Wages, tips, other com 147640.25	p.	2 Fed	Federal income tax withheld 32861.78				
3	Social security wages		4 Soc	ial security t	tax withheld			
	155560.6				11900.39			
5	Medicare wages and ti	ps	6 Med	icare tax wi	thheld			
	124123.55				3599.58			
d	Control number	Dept.	Corp.		Employer use only			
	20614	150			Α	36		
С	Employer's name, add	ress, and ZIP	code	•				
	Sawyer-Harm	on PLC						
	000 Valerie		7m+	007				
			-					
	East Patric	iaview	MN 9	1506-25	521			
	0							
_								
b	Employer's FED ID nur 57-6393177	nber	a Emp	oloyee's SS/				
	57-6393177				0			
7	Social security tips		8 Allo	cated tips				
	155560.6				124123.55			
9	Verification Code		10 Dep	endent care				
	0				136			
11	Nonqualified plans		12a See	instruction	s for box 12			
	173							
			Y		4088			
14	Other		12b		302			
			12c		672			
			12d		849 3rd party sick pay			
			13 Stat en	p. Ket. Plan	O 0			
e/f	Employees name, add	ress and ZIP c						
	Jason Stew	art						
			i+a 2	nα				
	189 Gomez P	lains Su			7505			
	189 Gomez P	lains Su		08 87002-	-7686			
	189 Gomez P	lains Su			-7686			
15	189 Gomez P. New Michello	lains Su eland V	т	87002-				
15	189 Gomez P. New Michello	lains Su eland V	т					
15	189 Gomez P. New Michell 0 State Employers 1D 91-42-99	lains Su eland V	T 16 Sta	87002- ate wages, ti	ips, etc. 78593.0			
	189 Gomez P. New Michelle 0 State Employers 1D 91-42-9! State income tax	lains Su eland V	T 16 Sta	87002-	ips, etc. 78593.0 ips, etc.			
15	189 Gomez P. New Michell 0 State Employers 1D 91-42-99	lains Su eland V	T 16 Sta	87002- ate wages, ti	ips, etc. 78593.0			
	189 Gomez P New Michell 0 State	lains Su eland V	T 16 Sta 18 Lo	87002- ute wages, ti cal wages, t	ips, etc. 78593.0 ips, etc. 148741.18			
17	189 Gomez P. New Michelle 0 State Employers 1D 91-42-9! State income tax	lains Su eland V	T 16 Sta 18 Lo	87002- ate wages, ti	ips, etc. 78593.0 ips, etc. 148741.18			
17	189 Gomez P. New Michell. 0 State Employers 1D 91-42-9! State income tax 4121.55	lains Su eland V	T 16 Sta 18 Lo 20 Lo	87002- ate wages, to cal wages, to cality name	ips, etc. 78593.0 ips, etc. 148741.18			
17	189 Gomez P. New Michell. 0 State Employers 1D 91-42-9! State income tax 4121.55	lains Su eland V s'state ID no.	T 16 Sta 18 Lo	87002- ate wages, to cal wages, to cality name	ips, etc. 78593.0 ips, etc. 148741.18			
17	189 Gomez P. New Michell 0 State Employer 11-42-91 State income tax 4121.55 Local income tax 28011.93	lains Su eland V s'state ID no.	T 16 Sta 18 Lo 20 Lo	87002- ate wages, ti cal wages, t	ips, etc. 78593.0 ips, etc. 148741.18 Crawford Falls			
17	189 Gomez P. New Michell 0 State Employers 10 91-42-91 State income tax 4221.55 Local income tax 28011.93 Federa	lains Su eland V s'state ID no.	T 16 Sta 18 Lo 20 Lo Filing and	87002- ate wages, ti cal wages, t	ips, etc. 78593.0 ips, etc. 148741.18 Crawford Falls			
17	189 Gomez P. New Michell 0 State Employer 11-42-91 State income tax 4121.55 Local income tax 28011.93	lains Su eland V s'state ID no.	T 16 Sta 18 Lo 20 Lo Filing and	87002- ate wages, ti cal wages, t	ips, etc. 78593.0 ips, etc. 148741.18 Crawford Falls			

1	1 Wages, tips, other comp. 147640.25			2 Federal income tax withheld 32861.78					
3	Social security v		4 Soc	ial eocurity	tax withheld				
	155560.6		- 300	iai security	11900.39				
5	Medicare wages	and tips	6 Med	licare tax wi	thheld				
	124123.5	5			3599.58				
d	Control number		Corp.		Employer use only				
	0614	150			A	36			
С		e, address, and ZIP o	:ode						
		-Harmon PLC							
		alerie Summit	-						
		Patriciaview	MN	91506-	2521				
	0								
b	Employer's FED	ID number	a Emp	ployee's SS/	A number				
	57-63931		a Liiij	Jioyee a 337	0				
7	Social security t		8 Allo	cated tips					
	155560.6				124123.55				
9	Verification Cod	e	10 Dep	pendent care	e benefits				
	0				136				
11	Nonqualified pla	ane	122 500	inetruction	s for box 12				
"	Nonqualified pia	2110	12d 386	, matruction	D IUI DUX IZ				
			Y		4088				
14	Other		12b		302				
			12c 12d		672 849				
				np. Ret. Plan					
			0	×	0				
e/f	Employees nam	e, address and ZIP or	ode						
	Jason	Stewart							
		mez Plains S							
		chelleland	VT	8700	2-7686				
	0								
15	State	Employers' state ID no	16 Sta	ate wages, ti	ips. etc.				
		91-42-994			78593.0				
	ID								
			40 1.						
17	State income to	ax .	18 Lo	cal wages, t					
17		ax	18 Lo	cal wages, t	ips, etc. 148741.18				
	State income to 4121.55 Local income to	ax		cal wages, t	148741.18				
	State income to	ax			148741.18				
17	State income to 4121.55 Local income to 28011.93	ax ;	20 Lo	cality name	148741.18 Crawford Falls				
	State income to 4121.55 Local income to 28011.93	ax ID.State	20 Lo	cality name	148741.18				
19	State income to 4121.55 Local income to 28011.93	ID.State	20 Lo Filing	cality name	148741.18 Crawford Falls				
19	State income to 4121.55 Local income to 28011.93	ax ID.State	20 Lo Filing	cality name	148741.18 Crawford Falls				

1	Wages, tips, other comp. 147640.25			Pederal income tax withheld 32861.78				
3	Social security wages 155560.6	4 Social security tax withheld 11900.39						
5	Medicare wages and tips 124123.55	6 Medicare tax withheld 3599.58						
d	Control number	Dept.	Corp.	Corp. Employer use only				
842	8420614 150				A			
С	Employer's name, address	, and ZIP o	ode					
	Sawyer-Harm	on PLC						
	000 Valerie	Summi	t Apt.	987				
	East Patric	laview	MN 9	1506-2	2521			
b	Employer's FED ID number	r	a Emplo	yee's SSA	number			
	57-6393177				0			
7	Social security tips		8 Alloca	ted tips				
ľ	155560.6		o Alloca	led tips	124123.55			
9	Verification Code 0		10 Depe	10 Dependent care benefits 136				
11	Nonqualified plans		12a See instructions for box 12					
	173							
14	Other		12b		4088 302			
14	Other				672			
			12d		849			
			13 Stat emp. 0	Ret. Plan	3rd party sick pay 0			
e/f	Employees name, address	and ZIP c	ode					
	Jason Stewa							
	189 Gomez Pi							
	New Michelle	eland	VT	87002	2-7686			
15	State Employers ID 91-42-99		16 State	wages, ti	ps, etc. 78593.0			
17	State income tax		18 Loca	l wages, ti				
	4121.55				148741.18			
19	Local income tax 28011.93		20 Loca	lity name	Crawford Falls			
	City or Lo	cal	Filing		Сору			
1	•	Wage	3					
W	W-2 Statemen				2018			
Cop	y 2 to be filed with employee's	City or Loc	al Income T	ax Return	OMB No. 1545-0008			
	,	. ,						