		Employe	e f	Ref	erenc	e		Сору		
			Wage		and	Tax				
١.	V-2		Statemen	t				0040		
V	V-Z						4	2018		
Con	y C for employ	ee's records	i.				OM	B No. 1545-00	800	
d	Control num		Dept.	Cor	D.			Employer	use only	
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ı	054 L	ane Vis	sta Apt.	0.	56					
	Alexa	nderla	nd IL	- 2	2280	6-8430	0			
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				ъ.	atch			#02021		
				ь	atti		,	#02021		
e/f	Employees	name, addr	ess and ZIP of	ode						
	Emily	Har	nilton							
ı	_	Carter								
ı										
ı	New So		AL 0590	6-	9768					
	0									
b	Employer's		nber	а	Emplo	oyee's SS				
	50-49593	379					487	-42-2012		
1	Wages, tips,	other com	n	2	Endor	al income	tav u	rithhold		
ı.	103147.		μ.	-	i edei	ai ilicollie		55.66		
_										
3	Social secur 95421.8			4	Socia	I security		ithheld 9.77		
ı	95421.0						123	9.77		
5	Medicare wa	ages and tir	ns	6	Medic	are tax wi	ithhele	d		
ľ	108372.8			1				2.81		
7	Social secur			8	Alloca	ited tips				
	95421.8	5					108	372.8		
9	Verification	Code		10	Depe	ndent car	e ben	efits		
	0						185			
11	Nonqualifie	d mlana		124	. Can i	nstruction		hau 12		
	116	u pians		120	i see ii	i i sti uction	15 101	DOX 12		
					W		914	8		
14	Other			12t			875			
				12c			936			
						Ret. Plan		arty sick pay		
					0	0		0		
15	State		state ID no.	16	State	e wages, t				
	MT	476-26-3	887				497	56.68		
17	State incon	ne tax		18	Loca	ıl wages, t	tips, e	tc.		
	3948.79			1				353.15		
_	Leadle					Pt				
19	Local income tax			20	Loca	lity name				

## 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	137303.1	Social Security	7299.77	MT.State Income Tax	3948.79	
		Tax Withheld		Box 17 of W-2		
		Box 4 of W-2		Local Income Tax	15855.9	
				Box 19 of W-2		
Fed. Income	26855.66	Medicare Tax	3142.81			
Tax Withheld		Withheld		SUVSDVFLI		
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 Secur	r Medicare	MT.State Wages,	Robert Fords
	Compensation Box 1 of W-2	Wages Box 3 of W-2	Wages 2 Box 5 of W-2	Tips, Etc. Box 16 of W-2	Local Wages, Tips, Etc. Box 18 of W2
Gross Pay	137303.12	1E+05	137303.1	137303.1	137303.1
Plus GTL (C-Box 12)	9148	9148	9148	9148	9148
Less 401(k) (D-Box 2) Less Other Café 125 Reported W-2 Wages	875 26855.66 103147.69	N/A 26855.66 103147.69	N/A 26855.66 103147.69	875 26855.66 103147.69	N/A 26855.66 103147.69

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

Social Security Number:	487-42-2
Taxable Marital Status:	MARRIE
Exemptions/Allowances:	
FEDERAL: 4	
STATE: 4	
LOCAL:	
	Taxable Marital Status:  Exemptions/Allowances:  FEDERAL: 4  STATE: 4

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	108372.8				3142.81		
d ass	Control number	Dept. 150	Corp.		Employer use onl A	y 36	
C .	Employer's name, add		code		^	30	
•	Davis-Dougla						
	-						
	054 Lane Vi	_					
	Alexanderla	nd IL	2280	6-8430	)		
	0						
			,				
b	Employer's FED ID nur	nber	a Emple	oyee's SSA			
	50-4959379				0		
7	Social security tips		8 Alloca	ted tips			
•	95421.85		7.11000	ilea lipo	108372.8		
9	Verification Code		10 Depe	ndent care			
	0				185		
11	Nonqualified plans		12a See i	nstruction	s for box 12		
•	116		12a See instructions for box 12				
			W		9148		
14	Other		12b		875		
			12c 12d		936		
				Pat Plan	3rd party sick pay		
			0	0	0		
e/f	Employees name, addr	ess and ZIP of	ode	•			
	Emily Har	milton					
	5998 Carter	Plaza					
		AT. 0590	6-9768				
	New Scott	AL 0590	6-9768				
		AL 0590	6-9768				
15	New Scott 20	' state ID no.		wages, ti			
15	New Scott 2	' state ID no.			ips, etc. 49756.68		
	New Scott 10 0 State Employers MT 76-26-36	' state ID no.	16 State	e wages, ti	49756.68		
	New Scott 10  State Employers 76-26-38  State income tax	' state ID no.	16 State		49756.68 ips, etc.		
	New Scott 10 0 State Employers MT 76-26-36	' state ID no.	16 State	e wages, ti	49756.68		
17	New Scott 10  State Employers 76-26-38  State income tax 3948.79  Local income tax	' state ID no.	16 State	e wages, ti	49756.68 ips, etc. 127353.15		
17	New Scott in the second of the	' state ID no.	16 State	e wages, ti	49756.68 ips, etc.		
	New Scott   1	r' state ID no.	16 State 18 Loca 20 Loca	e wages, ti	49756.68 ips, etc. 127353.15 Robert Fords		
15	New Scott 10  State Employers 76-26-38  State income tax 3948.79  Local income tax	state ID no.	16 State 18 Loca 20 Loca Filling	e wages, ti al wages, ti ality name	49756.68 ips, etc. 127353.15		
17	New Scott   1	r' state ID no.	16 State 18 Loca 20 Loca	e wages, ti	49756.68 ips, etc. 127353.15 Robert Fords		
17	New Scott   1	state ID no.	16 State 18 Loca 20 Loca Filing and	e wages, ti al wages, ti ality name	49756.68 ips, etc. 127353.15 Robert Fords		

1	Wages, tips, other comp. 103147.69		2	Feder	al income	tax withheld 26855.66			
3			4						
	95421.85			7299.77					
5	Medicare wages and tips 108372.8		6	Medic	are tax w	ithheld 3142.81			
		D	0						
d 250	Control number	Dept. 150	Corp	).		Employer use only  A	36		
c	Employer's name, address		ode	_					
	Davis-Dougl	as and	So	ns					
	054 Lane Vi	sta Api	t. 1	. 056					
	Alexanderla	nd IL		228	06-84	30			
	0								
b	Employer's FED ID number	· ·	а	Emple	woo'e \$\$	A number			
	50-4959379	21	a	Lilipic	yee a oo	0			
7	Social security tips 95421.85		8	Alloca	ted tips	108372.8			
	95421.05					100372.0			
9	Verification Code		10	Depe	ndent car	e benefits			
	0					185			
11	Nonqualified plans		12a	See in	struction	ns for box 12			
	116								
14	Other		12b	W		9148   875			
			12c			403			
			12d			936			
			13 St	at emp.	Ret. Plan 0	3rd party sick pay 0			
e/f	Employees name, address	and ZIP co	ode						
	Emily Har	milton							
	5998 Carter								
	New Scott			076					
	New Scott A	ML 05:	906	-9/6					
	•								
15	State Employers MT 76-26-31	s' state ID no	16	State	wages, 1	tips, etc. 49756.68			
	MT 1/6-26-3	3 /				49/50.00			
17	State income tax		18 Local wages, tips, etc.						
	3948.79					127353.15			
19	Local income tax		20	Loca	lity name				
	15855.9					Robert Fords			
$\vdash$	MT.Stat	e	Fi	ling		Сору			
	Wage								
	Ctotomo				Tux	0040			
W	V-2	Ciatonic				2018			
Сор	y 2 to be filed with employee's	s State Inco	me Ta	ax Retu	ım	OMB No. 1545-0008			

1 Wages, tips, other comp. 103147.69	2 Federal income tax withheld 26855.66					
3 Social security wages 95421.85	4 Social security tax withheld 7299.77					
5 Medicare wages and tips 108372.8	6 Medicare tax withheld 3142.81					
d Control number Dept. 2597319 150	Corp. Employer use only  A 36					
c Employer's name, address, and ZIP						
Davis-Douglas and	Sons					
054 Lane Vista Ap	t. 056					
Alexanderland IL	22806-8430					
b Employer's FED ID number	a Employee's SSA number					
50-4959379	0					
7 Social security tips	8 Allocated tips					
95421.85	108372.8					
9 Verification Code	10 Dependent care benefits					
0	185					
11 Nonqualified plans	12a See instructions for box 12					
116	W   9148					
14 Other	12b   875					
	12c   403 12d   936					
	13 Stat emp. Ret. Plan 3rd party sick pay					
e/f Employees name, address and ZIP of	0 0 0					
e/r Employees name, address and ZIP c	ode					
Emily Hamilton						
5998 Carter Plaza						
New Scott AL 05	906-9768					
15 State Employers' state ID no 76-26-387	o 16 State wages, tips, etc. 49756.68					
17 State income tax	18 Local wages, tips, etc.					
3948.79	127353.15					
19 Local income tax 15855.9	20 Locality name Robert Fords					
City or Local	Filing Copy					
Wage	and Tax					
W-2 Statement						
Copy 2 to be filed with employee's City or Lo	cal Income Tax Return OMB No. 1545-0008					