		Employe	e l	Ref	erenc	e		Сору		
			Wage		and	Tax				
۱۸	V-2		Statemen	it			2	2018		
•	V-Z							No. 1545-0008		
	y C for employ						OME			
	Control numl	ber	Dept. 150	Cor	p.		Α	Employer use	e only 36	
С			ess, and ZIP		•					
		_	iez Grou	_						
			Crescer							
	Marks	ton AK	11344	-9	611					
				_						
				Ва	atch		7	#02021		
e/f	Employees i	name, addr	ess and ZIP	code						
	Johnny	y Sny	der							
	60506	Kristi	in Lock	Su	ite	784				
	New Tr	raceyfu	irt RI	41	456-	6659				
	0	-								
b	Employer's	FED ID nun	nber	а	Emple	oyee's SS	A num	ber		
	26-91581			-		.,		-78-5521		
1	Wages, tips,	other com	n.	2	Feder	al income	tax w	ithheld		
	172089.9			Γ.				28.12		
3	Social secur	ity wages		4	Socia	I security	tax wi	thheld		
	155302.7			-				80.66		
_				_			41.11.			
5	Medicare wa 152081.7		os	ь	meaic	are tax w		1 0.37		
							***	0.37		
7	Social secur			8	Alloca	ited tips	152	081.76		
9	Verification 0			10	Depe	ndent car	e bene	efits		
11	Nonqualified 105	d plans		12a	See i	nstruction	s for b	oox 12		
					EE		866	4		
14	Other			12b			290			
				120			985			
				13 S		Ret. Plan	3rd pa	arty sick pay		
15	State	Employers	state ID no.	16	0 State	0 wages, t	ins. et	0 'C.		
	KS	750-41-8						81.15		
17	State incon	ne tax		18	Loca	il wages, t	tins. et	tc.		
	4176.75			•	_000			970.09		
19	Local incor	no tay		20	Loca	lity name				
""	31552.81			120	LUCA	y manile		n Trail		

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	240998.7	Social Security Tax Withheld	11880.66	KS.State Income Tax Box 17 of W-2	4176.75
Fed. Income	57028.12	Box 4 of W-2 Medicare Tax	4410.37	Local Income Tax Box 19 of W-2	31552.81
Tax Withheld Box 2 of W-2	57525.12	Withheld Box 6 of W-2	4410.07	SU/SD/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	Medicare	KS.State Wages,	John Trail
	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	240998.7	2E+05	240998.7	240998.7	240998.7
Plus GTL (C-Box 12)	8664	8664	8664	8664	8664
Less 401(k) (D-Box 2) Less Other Café 125	290 57028.12	N/A 57028.12	N/A 57028.12	290 57028.12	N/A 57028.12
Reported W-2 Wages	172089.92	172089.92	172089.92	172089.92	172089.92

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

Johnny Snyder 60506 Kristin Lock Suite 784 Markston AK 11344-9611 Social Security Number: 252-78-5
Taxable Marital Status: MARRIEI
Exemptions/sllowances:
FEDERAL: 4
STATE: 4

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1	Wages, tips, other	comp.	2	Federa	al income	tax withheld 57028.12	
3	Social security was	168	4	Social	security	tax withheld	
•	155302.71	100	1	ooolui	occurry,	11880.66	
5	Medicare wages an	d tins	6	Medic	are tax wi	thheld	
-	152081.76		-			4410.37	
d	Control number	Dept.	Corp).		Employer use only	
849	99181	150				Α :	36
С	Employer's name,	address, and ZIP	code				
	Cruz-Rodr	iguez Grou	ıp				
	008 Simmo	ns Crescer	it				
	Markston 0	AK 11344	-96	511			
b	Employer's FED ID	number	а	Emplo	voo's \$\$	A number	
-	26-9158107	namber .	"	Linpic	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0	
7	Social security tips		8	Alloca	ted tips		
	155302.71		1			152081.76	
9	Verification Code		10	Deper	ndent care	e benefits	
	0		1			127	
			l				
11	Nonqualified plans 105		12a	See in	struction	s for box 12	
	105		1	EE		8664	
14	Other		12b			290	
			12c		- 1	140	
			12d			985	
				at emp.		3rd party sick pay	
ρlf	Employees name, a	address and ZIP		0	0	0	
٠,,	Employees name,	addi coo dila Eli	Jouc				
	Johnny	Snyder					
	60506 Kri	stin Lock	Sui	+- '	784		
	New Trace	yrurt Ki	414	156-	0039		
15		yers' state ID no.	16	State	wages, ti		
	KS 50-41	-860	1			85181.15	
			18	Loca	l wages, t	ine otc	
17	State income tax			Loca		179970.09	
17	State income tax 4176.75		10			179970.09	
	4176.75						
17	4176.75 Local income tax		20	Loca	lity name		
	4176.75			Loca	lity name		
	4176.75 Local income tax	eral	20		lity name	John Trail	
	4176.75 Local income tax 31552.81		20 Fi	ling			
19	Local income tax 31552.81	Wage	20 Fi		Tax	John Trail Copy	
19	4176.75 Local income tax 31552.81		20 Fi	ling		John Trail	

1	Wages, tips, other comp		2 F		ıl incomo	tax withheld					
١.	172089.92	•	2 1	euer	ai income	57028.12					
3	Social security wages		4 5	4 Social security tax withheld							
155302.71				11880.66							
5					6 Medicare tax withheld						
	152081.76					4410.37					
d	Control number	Dept.	Corp.			Employer use o	nly				
	9181	150				A	36				
С	Employer's name, addre	ss, and ZIP of	ode								
	Cruz-Rodri	guez Gr	oup								
	008 Simmons Crescent										
	Markston Al										
	0	113									
	•										
b	Employer's FED ID numl	oer	a E	Emplo	yee's SS	A number					
	26-9158107					0					
_											
7	Social security tips 155302.71		8 /	Alloca	ted tips	152081.76					
	155302.71					152081.76					
9	Verification Code			10 Dependent care benefits							
	0					127					
11											
11	Nonqualified plans 105		12a	See ii	struction	is for box 12					
	105			EE		8664					
14	Other					290					
			12c			140					
			12d			985					
					Ret. Plan	3rd party sick pay					
e/f	Employees name, addre	ee and 7ID o		0	0	0					
6/1	Linployees name, addre	55 and 211 C	oue								
	Johnny Si	nyder									
	60506 Kris	-			704						
	New Tracey:	furt RI	41	456	-6659						
	0										
15	State Employe	rs' state ID no	16	State	wages, t	ins etc					
	KS 50-41-		1.	Otate	wages, t	85181.15					
17	State income tax		18	Loca	l wages, t						
	4176.75					179970.09					
19	Local income tax		20	Loca	litv name						
	31552.81					John Trail					
	KS.Sta	te	Fili	ing		Сору					
		Wage	ar	nd	Tax						
						0040					
W	1-2	Juicing				2018					
Con	v 2 to be filed with employe	s's State Inco	me Ta	x Reti	ım	OMB No. 1545-0008					
•	KS.Sta 1-2 y 2 to be filed with employe	Wage Stateme	ar ent			2018					

1	Wages, tips, oth 172089.9			2	Feder	al income	tax with 57028			
3	Social security v 155302.7			4 Social security tax withheld 11880.66						
5	Medicare wages 152081.7			6	6 Medicare tax withheld 4410.37					
d	Control number		Dept.	Con	p.			Employer use only	,	
849	9181		150				Α		36	
,	Employer's nam	e, address	, and ZIP o	ode						
	Cruz-F	lodrig	ez Gr	oup						
	008 Si	mmons	Cresce	ent						
	Markst 0	on AK	1134	44-	9611					
b	Employer's FED	ID numbe	r	а	Emplo	yee's SS.	A numb	er		
	26-91581						0			
7	Social security t	ins		8	Alloca	ted tips				
	155302.7						15208	1.76		
9	Verification Cod	9		10	Depe	ndent car		ts		
	0			1			127			
11	Nonqualified pla	ins		12a See instructions for box 12						
					EE		8664			
14	Other		12b			290				
							140			
					985					
				13 S	tat emp. 0	Ret. Plan 0	3rd part	y sick pay 0		
e/f	Employees nam			ode	U	U	1	0		
	-		ruer in Loci			704				
	New Tr	aceyf	ırt RI	4	1456	-6659				
15	State	Employers	state ID no	16	State	wages, t	ips. etc.			
	KS	50-41-86					85181			
_				<u>. </u>						
17	State income ta 4176.75	ıx		18	Loca	l wages, t	17997			
19	Local income to 31552.81			20	Loca	lity name		Trail		
	City or Local			Fi	iling		С	ору		
	0.	,	Wage		and	Tax	·	-17		
					iiid	ıdx				
W	<i>l</i> -2		Stateme	ent			20	018		
Con	y 2 to be filed with	employee's	City or Loc	al In	come T	ax Return	OMB N	No. 1545-0008		