



2018 YEAR END BONUS FORM
(PLEASE COMPLETE ONE PER EMPLOYEE)

COMPANY: _____ COMPANY ID: _____
 Employee: _____ EMPLOYEE #: _____
 Check Date: _____

GROSS AMOUNT \$ _____
 FICA 6.2% (128,700.00 Limit) \$ Paytime will calculate
 MEDICARE 1.45% (2018 Wages up to \$200,000) \$ Paytime will calculate
 Wages Over \$200,000 2.35% FEDERAL TAX \$ _____
 STATE TAX \$ _____
 CITY TAX (Work City) \$ Paytime will calculate
 NET \$ _____
 REQUESTED BY _____
 DATE _____

(Special Instructions)
 Would you like a message printed on checkstub? _____
 Federal Tax (check one)
 Flat amount _____
 In addition to regular FIT _____
 State Tax (check one)
 Flat amount _____
 In addition to regular SIT _____
 Delivery Date _____
 Who should bonus checks be sent to? _____

- | | | |
|---|-----------|-----------|
| a) Separate check on regular payroll? | Yes _____ | No _____ |
| b) Separate payroll run? | Yes _____ | No _____ |
| c) Manual check to update YTD earnings? | Yes _____ | No _____ |
| d) Direct Deposit or live check? | DD _____ | CHK _____ |
| e) 401(k), 403(b) or IRA deduction? | Yes _____ | No _____ |