

TAXABLE EARNINGS STATEMENT

Date of Issue:
Statement Period:

EMPLOYER INFORMATION

Employer Name:

Tax ID / FEIN:

Address:

EMPLOYEE INFORMATION

Employee Name:

SSN / Tax ID:

Employee ID:

TAXABLE EARNINGS BREAKDOWN

Description	Hours / Units	Rate	Current Period	Year-to-Date (YTD)
Gross Wages / Salary				
Bonuses				
Commissions				
Overtime				
Other Taxable Compensation				

TAX WITHHOLDINGS & DEDUCTIONS

Description	Current Period	Year-to-Date (YTD)
Federal Income Tax		
State Income Tax		
Social Security Tax (FICA)		
Medicare Tax		
Local / City Tax		
Pre-Tax Deductions		

Total Gross Earnings:

Pre-Tax Deductions:

Total Taxable Earnings:	
Total Tax Withheld:	
Net Pay:	

Authorized Representative Signature

Date