

# 2019 W-2 and EARNINGS SUMMARY

This Summary is included with your W-2 to help describe portions in more detail. The reverse side includes information that will also be helpful.

Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, Other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2
<b>GROSS PAY</b>	238,772.04	238,772.04	238,772.04
KAISER	-1,924.52	-1,924.52	-1,924.52
CF HO RX	-661.96	-661.96	-661.96
DEP COMP	-19,000.00		
ERS CONTR	-11,938.68		

	Excess Fica W-2 WAGES	-103,285.56 132,900.00	236,185.56
	205,246.88		

GOVT. EXHIBIT NO. Exh. 4

CASE NO. LKG-22-007

IDENTIFICATION \_\_\_\_\_

ADMITTED \_\_\_\_\_

Social Security Number: [REDACTED]  
 Taxable Marital Status:  
 Married Filing Jointly  
 Exemptions/Allowances:  
 Federal: 0  
 State: 0  
 Local: 0

MARILYN J MOSBY



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<b>Employee Reference Copy</b>			
<b>W-2 Wage and Tax Statement</b>		<b>2019</b>	
Copy C for employee's records. OMB No. 1545-0008			
d Control number	Dept.	Corp.	Employer use only
5452707067 VQH	A29001		ES 2160
c Employer's name, address, and ZIP code			
MAYOR AND CITY COUNCIL OF BALT 401 E FAYETTE, RM 800 BALTIMORE, MD 21202			
e/f Employee's name, address, and ZIP code			
MARILYN J MOSBY [REDACTED]			
b Employer's FED ID number	a Employee's SSA number		
[REDACTED]	[REDACTED]		
1 Wages, tips, other comp.	2 Federal income tax withheld		
205246.88	34776.18		
3 Social security wages	4 Social security tax withheld		
132900.00	8239.80		
5 Medicare wages and tips	6 Medicare tax withheld		
236185.56	3750.36		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	G   19000.00		
14 Other	12b DD 22099.56		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
	X		
15 State	Employer's state ID no.	16 State wages, tips, etc.	
MD	[REDACTED]	205246.88	
17 State income tax	18 Local wages, tips, etc.		
16340.87			
19 Local income tax	20 Locality name		

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14 Other	12b DD 22099.56		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
MARILYN J MOSBY [REDACTED]			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
MD	[REDACTED]	205246.88	
17 State income tax	18 Local wages, tips, etc.		
16340.87			
19 Local income tax	20 Locality name		

Federal Filing Copy  
**W-2 Wage and Tax Statement 2019**  
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

1 Wages, tips, other comp.	2 Federal income tax withheld		
205246.88	34776.18		
3 Social security wages	4 Social security tax withheld		
132900.00	8239.80		
5 Medicare wages and tips	6 Medicare tax withheld		
236185.56	3750.36		
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MAYOR AND CITY COUNCIL OF BALT 401 E FAYETTE, RM 800 BALTIMORE, MD 21202			
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[REDACTED]			
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11 Nonqualified plans	12a See instructions for box 12		
	G   19000.00		
14 Other	12b DD 22099.56		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
	X		
e/f Employee's name, address and ZIP code			
MARILYN J MOSBY [REDACTED]			
15 State	Employer's state ID no.	16 State wages, tips, etc.	
MD	[REDACTED]	205246.88	
17 State income tax	18 Local wages, tips, etc.		
16340.87			
19 Local income tax	20 Locality name		

MD. State Filing Copy  
**W-2 Wage and Tax Statement 2019**  
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

1 Wages, tips, other comp.	2 Federal income tax withheld		
205246.88	34776.18		
3 Social security wages	4 Social security tax withheld		
132900.00	8239.80		
5 Medicare wages and tips	6 Medicare tax withheld		
236185.56	3750.36		
d Control number	Dept.	Corp.	Employer use only
5452707067 VQH	A29001		2160
c Employer's name, address, and ZIP code			
MAYOR AND CITY COUNCIL OF BALT 401 E FAYETTE, RM 800 BALTIMORE, MD 21202			
b Employer's FED ID number			
[REDACTED]			
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
	G   19000.00		
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e/f Employee's name, address and ZIP code			
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17 State income tax	18 Local wages, tips, etc.		
16340.87			
19 Local income tax	20 Locality name		

City or Local Filing Copy  
**W-2 Wage and Tax Statement 2019**  
 Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008