	I	Employe	e l	Refe	erenc	e		Сору		
			Wage	a	and	Tax				
١,	V-2		Statemen	ıt			-	2018		
V	V-Z									
Cop	y C for employ	ee's records	i.				OME	No. 1545-0008		
	Control num	ber	Dept.	Cor	p.			Employer use or		
647	70317		150				Α		36	
С	Employer's	name, addr	ess, and ZIP	code	,					
	Bradle	ey, Max	well ar	ıd 1	Nola	n and	Son	s		
	756 B	radley	Island	Su	ite	546				
	Woodsl	erg 1	rn 8	362	24-6	244				
	0									
				R	atch			¥02021		
e/f	Employees	name, addr	ess and ZIP	code						
	Kathle	een	Wilker	soı	n					
	3028	Lisa Pl	lain Apt	. 1	366					
		Ryanpoi	rt NV	:	2571	1-370	7			
	0									
b	Employer's		nber	а	Emple	oyee's SS				
	80-3148	L26					608	-88-0713		
1	Wages, tips,	other com	p.	2	Feder	al income	tax w	ithheld		
	105190.4	11					360	32.58		
3	Social secur	ity wages		4	Socia	I security	tax wi	thheld		
	134336.	59					102	76.75		
_				<u> </u>						
5	Medicare wa		os	6	Medic	are tax wi		I 9.87		
							341	9.67		
7	Social secur			8	Alloca	ited tips		926.72		
	134336.	9					117	926.72		
9	Verification	Code		10	Depe	ndent car		efits		
	0						107			
11	Nonqualified plans			12a	See i	nstruction	s for b	oox 12		
	152				D		390			
14	Other			12b			925			
				12c			328			
				12d		Ret. Plan	597 3rd pa	arty sick pay		
					0	0		0		
15	State	Employers 030-65-5	state ID no.	16	State	wages, t		c. 25.96		
			,10							
17	State incon	ne tax		18	Loca	ıl wages, t		ic. 92.0		
	2/31.86						,61	92.0		
19	Local incor			20	Loca	lity name		rado Squares		
	14524.62									

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	151499.7	Social Security Tax Withheld	10276.75	OK.State Income Tax Box 17 of W-2	2731.86
		Box 4 of W-2		Local Income Tax Box 19 of W-2	14524.62
Fed. Income	36032.58	Medicare Tax	3419.87		
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	OK.State Wages,	Delgado Squares
	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	151499.74	2E+05	151499.7	151499.7	151499.7
Plus GTL (C-Box 12)	3900	3900	3900	3900	3900
Less 401(k) (D-Box 2) Less Other Café 125	925 36032.58	N/A 36032.58	N/A 36032.58	925 36032.58	N/A 36032.58
Reported W-2 Wages	105190.41	105190.41	105190.41	105190.41	105190.41

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:	608-88-0713		
Kathleen Wilkerson	Taxable Marital Status:	MARRIED		
	Exemptions/Allowances:			
3028 Lisa Plain Apt. 866	FEDERAL: 4			
· · · · · · · · · · · · · · · · · · ·	STATE: 4			
Woodsberg TN 83624-	LOCAL:			

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1	Wages, tips, other com 105190.41	2 Federal income tax withheld 36032.58					
_			4 Social security tax withheld				
3	Social security wages 134336.59		4 Social security tax withheld 10276.75				
5	Medicare wages and ti	os	6 Medic	are tax wi	thheld	_	
	117926.72				3419.87		
d	Control number	Dept.	Corp.		Employer use only		
647	0317	150			A	36	
С	Employer's name, add	ess, and ZIP	code				
	Bradley, Ma:	kwell an	d Nola	n and	Sons		
	756 Bradley	Island	Suite	546			
	Woodsberg	rn Ω	3624-6	244			
	noousberg		JU24 U				
	•						
b	Employer's FED ID nur	nber	a Emple	oyee's SS/	A number		
	80-3148126				0		
7	Social security tips		8 Alloca	stard time			
-	Social security tips 134336.59		8 Alloca	ited tips	117926.72		
	134330.39				11.720.72		
9	Verification Code		10 Depe	ndent care			
	0				107		
11	Nonqualified plans		12a Soo i	netruction	s for box 12		
• •	Nonqualified plans		12d 3ee l	noti uctiON	0 IUI DUX 12		
			D	1	3900		
14	Other		12b		925		
			12c		328		
			12d 13 Stat emp.		597 3rd party sick pay		
			13 Stat emp. 0	Ret. Plan 0	3rd party sick pay 0		
e/f	Employees name, add	ess and ZIP of				_	
	Kathleen	Wilker	son				
			0.00				
	3028 Lisa P	lain Apt	. 866				
		-		1-3705	,		
	East Ryanpo	-		1-3707	,		
		-		1-3707	,		
15	East Ryanpo	rt NV	2571	1-3707	ips, etc.		
15	East Ryanpo	rt NV	2571				
	East Ryanpo	rt NV	2571 16 State	e wages, ti	ips, etc. 55425.96		
	East Ryanpo	rt NV	2571 16 State		ips, etc. 55425.96		
17	State Employers 30-65-5: State income tax	rt NV	2571 16 State	e wages, ti	ips, etc. 55425.96 ips, etc.		
17	East Ryanpo: 0	rt NV	2571 16 State	e wages, ti	ips, etc. 55425.96 ips, etc. 76192.0		
17	East Ryanpo: 0 State Employers 0K 30-65-5: State income tax 2731.86	rt NV	2571 16 State	e wages, ti	ips, etc. 55425.96 ips, etc. 76192.0		
17	State	rt NV	2571 16 State 18 Loca 20 Loca	e wages, ti	ips, etc. 55425.96 ips, etc. 76192.0 Delgado Squares		
	East Ryanpo: 0	rt NV	2571 16 State 18 Loca 20 Loca Filling	e wages, ti al wages, t	ips, etc. 55425.96 ips, etc. 76192.0		
17	State	rt NV	2571 16 State 18 Loca 20 Loca Filling and	e wages, ti al wages, t	ips, etc. 55425.96 ips, etc. 76192.0 Delgado Squares		
17	State	rt NV	2571 16 State 18 Loca 20 Loca Filling and	e wages, ti al wages, t	ips, etc. 55425.96 ips, etc. 76192.0 Delgado Squares		
17 19	State	v state ID no. 8	2571 16 State 18 Loca 20 Loca Filling and	e wages, ti al wages, t ality name	pps, etc. 55425,96 ips, etc. 76192.0 Delgado Squares Copy 2018	_	

105190.41					36032.58						
3	3 Social security wages 134336.59				4 Social security tax withheld 10276.75						
5	5 Medicare wages and tips				6 Medicare tax withheld						
	117926.72				3419.87						
d	Control number		Dept.	Corp			Employer use only				
	0317		150	CUIT	<i>.</i>		A	36			
c c	Employer's name, a	ddress		ode	_		7	- 00			
-					37 - 7		4 0				
	Bradley,						d sons				
	756 Bradley Island Suite 546										
	Woodsberg TN 83624-6244										
	0	-									
b	Employer's FED ID	numbe	r	a	Emplo	yee's SS	A number				
	80-3148126						0				
7	Social security tips			8	Alloca	ted tips					
	134336.59						117926.72				
9	Verification Code			10	Dono	ndont car	e benefits				
,	0			10	Depe	iluent can	107				
	-										
11	Nonqualified plans			12a See instructions for box 12							
	152										
					D		3900				
14	Other			12b			925				
				12c			328				
				12d		Ret. Plan	597 3rd party sick pay				
					at emp. 0	Ret. Plan	O 0				
e/f	Employees name, a	ddress	and ZIP c		0						
	Kathleer		Wilke	ers	on						
	3028 Lis	- n			0.00						
	East Rya	npoi	rt NV		257	11-37	07				
	0										
15		ployers 65-51	state ID no	16	State	wages, t					
	OK 30-	65-51	8				55425.96				
17	State income tax			18	Loca	l wages, t	ins. etc.				
l . <i>'</i>	2731.86				Loca	,100, 1	76192.0				
19	Local income tax			20	Loca	lity name					
	14524.62						Delgado Squares				
				<u> </u>							
	OK	.State	9	Fi	ling		Сору				
l			Wage	а	ind	Tax					
١			Stateme								
V	V-2		CiaiCilic	,,,,,			2018				
Con	v 2 to be filed with an	alouac's	State Iron	ome Tax Return OMB No. 1545-0008							
CUP	y z to be tileu with em	лиунев	Otare ILICO	ne li	ax Kell	#111	OWID INC. 1343-0000				

1	Wages, tips, other co 105190.41	2 Federal income tax withheld 36032.58							
3	Social security wage	4 Social security tax withheld 10276.75							
5				6 Medicare tax withheld					
5	117926.72	ups	3419.87						
d	Control number	Dept.	Corp.		Employer use only				
	0317	150			A	36			
С	Employer's name, a	idress, and ZIP o	ode						
	Bradley, Maxwell and Nolan and Sons 756 Bradley Island Suite 546								
	Woodsberg TN 83624-6244								
b	Employer's FED ID r	umber	a Empl	yee's SSA	number				
	80-3148126				0				
7	Social security tips		8 Alloca	ted tips					
′	134336.59		8 Alloca	tea tips	117926.72				
9	Verification Code		10 Dependent care benefits						
	0		107						
11	Nonqualified plans		12a See i	nstruction	s for box 12				
	152								
14	Other		12b		3900				
14	Other		12b		925 328				
			12d 528						
			13 Stat emp.		3rd party sick pay				
			0	0	0				
e/f	Employees name, ad	idress and ZIP co	ode						
	Kathleen	Wilke	erson						
	3028 Lis	a Plain Ar	t. 860	5					
	East Rva	nport NV	25"	11-37	17				
	0								
15	State Emp	loyers' state ID no	16 State	wages, ti	ps, etc.				
	OK 30-	65-518			55425.96				
17	State income tax		18 Loca	I wages, ti	ine atc				
''	2731.86		10 LOCE	ı wayes, ti	76192.0				
L									
19	Local income tax	20 Loca	lity name						
	14524.62				Delgado Squares				
	City o	r Local	Filing		Сору				
		Wage	and	Tax					
W	1-2	Stateme			2018				
•	1-4								
Cop	y 2 to be filed with emp	loyee's City or Loc	al Income 7	ax Return	OMB No. 1545-0008				