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			Wage	a	ind	Tax			
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	Port I	inda	WV 6	4689	-79	77			
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				Ва	tch		#020	021	
e/f	Employees r	name, addr	ess and ZIP	code					
	Robert	Ric	chmond						
	622 Si	ngh Th	roughw	ay					
	Wilson	land	NC 778	18-7	115				
	0								
	F	ID		1-	F1		A		
b	Employer's F		nber	а	Empi	byee's 55	A number 836-66-6	692	
1	Wages, tips, 93117.48		p.	2	Feder	al income	tax withhel	d	
	93117.48						31943.6		
3	Social securi			4	Social	I security	tax withhele	i	
	82673.54						6324.53		
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7	Social securi			8	Alloca	ited tips			
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9	Verification (	Code		10	Depe	ndent car	e benefits		
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15	State NH	Employers 106-28-7	state ID no.	16	State	wages,	tips, etc. 49289.18		
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17	State incom	ne tax		18	Loca	ıl wages,			
1	2188.48						106445.0	)	
19	Local incon			20	Loca	lity name			
1	11590.89			1-0	_500	,	Ruben Ca	nyon	

## 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	131385.6	Social Security Tax Withheld	6324.53	NH.State Income Tax Box 17 of W-2	2188.48
		Box 4 of W-2		Local Income Tax Box 19 of W-2	11590.89
Fed. Income	31943.6	Medicare Tax	2436.06		
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 Secu	ur Medicare	NH.State Wages,	Ruben Canyon	
	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	131385.61	1E+05	131385.6	131385.6	131385.6	
Plus GTL (C-Box 12)	7970	7970	7970	7970	7970	
Less 401(k) (D-Box 2) Less Other Café 125	994 31943.6	N/A 31943.6	N/A 31943.6	994 31943.6	N/A 31943.6	
Reported W-2 Wages	93117.48	93117.48	93117.48	93117.48	93117.48	

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

Robert Richmond
622 Singh Throughway
Port Linda WV 64689-7

2 Federal income tax withheld

Social Security Number: 836-66-66
Taxable Marital Status: MARRIET
Exemptions/Allowances: FEDERAL: 4
STATE: 4

© 2018 ADP, LLC

1 Wages, tips, other comp.

3	93117.48 Social security wages	31943.6 4 Social security tax withheld						
3	82673.54	6324.53						
5	Medicare wages and tips	6 Medicare tax withheld						
•	84001.97	2436.06						
d	Control number Dept.	Corp. Employer use only						
	0519 150							
С	Employer's name, address, and Gray, Moore and I 0905 Lori Way Port Linda WV	Robinson Group						
b	Employer's FED ID number 23-9890055	a Employee's SSA number 0						
7	Social security tips 82673.54	8 Allocated tips 84001.97						
9	Verification Code 0	10 Dependent care benefits 259						
11	Nonqualified plans 127	12a See instructions for box 12						
14	Other	R   7970 12b   994						
•		12c   961						
		12d   420						
		13 Stat emp. Ret. Plan 0 3rd party sick pay 0						
e/f	Robert Richmond 622 Singh Through Wilsonland NC 7	i way						
15	State Employers' state ID of 06-28-708	no. 16 State wages, tips, etc. 49289.18						
		18 Local wages, tips, etc.						
17	State income tax 2188.48	106445.0						
17 19								
	Local income tax 11590 . 89  Federal  Wag	20 Locality name Ruben Canyon Filling Copy te and Tax						
19	Local income tax 11590.89	20 Locality name Ruben Canyon Filling Copy te and Tax						

	93117.48					31943.6	
3	Social security wages		4 5	0 ' - 1 -			
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	Port Linda	WILL A	1469	39-79	277		
	rore minda		7400	,, ,.	,,,		
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e/f	Employees name, addre	155 and ZIF C					
e/f							
e/f	Robert R	ichmond					
e/f		ichmond	ay				
e/f	Robert R	ichmond Through		-711!	5		
e/f	Robert R	ichmond Through		-711!	5		
e/f	Robert R 622 Singh Wilsonland	ichmond Through		-711!	5		
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	Robert R 622 Singh Wilsonland	ichmond Throught NC 778	318-			ps, etc. 49289.18	
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15	Robert R 622 Singh Wilsonland 0 State Employ 06-28- State income tax 2188.48	ichmond Throught NC 778	318- 16	State t	wages, ti wages, t	49289.18 ips, etc.	
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d	Control number		Dept.	Corp	٥.			Employer use only	
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7	Social security t	ips		8	Alloca	ted tips			
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9	Verification Cod	е		10	Depe	ndent care	benefits 259	•	
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11	Nonqualified pla	ans		12a	See in	nstructions	s for box	12	
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14	Other			12b	R		7970 994		
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e/f	Employees nam	e, address	ana ZIP co	oae					
	Robert	: Ric	hmond						
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W	<b>I-2</b>		Stateme	ent			20	118	
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Cop	y 2 to be filed with	employee's	City or Loc	at In	come T	ax Keturn	OMB No	5. 1545-0008	