								_		
		Employe	e l	Refe	erenc	e		Сору		
ı			Wage	a	and	Tax				
١.	V-2		Statemen	ıt				040		
V	V-Z						4	2018		
Con	y C for employ	ee's records	i.				OME	No. 1545-0008		
d	Control num		Dept.	Cor	D.	l		Employer use	only	
799	96698		150				Α		36	6
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С			ess, and ZIP	code	9					
		s-Davis								
			d Cresce							
	East Katrinaview MD)	42	256-11	L16			
	0									
				R	atch		4	¥02021		
				-	aton		,	702021		
e/f	Employees	name, addr	ess and ZIP	code						
	Sandra	a Wi	right							
ı			Highway	. a.	n+	112				
ı			MT 1523							
ı	East I		MT 1523	4-	,,,,					
b	Employer's		nber	а	Empl	oyee's SS/				
	55-7913	926					545	-78-2500		
1	Wages, tips,	other com	n.	2	Feder	al income	tax w	ithheld		
ı	157320.8	32					461	92.01		
3	Social secur			4	0	I security				
١	167356.			*	Socia	Security		02.78		
5	Medicare wa	iges and tip	os	6	Medic	are tax wi	thhelo	ı		
	177464.	L8					514	6.46		
7	Social secur	****		8	A.II.	ted tips				
′	167356.5			° .	Alloca	itea tips	177	464.18		
9	Verification	Code		10	Depe	ndent care		efits		
	0						175			
11	Nonqualifie	d plans		12a	See i	nstruction	s for t	oox 12		
	297									
14	Other			12b	R		516 657	4		
14	Other			120						
				12d		i	544			
ı				13 S		Ret. Plan	3rd pa	arty sick pay		
15	State	F1	state ID no.	16	0	wages, ti		×		
15	ND	338-01-7		16	State	wages, t		C. 86.66		
17	State incon 8243.46	ne tax		18	Loca	ıl wages, t		ic. 652.61		
1	8243.46			1			189	05∠.61		
19	Local incor	ne tax		20	Loca	lity name				
1	15077 3			1						

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	216315.6	Social Security Tax Withheld	12802.78	ND.State Income Tax Box 17 of W-2	8243.46
		Box 4 of W-2		Local Income Tax	15877.34
				Box 19 of W-2	
Fed. Income	46192.01	Medicare Tax	5146.46		
Tax Withheld		Withheld		SU/SD/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 Secur Medicare		ND.State Wages,	Green Brooks	
	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	216315.61	2E+05	216315.6	216315.6	216315.6	
Plus GTL (C-Box 12)	5164	5164	5164	5164	5164	
Less 401(k) (D-Box 2) Less Other Café 125 Reported W-2 Wages	657 46192.01 157320.82	N/A 46192.01 157320.82	N/A 46192.01 157320.82	657 46192.01 157320.82	N/A 46192.01 157320.82	

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

	Social Security Number:	545-78-2	
Sandra Wright	Taxable Marital Status:	MARRIE	
	Exemptions/Allowances:		
35945 Susan Highway Apt. 112	FEDERAL: 4		
	STATE: 4		
East Katrinaview MD 4	LOCAL:		

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y					
y					
у					
у					
a Employee's SSA number					
yer use only 36					
12802.78 6 Medicare tax withheld 5146.46 Corp. Employer use only A					

1	Wages, tips, other 157320.8	2 Federal income tax withheld 46192.01							
3	Social security wages		4 Social security tax withheld						
167356.54			12802.78						
5	Medicare wages and tips		6 Medic	are tay wit					
•	177464.1	6 Medicare tax withheld 5146.46							
_									
d	Control number	Dept.	Corp.		Employer use only				
	6698	150			A	36			
С	Employer's name	e, address, and ZIP of	code						
	Fields	-Davis Inc							
	2772 R	ichard Cres	cent						
	East Katrinaview MD 42256-1116								
	0								
_									
b	Employer's FED ID number		a Empl	a Employee's SSA number					
	55-79139			0					
7	Social security ti	ine	8 Alloca	ated tips					
•	167356.5		- Anoth	nou upo	177464.18				
	_37330.5	-							
9	Verification Code	9	10 Depe	10 Dependent care benefits					
	0				175				
11	Nonqualified pla	ins	12a See i	nstruction	s for box 12				
	297								
	Out		R		5164				
14	Other		12b 12c		657				
				12d 544 13 Stat emp. Ret. Plan 3rd party sick pay					
			13 Stat emp	Ket. Plan	ard party sick pay				
e/f	Employees name	e, address and ZIP c							
	,, cco nam	-, unu Em O							
	Sandra	Wright							
	25245			110					
		Susan Highwa							
		Susan Highwa Melody MT 15							
	East M	Melody MT 15	234-77	17					
15	East M 0	lelody MT 15	234-77	17					
15	East M 0	Melody MT 15	234-77	17	ps, etc. 86386.66				
	East M 0 State	Employers' state ID no	234-77:	17 e wages, ti	86386.66				
15	East M 0 State ND State income ta	Employers' state ID no	234-77:	17	86386.66 ips, etc.				
	East M 0 State	Employers' state ID no	234-77:	17 e wages, ti	86386.66				
17	East M 0 State ND State income ta	Employers' state ID no 38-01-782	234-77: 16 State 18 Loca	17 e wages, ti	86386.66 ips, etc.				
17	East M 0 State ND State income ta 8243.46	Employers' state ID no 38-01-782	234-77: 16 State 18 Loca	17 e wages, ti al wages, ti	86386.66 ips, etc.				
17	State ND State income ta 8243.46	Employers' state ID no 38-01-782	234-77: 16 State 18 Loca	17 e wages, ti al wages, ti	86386.66 ips, etc. 189652.61				
17	State ND State income to 8243.46	Employers' state ID no 38-01-782	16 State 18 Loca 20 Loca	17 e wages, ti al wages, ti	86386.66 ips, etc. 189652.61 Green Brooks				
17	State ND State income to 8243.46	Employers' state ID no 38-01-782	16 State 18 Loca 20 Loca Filling	17 e wages, ti al wages, ti ality name	86386.66 ips, etc. 189652.61				
17	State ND State income to 8243.46	Employers' state ID no 38-01-782	16 State 18 Loca 20 Loca Filling	17 e wages, ti al wages, ti	86386.66 ips, etc. 189652.61 Green Brooks				
17	East M 0 State ND State income ta 8243.46 Local income ta 15877.34	Employers' state ID no 38-01-782	16 State 18 Loca 20 Loca Filling	17 e wages, ti al wages, ti ality name	96386.66 jps, etc. 189652.61 Green Brooks				
17	State ND State income to 8243.46	Employers' state ID no 38-01-782	16 State 18 Loca 20 Loca Filling	17 e wages, ti al wages, ti ality name	86386.66 ips, etc. 189652.61 Green Brooks				

1	157320.82			2 Federal income tax withheld 46192.01					
3	Social security wages 167356.54			4 Social security tax withheld 12802.78					
5	Medicare wages	and tips	6 Medic	6 Medicare tax withheld					
	177464.1	8			5146.46				
d (Control number	Dept.	Corp.		Employer use only				
	698	150			A	36			
С		e, address, and Zi -Davis Inc	code						
	2772 F	ichard Cre	cent						
		atrinaview		12256-	1116				
b	Employer's FED	ID number	a Emplo	oyee's SSA	number				
	55-79139			,	0				
7	Social security t		8 Alloca	ted tips					
	167356.5	4			177464.18				
9	Verification Cod	9	10 Dene	ndent care	honofits				
•	0	_	то вере	nacini care	175				
11	Nonqualified pla	ans	12a See ii	nstruction	s for box 12				
	297		_		5164				
14	Other		12b		657				
			12c		672				
			12d		544				
			13 Stat emp.		3rd party sick pay				
e/f	Employees nam	e. address and ZII		×	×				
	35945	Wright Susan High Melody MT 1							
15	State ND	Employers' state ID 38-01-782	o 16 State	wages, ti	ps, etc. 86386.66				
17	State income ta	ıx	18 Loca	l wages, ti	ins. etc.				
	8243.46				189652.61				
19	Local income t 15877.34		20 Loca	lity name	Green Brooks				
	Ci	ty or Local	Filing		Сору				
		Wad		Tax					
W	I-2	State		· un	2018				
	_								
Copy	2 to be filed with	employee's City or	ocal Income T	ax Return	OMB No. 1545-0008				