		Employe	e l	Refe	erenc	e		Сору		
ı			Wage	a	and	Tax				
١,	V-2		Statemen	ıt			-	2018		
V	VV-Z									
Cop	y C for employ	ee's records	i.				OME	MB No. 1545-0008		
d	Control numl	ber	Dept. 150	Cor	p.		-	Employer use o	nly 36	
283	36714		150				Α		36	
С	Employer's	name, addı	ess, and ZIP	code	,					
	Perez	, Taylo	or and F	tam:	irez	Ltd				
	2316 1	Price :	Squares	Su	ite	053				
	Lake 3	James	NV 78	105	4-99	21				
	0									
				Ва	atch		#	#02021		
_										
e/f	Employees i	name, addr	ess and ZIP	code						
	a1 · ·		_							
		copher								
			Tunnel							
	Noahbu	ıry	DC	62.	135-	2773				
	-									
b	Employer's I		nber	а	Empl	oyee's SS		ber -02-7219		
	34-91252	:96					100	-02-7219		
1	Wages, tips, 127431.7		p.	2	Feder	al income		ithheld 76.34		
	12/431.	4					439	76.34		
3	Social secur			4	Socia	I security				
	134133.3	34					102	61.2		
5	Medicare wa	ges and ti	os	6	Medic	are tax w	ithheld	i		
ı	148297.7	17					430	0.64		
7	Social secur	ity tine		8	Alloca	ited tips				
Ú	134133.3			۰	Alloca	iteu tips	148	297.77		
9	Verification (^ada		10	Dana	ndent car		effica.		
9	0	Joue		10	Бере	nuent car	287	1110		
11	N	1 - 1		40-		nstruction		40		
11	Nonqualified 178	pians		12a	See I	nstruction	is for t	00X 12		
					T		882	6		
14	Other			12b			829			
				12d	l		922			
				13 S	tat emp.	Ret. Plan	3rd pa	arty sick pay		
15	State		state ID no.	16		wages, t				
	KS	938-88-3	845				688	37.89		
17	State incon	ne tax		18	Loca	ıl wages, 1	tips, et	tc.		
	4137.57			1				733.31		
19	Local incor	ne tax		20	Loca	lity name				
	13865.45		1~		,		oson Wells			

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	181669.3	Social Security Tax Withheld	10261.2	KS.State Income Tax Box 17 of W-2	4137.57
		Box 4 of W-2		Local Income Tax Box 19 of W-2	13865.45
Fed. Income	43976.34	Medicare Tax	4300.64		
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 Secu	r Medicare	KS.State Wages,	Simpson Wells
	Compensation Box 1 of W-2	Wages Box 3 of W-	Wages 2 Box 5 of W-2	Tips, Etc. Box 16 of W-2	Local Wages, Tips, Etc. Box 18 of W2
Gross Pav	181669.28	2F+05	181669.3	181669.3	181669.3
Plus GTL (C-Box 12)	8826	8826	8826	8826	8826
Less 401(k) (D-Box 2) Less Other Café 125	829 43976.34	N/A 43976.34	N/A 43976.34	829 43976.34	N/A 43976.34
Reported W-2 Wages	127431.74	127431.74	127431.74	127431.74	127431.74

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

| Christopher | Carr | Scoial Security Number | 100-07 | MARR | 1240 | Marrial Status | Examplement Allowances | 100-07 | MARR | 100-07 | MARR

© 2018 ADP, LLC

1	Wages, tips, other	comp.	2 Feder	al income	tax withheld 43976.34	
3	Social security was	ies	4 Socia	l security	tax withheld	
5	Medicare wages an	al Alma	6 Medic	are tax wi		
3	148297.77	6 Medic	are tax wi	4300.64		
d	Control number	Dept.	Corp.	ı .	Employer use o	nlv
_	6714	150	Cuip.		A Employer use o	36
C	Employer's name,		code			
	Perez Ta	ylor and E	ami rez	T.+d		
		e Squares				
		-				
	Lake Jame	s NV 78	3054-99	21		
b	Employer's FED ID	number	a Emple	oyee's SS/	A number	
	34-9125296		1		0	
_						
7	Social security tips		8 Alloca	ited tips	148297.77	
	134133.34			1402577		
9	Verification Code		10 Depe	ndent care		
	0				287	
11	Nonqualified plans		12a Soo i	netruction	s for box 12	
•••	178		124 366 1	i i sti uction	5 101 DOX 12	
			T		8826	
14	Other		12b			
			12c			
			12d 13 Stat emp.	laat	922 3rd party sick pay	
			x	x x	x	
	Christoph 70784 Tho Noahbury			2773		
15	State Emplo	yers' state ID no.	16 State	wages, ti	ips, etc. 68837.89	
	State income tax		18 Loca	ıl wages, t		
17	4137.57				137733.31	
17				lity name		
17 19	Local income tax 13865.45		20 Loca	iiity name	Simpson Wells	
	13865.45	vral		inty name		
			Filing		Copy	
	13865.45	Wage	Filing and	Tax		
	13865.45		Filing and			

1	Wages, tips, other comp. 127431.74			2 Federal income tax withheld 43976.34							
3 Social security wages			4 Soci	4 Social security tax withheld							
	134133.34			10261.2							
5	Medicare wages	6 Medi									
-	148297.7	-	4300.64								
d	Control number	Dept.	Corp.	1	Employer use only						
_	6714	150			A	36					
283 C		e, address, and Z		-	Α	30					
		Taylor ar		ez Ltd							
	2316 Price Squares Suite 053										
	Lake James NV 78054-9921										
	0										
b	Employer's FED	ID number	a Emp	loyee's SSA	number						
b	34-91252		a Linp	loyee a SSA	0						
	34 31232				•						
7	Social security t	ips	8 Alloc	cated tips							
	134133.3		- 1		148297.77						
9	Verification Cod	е	10 Dep	endent care	benefits						
	0				287						
11	Nonqualified plans		12a See	12a See instructions for box 12							
	178										
-			T		8826						
14	Other		12b		829						
			12c		468						
			12d		922						
				p. Ret. Plan	3rd party sick pay						
e/f	Empleyees nem	e, address and ZI	X Decide	x	×						
e/i	Employees nam	e, address and Zi	r code								
	Ch		_								
		opher Cari									
	70784	Thomas Tur	ınel								
	Noahbu	rv DC	6213	5-2773							
	Noambo	LY DC	0213	5 2775							
	-										
15	State	Employers' state If) no 16 Sta								
15	State	Employers' state II	no 16 Sta	te wages, ti							
15		Employers' state II	o no 16 Sta	te wages, ti	ps, etc. 68837 . 89						
		38-88-345		te wages, ti	68837.89						
	KS	38-88-345			68837.89						
	State income to	38-88-345 ax			68837 . 89 ips, etc.						
17	KS State income to	38-88-345 ax	18 Loc		68837 . 89 ips, etc.						
17	State income to	38-88-345 ax	18 Loc	cal wages, t	68837 . 89 ips, etc.						
17	State income to 4137.57 Local income to 13865.45	38-88-345 ax	18 Loc	cal wages, to	ips, etc. 137733.31						
17	State income to 4137.57 Local income to 13865.45	38-88-345 ax	18 Loc	cal wages, to	ips, etc. 137733.31						
17	State income to 4137.57 Local income to 13865.45	38-88-345 ax KS.State	18 Loc 20 Loc Filing	cal wages, t	68837.89 ips, etc. 137733.31 Simpson Wells						
17	State income to 4137.57 Local income to 13865.45	ax KS.State Wag	18 Loc 20 Loc Filing ge and	cal wages, to	68837.89 ips, etc. 137733.31 Simpson Wells						
17	State income to 4137.57 Local income to 13865.45	38-88-345 ax KS.State	18 Loc 20 Loc Filing ge and	cal wages, t	68837.89 jps, etc. 137733.31 Simpson Wells Copy						
15 17 19	State income to 4137.57 Local income to 13865.45	ax KS.State Wag	18 Loc 20 Loc Filing ge and	cal wages, t	68837.89 ips, etc. 137733.31 Simpson Wells						

1	Wages, tips, other comp. 127431.74			2 Federal income tax withheld 43976.34							
3	Social security wages			4 Social security tax withheld							
	134133.34			10261.2							
5	5 Medicare wages and tips			Medic	are tax wi	thheld					
	148297.77				4300.64						
d	d Control number Dept.						Employer use only				
	2836714 150					A	,,	36			
c Employer's name, address, and ZIP c											
	Perez,										
	2316 E	s S	uite	053							
	Lake 3	Tames NV	780	54-9	921						
	0										
b	Employer's FED		а	Emplo	yee's SSA	number					
	34-91252	96				0					
7	Social security t	ine	8	Alloca	ted tips						
	134133.3		ľ	7111000	ica tipo	148297	.77				
9	Verification Cod	e	10 Dependent care benefits 287								
	0										
11	Nonqualified pla	ans	12a See instructions for box 12								
	178										
				T 8826							
14	Other					829					
						468					
			13 Stat emp. Ret. Plan			922 3rd party	-1-1				
			13 5	tat emp.	Ket. Plan	ard party					
e/f	Employees nam	e, address and ZIP c	ode		_						
	Christ	opher Carr									
	70784	Thomas Tunne	-1								
	Monhhu	ry DC	62135-2773								
	NOAIID	iry bc		2130	-2113						
	U										
15	State	Employers' state ID no	16	State	wages, ti	ps, etc.					
	KS	38-88-345				68837.	89				
L											
17	State income to	ax	18 Local wages, tips, etc. 137733.31								
	4137.57					13//33	.31				
19	Local income t	ax	20	Loca	lity name						
	13865.45	i				Simpso	n Wells				
<u> </u>			<u> </u>								
	Ci	ty or Local				Co	ру				
1		Wage	á	and	Tax						
W-2 Statement 2018											
٧١	I-Z					20	10				
Cop	y 2 to be filed with	employee's City or Loc	al In	come T	ax Return	OMB No	. 1545-0008				