



## 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                             | 149405.1 | Social Security Tax Withheld Box 4 of W-2 | 10506.28 | NC.State Income Tax Box 17 of W-2 | 2061.66  |
|                                       |          |   |          | Local Income Tax Box 19 of W-2    | 18999.44 |
| Fed. Income Tax Withheld Box 2 of W-2 | 25596.32 | Medicare Tax Withheld Box 6 of W-2        | 2832.58  | 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 Compensation Box 1 of W-2 | Social Secur Wages Box 3 of W-2 | Medicare Wages Box 5 of W-2 | NC.State Wages, Tips, Etc. Box 16 of W-2 | Henry Crossroad Local Wages, Tips, Etc. Box 18 of W2 |
| Gross Pay             | 149405.12                                    | 1E+05                           | 149405.1                    | 149405.1                                 | 149405.1   |
| Plus GTL (C-Box 12)   | 7214   | 7214                            | 7214                        | 7214                                     | 7214   |
| Less 401(k) (D-Box 2) | 927  | N/A                             | N/A                         | 927                                      | N/A  |
| Less Other Caf  125   | 25596.32                                     | 25596.32                        | 25596.32                    | 25596.32                                 | 25596.32   |
| Reported W-2 Wages    | 113302.52                                    | 113302.52                       | 113302.52                   | 113302.52                                | 113302.52  |

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

Lisa Reed  
42939 Ayers Forest  
Martinland KY 92477

Social Security Number: 279-66-4875  
Taxable Marital Status: MARRIED  
Exemptions/Allowances:  
FEDERAL: 4  
STATE: 4  
LOCAL:

  2018 ADP, LLC

|   |                                 |                        |                            |      |    |
|---|---------------------------------|------------------------|----------------------------|------|----|
| Employee Reference Copy   |                                 | Wage and Tax Statement |                            | 2018 |    |
| Copy C for employee's records. OMB No. 1545-0008                    |                                 |                        |                            |      |    |
| d Control number  | Dept.                           | Corp.                  | Employer use only          |      |    |
| 4299094   | 150                             |                        | A                          |      | 36 |
| c Employer's name, address, and ZIP code                            |                                 |                        |                            |      |    |
| Hester-Stevens Inc<br>061 Sabrina Trace<br>Martinland KY 92477-8111 |                                 |                        |                            |      |    |
| Batch #02021  |                                 |                        |                            |      |    |
| e/f Employees name, address and ZIP code                            |                                 |                        |                            |      |    |
| Lisa Reed<br>42939 Ayers Forest<br>East Kurtton IA 48666-6813       |                                 |                        |                            |      |    |
| b Employer's FED ID number  | a Employee's SSA number         |                        |                            |      |    |
| 98-3178746  | 279-66-4875                     |                        |                            |      |    |
| 1 Wages, tips, other comp.  | 2 Federal income tax withheld   |                        |                            |      |    |
| 113302.52   | 25596.32                        |                        |                            |      |    |
| 3 Social security wages   | 4 Social security tax withheld  |                        |                            |      |    |
| 137337.0  | 10506.28                        |                        |                            |      |    |
| 5 Medicare wages and tips   | 6 Medicare tax withheld         |                        |                            |      |    |
| 97675.33  | 2832.58                         |                        |                            |      |    |
| 7 Social security tips  | 8 Allocated tips                |                        |                            |      |    |
| 137337.0  | 97675.33                        |                        |                            |      |    |
| 9 Verification Code   | 10 Dependent care benefits      |                        |                            |      |    |
| 0   | 137                             |                        |                            |      |    |
| 11 Nonqualified plans   | 12a See instructions for box 12 |                        |                            |      |    |
| 231   | J I 7214                        |                        |                            |      |    |
| 14 Other  | 12b I 927                       |                        |                            |      |    |
|   | 12c I 274                       |                        |                            |      |    |
|   | 12d I 398                       |                        |                            |      |    |
|   | 13 Stat emp.                    | Ret. Plan              | 3rd party sick pay         |      |    |
|   | 0                               | x                      | 0                          |      |    |
| 15 State  | Employers' state ID no.         |                        | 16 State wages, tips, etc. |      |    |
| NC  | 031-15-773                      |                        | 55633.26                   |      |    |
| 17 State income tax   | 18 Local wages, tips, etc.      |                        |                            |      |    |
| 2061.66   | 127203.76                       |                        |                            |      |    |
| 19 Local income tax   | 20 Locality name                |                        |                            |      |    |
| 18999.44  | Henry Crossroad                 |                        |                            |      |    |

|  |                                 |                        |                            |    |
|--|---------------------------------|------------------------|----------------------------|----|
| 1 Wages, tips, other comp.   | 2 Federal income tax withheld   |                        |                            |    |
| 113302.52  | 25596.32                        |                        |                            |    |
| 3 Social security wages  | 4 Social security tax withheld  |                        |                            |    |
| 137337.0   | 10506.28                        |                        |                            |    |
| 5 Medicare wages and tips  | 6 Medicare tax withheld         |                        |                            |    |
| 97675.33   | 2832.58                         |                        |                            |    |
| d Control number   | Dept.                           | Corp.                  | Employer use only          |    |
| 4299094  | 150                             |                        | A                          | 36 |
| c Employer's name, address, and ZIP code                                       |                                 |                        |                            |    |
| Hester-Stevens Inc<br>061 Sabrina Trace<br>Martinland KY 92477-8111            |                                 |                        |                            |    |
| b Employer's FED ID number   | a Employee's SSA number         |                        |                            |    |
| 98-3178746   | 0                               |                        |                            |    |
| 7 Social security tips   | 8 Allocated tips                |                        |                            |    |
| 137337.0   | 97675.33                        |                        |                            |    |
| 9 Verification Code  | 10 Dependent care benefits      |                        |                            |    |
| 0  | 137                             |                        |                            |    |
| 11 Nonqualified plans  | 12a See instructions for box 12 |                        |                            |    |
| 231  | J I 7214                        |                        |                            |    |
| 14 Other   | 12b I 927                       |                        |                            |    |
|  | 12c I 274                       |                        |                            |    |
|  | 12d I 398                       |                        |                            |    |
|  | 13 Stat emp.                    | Ret. Plan              | 3rd party sick pay         |    |
|  | 0                               | x                      | 0                          |    |
| e/f Employees name, address and ZIP code                                       |                                 |                        |                            |    |
| Lisa Reed<br>42939 Ayers Forest<br>East Kurtton IA 48666-6813                  |                                 |                        |                            |    |
| 15 State   | Employers' state ID no.         |                        | 16 State wages, tips, etc. |    |
| NC   | 31-15-773                       |                        | 55633.26                   |    |
| 17 State income tax  | 18 Local wages, tips, etc.      |                        |                            |    |
| 2061.66  | 127203.76                       |                        |                            |    |
| 19 Local income tax  | 20 Locality name                |                        |                            |    |
| 18999.44   | Henry Crossroad                 |                        |                            |    |
| Federal  |                                 | Filing                 | Copy                       |    |
| Wage and Tax Statement   |                                 | Wage and Tax Statement |                            |    |
| 2018   |                                 | 2018                   |                            |    |
| Copy B to be filed with employee's Federal Income Tax Return OMB No. 1545-0008 |                                 |                        |                            |    |

|  |                                 |                        |                            |    |
|--|---------------------------------|------------------------|----------------------------|----|
| 1 Wages, tips, other comp.   | 2 Federal income tax withheld   |                        |                            |    |
| 113302.52  | 25596.32                        |                        |                            |    |
| 3 Social security wages  | 4 Social security tax withheld  |                        |                            |    |
| 137337.0   | 10506.28                        |                        |                            |    |
| 5 Medicare wages and tips  | 6 Medicare tax withheld         |                        |                            |    |
| 97675.33   | 2832.58                         |                        |                            |    |
| d Control number   | Dept.                           | Corp.                  | Employer use only          |    |
| 4299094  | 150                             |                        | A                          | 36 |
| c Employer's name, address, and ZIP code                                     |                                 |                        |                            |    |
| Hester-Stevens Inc<br>061 Sabrina Trace<br>Martinland KY 92477-8111          |                                 |                        |                            |    |
| b Employer's FED ID number   | a Employee's SSA number         |                        |                            |    |
| 98-3178746   | 0                               |                        |                            |    |
| 7 Social security tips   | 8 Allocated tips                |                        |                            |    |
| 137337.0   | 97675.33                        |                        |                            |    |
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| 11 Nonqualified plans  | 12a See instructions for box 12 |                        |                            |    |
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|  | 12c I 274                       |                        |                            |    |
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|  | 0                               | x                      | 0                          |    |
| e/f Employees name, address and ZIP code                                     |                                 |                        |                            |    |
| Lisa Reed<br>42939 Ayers Forest<br>East Kurtton IA 48666-6813                |                                 |                        |                            |    |
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| NC   | 31-15-773                       |                        | 55633.26                   |    |
| 17 State income tax  | 18 Local wages, tips, etc.      |                        |                            |    |
| 2061.66  | 127203.76                       |                        |                            |    |
| 19 Local income tax  | 20 Locality name                |                        |                            |    |
| 18999.44   | Henry Crossroad                 |                        |                            |    |
| NC.State   |                                 | Filing                 | Copy                       |    |
| Wage and Tax Statement   |                                 | Wage and Tax Statement |                            |    |
| 2018   |                                 | 2018                   |                            |    |
| Copy 2 to be filed with employee's State Income Tax Return OMB No. 1545-0008 |                                 |                        |                            |    |

|  |                                 |                        |                            |    |
|--|---------------------------------|------------------------|----------------------------|----|
| 1 Wages, tips, other comp.   | 2 Federal income tax withheld   |                        |                            |    |
| 113302.52  | 25596.32                        |                        |                            |    |
| 3 Social security wages  | 4 Social security tax withheld  |                        |                            |    |
| 137337.0   | 10506.28                        |                        |                            |    |
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| Hester-Stevens Inc<br>061 Sabrina Trace<br>Martinland KY 92477-8111                  |                                 |                        |                            |    |
| b Employer's FED ID number   | a Employee's SSA number         |                        |                            |    |
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| 7 Social security tips   | 8 Allocated tips                |                        |                            |    |
| 137337.0   | 97675.33                        |                        |                            |    |
| 9 Verification Code  | 10 Dependent care benefits      |                        |                            |    |
| 0  | 137                             |                        |                            |    |
| 11 Nonqualified plans  | 12a See instructions for box 12 |                        |                            |    |
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| e/f Employees name, address and ZIP code   |                                 |                        |                            |    |
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| 17 State income tax  | 18 Local wages, tips, etc.      |                        |                            |    |
| 2061.66  | 127203.76                       |                        |                            |    |
| 19 Local income tax  | 20 Locality name                |                        |                            |    |
| 18999.44   | Henry Crossroad                 |                        |                            |    |
| City or Local  |                                 | Filing                 | Copy                       |    |
| Wage and Tax Statement   |                                 | Wage and Tax Statement |                            |    |
| 2018   |                                 | 2018                   |                            |    |
| Copy 2 to be filed with employee's City or Local Income Tax Return OMB No. 1545-0008 |                                 |                        |                            |    |