								_		
	ŀ	Employe	e I	Ref	erenc	e		Сору		
1			Wage		and	Tax				
١,	V-2		Statemen	t				2018		
V	V-Z						_			
Cop	y C for employ	ee's records	3.				OME	3 No. 1545-0008		
d	Control numl	ber	Dept.	Cor	rp.	only				
112	4183		150				Α		36	6
С	Empleyerie		ess, and ZIP							
L.		right I		Coue	В					
		-								
			n Plain							
Scottland TN 2709				92	-831	1				
	0									
				В	atch			#02021		
e/f	Employees i	name, addr	ess and ZIP	code						
	Stanle	ey I	Robles							
	744 Aı	ndrew S	Shoals S	ui	te 5	99				
	Garner	rmouth	OH 3	97	47-0	716				
	0									
b	Employer's I		nber	а	Emplo	yee's SS		nber -88-9022		
	01-04043	,,,					336	-00-9022		
1	Wages, tips,		p.	2	Feder	al income				
	203237.9	92					627	43.48		
3	Social secur	itv wages		4	Social	security	tax wi	ithheld		
	250496.2							62.96		
_				-						
5	Medicare wa		os	6	Medic	are tax w				
	181304.6	54					525	7.83		
7	Social secur	ity tips		8	Alloca	ted tips				
	250496.2	25					181	304.64		
9	Verification (	Cada		10	Dana	ndent car		ofito		
9	verification (	Code		10	Depe	nuent car	154			
11	Nonqualified 178	d plans		12a	See i	nstruction	s for I	box 12		
	178				EE		104	3		
14	Other			12t			903			
				120			984			
				120		Ret. Plan	251	arty sick pay		
				13 8	x emp.	0	ara po	any sick pay		
15	State		state ID no.	16	State	wages, t				
	CA	333-14-3	362				110	970.83		
17	State incon	ne tax		18	Loca	l wages, 1	ins. e	tc.		
	5730.55		1				357.14			
<u> </u>				L.						
19	Local incor	ne tax		20	Loca	lity name	Ba-	bana Bidar -		

## 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 285144.4   Social Security 19162.96   C.A. State Income Tax 5730.55     Tax Withheld						
Box 19 of W-2  Fed. Income 62743.48 Medicare Tax 5257.83  Tax Withheld SUWSDWFLI	Gross Pay			19162.96		5730.55
Fed. Income         62743.48         Medicare Tax         5257.83           Tax Withheld         Withheld         SUVSDVFLI			Box 4 of W-2		Local Income Tax	32380.84
Tax Withheld Withheld SUVSDVFLI					Box 19 of W-2	
	Fed. Income	62743.48	Medicare Tax	5257.83		
Box 2 of W-2 Box 6 of W-2 Box 14 of W-2	Tax Withheld		Withheld		SUI/SDI/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 Secu	r Medicare	CA.State Wages,	Barbara Ridges
	Compensation Box 1 of W-2	Wages	Wages 2 Box 5 of W-2	Tips, Etc. Box 16 of W-2	Local Wages, Tips, Etc.
	BOX 1 OI W-2	BOX 3 OI W-	2 BOX 5 OI W-2	BOX 16 OI W-2	Box 18 of W2
Gross Pay	285144.36	3E+05	285144.4	285144.4	285144.4
Plus GTL (C-Box 12)	1043	1043	1043	1043	1043
Less 401(k) (D-Box 2) Less Other Café 125	903 62743.48	N/A 62743.48	N/A 62743.48	903 62743.48	N/A 62743.48
Reported W-2 Wages	203237.92	203237.92	203237.92	203237.92	203237.92

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

Stanley Robles
744 Andrew Shoals Suite 599
Scottland TN 27092-83

Social Security Number: 336-88-90
Taxable Marrial Status: MARRIED
Exemptions/Allowances:
FEDERAL: 4
STATE: 4

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	Wages, tips, other con 203237.92	2 Federal income tax withheld 62743.48					
3	Social security wages		4 Social security tax withheld				
	250496.25			-	19162.96		
5 Medicare wages and tips		6 Medio	are tax wi	thheld			
	181304.64				5257.83		
d	Control number	Dept.	Corp.		Employer use only		
112	24183	150			A	36	
С	Employer's name, add	PLC	code				
	80985 Gordo Scottland T		92-831	1			
b	Employer's FED ID nu 01-0464391	nber	a Empl	oyee's SS/	A number 0		
7	Social security tips 250496.25		8 Alloca	ited tips	181304.64		
9	Verification Code		10 Depe	ndent care	e benefits		
	0				154		
11	Nonqualified plans		12a See instructions for box 12				
			EE	- 1	1043		
14	Other		12b		903		
			12c   984				
			12d		251		
			13 Stat emp	Ret. Plan 0	3rd party sick pay 0		
e/f	Stanley 744 Andrew Garnermouth	Robles Shoals S					
15		s' state ID no.	16 State	wages, ti			
15	State Employers		16 State	wages, ti	ips, etc. 110970.83		
15 17				e wages, ti	110970.83		
17	CA 33-14-3 State income tax 5730.55		18 Loca	nl wages, t	110970.83 ips, etc. 181357.14		
17	CA 33-14-3		18 Loca		110970.83 ips, etc. 181357.14		
17	CA 33-14-3 State income tax 5730.55	62	18 Loca	nl wages, t	110970.83 ips, etc. 181357.14 Barbara Ridges		
17	CA 33-14-3  State income tax 5730 . 55  Local income tax 32380 . 84	62	18 Loca 20 Loca	nl wages, t	110970.83 ips, etc. 181357.14		
17	CA 33-14-3  State income tax 5730 . 55  Local income tax 32380 . 84	62 I	18 Loca 20 Loca Filing and	al wages, t	110970.83 ips, etc. 181357.14 Barbara Ridges		

250496.25   Medicare pages and tips   Substitute   Subs	1 Wages, tips, other comp. 203237.92		2	2 Federal income tax withheld 62743.48					
181304.64   5257.83   Comp.   Employer use only   36   Comp.   Comp.				4					
181304.64   5257.83   Comp.   Employer use only   36   Comp.   Comp.	5				6	Modic			
1124189	ľ				ľ	moulo	uic tux II		
1124189		0		D	0			Foodonia	
Employer's name, address, and ZP code   Lee-Wright PLC					Corp	).			26
Lee-Wright PLC								Α	30
80985 Gordon Plain   27092-8311	C		.,	,	oue				
Employer's FED ID number									
Employer's FED ID number		Scott1	land Th	ı 2.	709	2-83	11		
O1-0464391   0									
O1-0464391   0									
	b	Employer's FED	ID numbe	r	a	Emplo	yee's SS	A number	
250496.25   18.1304.64     9 Verification Code		01-04643	391					0	
250496.25   18.1304.64     9 Verification Code									
9 Verification Code 0 10 Dependent care benefits 154 11 Nonqualified plans 178  EE   1043  EE   1043  14 Other   128 See instructions for box 12	7				8	Alloca	ted tips		
154   100   154   100		250496.2	25					181304.64	
154   100   154   100		Varification Cod	lo.		10	Dono	ndont car	n hanafite	
11   Nonqualified plans   12a   See instructions for box 12     EE     1043     12b     903     12c     903     12c     903     12d     251     12d     251     13 stater mp. Ret. Plan	9		ie		10	Debe	nuent car		
178     EE		٠						-54	
EE	11	Nonqualified pla	ans		12a	See in	nstruction	ns for box 12	
12b		178							
12c						EE			
12d   231	14	Other							
13 State mmp.   Rest. Plan									
### O									
Stanley Robles   744 Andrew Shoals Suite 599     Garnermouth OH   39747-0716     0     15   State					13 51				
744 Andrew Shoals Suite 599  Garnermouth OH 39747-0716  0  15 State CA   Employers' state ID not 16   State wages, tips, etc. 110970.83  17 State income tax 5730.5x   18 Local wages, tips, etc. 11037.14  19 Local income tax 32380.84   20 Locality name Barbara Ridges  CA.State Filing Copy Wage and Tax  W-2   Statement   2018	e/f	Employees nam	ne. address	and ZIP or	ode				
744 Andrew Shoals Suite 599  Garnermouth OH 39747-0716  0  15 State CA   Employers' state ID not 16   State wages, tips, etc. 110970.83  17 State income tax 5730.5x   18 Local wages, tips, etc. 11037.14  19 Local income tax 32380.84   20 Locality name Barbara Ridges  CA.State Filing Copy Wage and Tax  W-2   Statement   2018									
Garnermouth OH 39747-0716   0   15   State   Ca		Stanle	ey I	Robles					
15   State   Carlo   State   Doe   16   State wages, tips, etc.		744 Ar	ndrew S	Shoals	Su	ite	599		
15   State   Carlo   State   Doe   16   State wages, tips, etc.		Garner	rmouth	OH	39	747-	0716		
CA   33-14-362   110970.83									
CA   33-14-362   110970.83									
17   State income tax   18   Local wages, tips, etc.   181357.14	15				16	State	wages, 1		
5730.55 181357.14  19 Local income tax		CA	33-14-36	12				110970.83	
5730.55 181357.14  19 Local income tax	17	State income 4	27		10	Loca	l wages	tine atc	
19 Local income tax 32380.84 20 Locality name Barbara Ridges  CA.State Filing Copy Wage and Tax  W-2 Statement 2018	l''		a.		10	Loca	wayes,		
CA.State Filing Copy Wage and Tax W-2 Statement 2018		2730.33							
CA.State Filing Copy Wage and Tax W-2 Statement 2018	19				20	Loca	lity name		
W-2 Wage and Tax Statement 2018		32380.84	1					Barbara Ridges	
W-2 Wage and Tax Statement 2018			CA State	2	Fi	lina		Conv	
W-2 Statement 2018			Or t. Olait	-			Tov	ООРУ	
VV-Z 2018					IIIU	ıax			
Copy 2 to be filed with employee's State Income Tax Return OMB No. 1545-0008	W	<i>l</i> -2		Stateme	ent			2018	
	Сор	Copy 2 to be filed with employee's State Income Tax Return OMB No. 1545-0008							

1	Wages, tips, oth 203237.9		Pederal income tax					
3			62743.48					
3	Social security v 250496.2		4 Social security tax withheld 19162.96					
5	Medicare wages		Medicare tax withh					
,	181304.6			257.83				
d	Control number	Dept.	Corp.	Employer use only				
	4183	150	A A	36				
С		e, address, and ZIP						
	T.ee-W1	right PLC						
		Gordon Plai						
		land TN 2	092-8311					
	0							
b	Employer's FED	ID number	Employee's SSA nu	ımher				
_	01-04643		0					
7	Social security t		Allocated tips					
	250496.2	!5	18	31304.64				
9	Verification Cod	e	0 Dependent care be	enefits				
	0		15					
11	Nonqualified pla 178	ans	12a See instructions for box 12					
	1/8		EE   10	143				
14	Other		2b   90					
			2c   98					
			2d   25					
			3 Stat emp. Ret. Plan 3rd					
ο/f	Employees nam	e. address and ZIP of	x 0	0				
٠,	Employees nam	ic, dddi coo and En						
	Stanle	y Robles						
	744 Ar	drew Shoals	Suite 599					
			39747-0716					
		mouth On	39/4/-0/16					
	0							
15	State	Employers' state ID n	6 State wages, tips,	etc.				
	CA	33-14-362	11	10970.83				
17			8 Local wages, tips.	-4-				
17	State income to 5730.55	ax		, etc. 31357.14				
	3730.33		10	31357.14				
19	Local income t		0 Locality name					
	32380.84		Ba	arbara Ridges				
$\vdash$	0:	trantanal	Filian	Cenu				
	CI		Filing	Сору				
		Wage	and Tax					
1/	W-2 Statement 2018							
	Copy 2 to be filed with employee's City or Local Income Tax Return OMB No. 1545-0008							
Cop	y 2 to be filed with	employee's City or Lo	Income Tax Return Ol	MB No. 1545-0008				