		Employe	е	Refe	erenc	e	Сору		
			Wage	a	ind	Tax			
١.			Statemen				0040		
V	V-2						2018	i	
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d	Control numl		Dept.	Con)		Employ	er use only	
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e/f	Employees i	name, addr	ess and ZIP	code					
	Christ	tonhon	Cimmon	_					
		_	Simmon:	5					
			auseway						
		Gary 1	ID 601	83-2	2427				
	0								
b	Employer's	FED ID nun	nber	а	Emplo	yee's SS	A number		
	99-62407	752				-	477-40-7564	ı	
1	Wages, tips,	-41			F	-1 !	tax withheld		
1	47299.27		p.	2	reaer	ai income	15521.25		
3	Social secur 50393.31			4	Socia	security	tax withheld 3855.09		
	50393.31	L					3855.09		
5	Medicare wa	nos and tir	ne .	6	Medic	are tax wi	thheld		
ľ	38657.86		,,	ľ	····caic	uic tux wi	1121.08		
7	Social secur			8	Alloca	ted tips			
	50393.31	L					38657.86		
9	Verification (Code		10	Depe	ndent car	e benefits		
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11	Nonqualifie	d mlana		120	Can i		s for box 12		
"	261	u pians		124	See II	istruction	S IOI DOX 12		
					J		4173		
14	Other			12b			743		
	i		12c			731 639			
	1					Ret. Plan	3rd party sick pay		
					0	×	0		
15	State		state ID no.	16	State	wages, t			
1	MO	725-41-4	163				22801.98		
17	State incon	ne tax		18	Loca	l wages, t	ips, etc.		
Ĭ	2082.65					3,	59494.1		
-	1 12					P4			
19	Local incor	ne tax		20	Loca	lity name	Miller Esta	te	

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	66675.61	Social Security Tax Withheld	3855.09	MO.State Income Tax Box 17 of W-2	2082.65
		Box 4 of W-2		Local Income Tax Box 19 of W-2	5224.07
Fed. Income	15521.25	Medicare Tax	1121.08		
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	Medicare	MO.State Wages,	Miller Estate	
	Compensation Box 1 of W-2	Wages Box 3 of W-2	Wages Box 5 of W-2	Tips, Etc. Box 16 of W-2	Local Wages, Tips, Etc. Box 18 of W2	
Gross Pay	66675.61	66676	66675.61	66675.61	66675.61	
Plus GTL (C-Box 12)	4173	4173	4173	4173	4173	
Less 401(k) (D-Box 2) Less Other Café 125	743 15521.25	N/A 15521.25	N/A 15521.25	743 15521.25	N/A 15521.25	
Reported W-2 Wages	47299.27	47299.27	47299.27	47299.27	47299.27	

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

Christopher Simmons 137 Arias Causeway Stephanieborough MI 8248 Social Security Number: 477-40-7:
Taxable Marital Status: MARRIET
Exemptions/Allowances:
FEDERAL: 4
STATE: 4

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1	Wages, tips, other 47299.27	comp.	2	Feder	al income	tax withheld 15521.25			
3	Social security was	nes	4	Social	Security				
-	50393.31		4 Social security tax withheld 3855.09 6 Medicare tax withheld 1121.08 Corp. A Employer use only A 36 d Olson Inc MI 82487-3031 a Employee's SSA number 0 8 Allocated tips 38657.86 10 Dependent care benefits 228 12a See instructions for box 12						
5	Medicare wages ar	nd tins	6	Medic	are tax w	ithheld			
-	38657.86		1	1121.08					
d	Control number	Dept.	Com	,		Employer use only			
	30651	150	Our						
С	Employer's name,	address, and ZIP	code						
	Johnson.	Duran and	01s	on	Inc				
	46330 Gra								
	Stephanie	borough MI	82	487	-3031				
	0								
_									
b	Employer's FED ID 99-6240752	number	а	Emplo	oyee's SS				
	99-6240752		1			U			
7	Social security tips	3	8	Alloca	ted tips				
	50393.31		1		-	38657.86			
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9	Verification Code		10	Depe	naent car				
	U		1			220			
11	Nonqualified plans	Nonqualified plans		12a See instructions for box 12					
	261								
	0.1		401	J					
14	Other								
				at emp.					
e/f	Employees name,	address and ZIP	code						
	Christoph	er Simmons	•						
	137 Arias	Causeway							
	North Gar	y ID 6018	3-2	427					
	0	•							
15		yers' state ID no.	16	State	wages, t				
13	MO 25-4:	1-463	1			22801.98			
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17	State income tax		18	Loca	l wages. 1	tins, etc.			
	State income tax 2082.65		18	Loca	l wages,				
	2082.65			Loca	l wages, t				
17	2082.65 Local income tax					59494.1			
	2082.65					59494.1			
17	2082.65 Local income tax 5224.07	orol	20	Loca		59494.1 Miller Estate			
17	2082.65 Local income tax		20 Fi	Loca	lity name	59494.1			
17	2082.65 Local income tax 5224.07	Wage	20 Fil	Loca		59494.1 Miller Estate			
17	Local income tax 5224.07		20 Fil	Loca	lity name	Miller Estate Copy			
17 19	2082.65 Local income tax 5224.07 Fed	Wage Stateme	20 Fil a	Loca ling nd	lity name	59494.1 Miller Estate			

1	Wages, tips, other comp. 47299.27			2 Federal income tax withheld 15521.25							
3 Social security wages			4 Social security tax withheld								
	50393.31			3855.09							
5	Medicare wages and tips			6 Med	6 Medicare tax withheld						
	38657.86	i			1121.08						
d	Control number		Dept.	Corp.	1	Employer use only					
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С	Employer's nam	e, address	, and ZIP c	ode							
	Johnson, Duran and Olson Inc										
	46330 Grant Locks										
	Stepha 0	niebo	rough N	4I 824	87-303	1					
b	Employer's FED	ID numbe	r	a Emp	loyee's SS/	A number					
	99-62407	52				0					
7	Social security tips 50393.31			8 Allo	ated tips						
						38657.86					
9	Verification Cod	0		10 Don	endent care	honofits					
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11	Nonqualified plans 261		12a See instructions for box 12								
				J		4173					
14	Other			12b		743					
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e/I	Employees nam	e, auuress	anu zir co	oue							
	Christ	onhon	e: mmor								
	Christopher Simmons										
	137 Aı	rias C	auseway	7							
	North	Gary :	ID 601	83-24	27						
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15	State		state ID no	16 Sta	te wages, ti						
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17	State income to	ax		18 Loc	al wages, t						
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17 19	State income to 2082 . 65 Local income to 5224 . 07	ax MO.Stat	Wage Stateme	Filing and ent	Tax	59494.1 Miller Estate					

1	Wages, tips, other comp. 47299.27			2 Federal income tax withheld 15521.25						
3	Social security wages 50393.31			4 Social security tax withheld 3855.09						
5	Medicare wages 38657.86	and tips	6 Medicare tax withheld 1121.08							
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		e, address, and ZIP of	ode					30		
٠		n, Duran and		Lson	Inc					
	46330	Grant Locks								
	Stephanieborough MI 82487-3031									
b	Employer's FED	ID number	a E	Emplo	yee's SS/	numb	er			
	99-62407		٠.	p.io	,	0				
						-				
7	Social security t	ps	8 /	Allocat	ed tips					
	50393.31					38657	1.86			
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9	Verification Code 0			10 Dependent care benefits 228						
11	Nonqualified plans		12a See instructions for box 12							
	261									
				J	- 1	4173				
14	Other		12b 743							
			12c 731							
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			13 Sta	at emp.		3rd par	ty sick pay			
e/f	Empleyees nem	e. address and ZIP c		U	x		0			
e/i	Employees nam	e, address and zir c	oue							
	Christ	opher Simmon								
		-								
	137 Ar	ias Causeway	7							
	North	Gary ID 603	183-	-242	7					
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	-									
15	State	Employers' state ID no	16	State	wages, t	ps, etc.				
	MO	25-41-463				22801	98			
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17	State income to 2082.65	IX .	18	Local	wages, t	59494				
	2082.65					59494	1.1			
19	Local income to	nx .	20	Local	ity name					
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	Ci	ty or Local	Fill	ing		С	ору			
		Wage		nd	Tax					
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	<i>I</i> -2	Stateme				_	018			
Copy	v 2 to be filed with	employee's City or Loc	al Inc	ome Ta	ax Return	OMB I	No. 1545-0008			