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١,	V-2		Statemen	t				2018	
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			sle Apt.						
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	0								
b	Employer's		nber	а	Emple	yee's SS			
	40-04995	557					750	-41-0860	
1	Wages, tips,		p.	2	Feder	al income			
	130327.0	06					336	23.08	
3	Social secur	ity wages		4	Socia	security	tax wi	ithheld	
	126551.5	5					968	1.19	
5	Medicare wa	ane and tir	· ·	6	Modic	are tax wi	thhol		
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14	Other			12b	1		374		
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						Ret. Plan		arty sick pay	
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15	MO	Employers 628-69-0	state ID no.	16	State	wages, t		tc. 99.28	
17	State incon 7656.63	ne tax		18	Loca	l wages, t		tc. 742.27	
19	Local incom			20	Loca	lity name		th Walks	

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	173631.3	Social Security Tax Withheld Box 4 of W-2	9681.19	MO.State Income Tax Box 17 of W-2 Local Income Tax Box 19 of W-2	7656.63 13743.33
Fed. Income	33623.08	Medicare Tax	4884.38		
Tax Withheld Box 2 of W-2		Withheld Box 6 of W-2		SUI/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 Secur	r Medicare	MO.State Wages,	Smith Walks
	Compensation Box 1 of W-2	Wages Box 3 of W-2	Wages 2 Box 5 of W-2	Tips, Etc. Box 16 of W-2	Local Wages, Tips, Etc. Box 18 of W2
Gross Pay	173631.33	2E+05	173631.3	173631.3	173631.3
Plus GTL (C-Box 12)	4303	4303	4303	4303	4303
Less 401(k) (D-Box 2) Less Other Café 125	374 33623.08	N/A 33623.08	N/A 33623.08	374 33623.08	N/A 33623.08
Reported W-2 Wages	130327.06	130327.06	130327.06	130327.06	130327.06

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

 Steven
 Schneider
 Social Security Number.

 014 Weiss Isle Apt. 432
 Emmpforms/Albannessen

 Newmanborough
 WY 07
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V	V-2		Stateme	nt			2	2018			
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		Federal		Fili				Camir			
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	7656.63				125742.27						
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14	Other			12b 12c	-		374				
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3	Social securit	v waase				_					

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Сор	y 2 to be filed with	employee's City or Loc	al Ind	ome T	ax Return	OMB No. 1545-0008				