

2018 W-2 and EARNINGS SUMMARY

Employee Reference Copy			
W-2		2018	
Wage and Tax Statement			
Copy C for employee's records. OMB No. 1545-0008			
d Control number 0000097215 T9V	Dept.	Corp. Y216	Employer use only S 23141
c Employer's name, address, and ZIP code CONVERGYS CUSTOMER MANAGEMENT GROUP 201 EAST 4TH STREET CINCINNATI, OH 45202			
e/f Employee's name, address, and ZIP code KARTIK HARIHARANMANI 1350 BRANSON AVE APT 18 LAS CRUCES, NM 88001			
b Employer's FED ID number 31-1260729	a Employee's SSA number 032-13-1642		
1 Wages, tips, other comp. 775.02	2 Federal income tax withheld		
3 Social security wages 775.02	4 Social security tax withheld 48.05		
5 Medicare wages and tips 775.02	6 Medicare tax withheld 11.24		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other	12b		
	12c		
	12d		
	13 Stat emp. Ret. plan 3rd party sick pay		
15 State Employer's state ID no. NM 0294008900 9	16 State wages, tips, etc. 775.02		
17 State income tax 1.86	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement, plus any additional compensation or adjustments received after the payroll close.

Your gross pay may not match your box 1 totals due to adjustments made for GTL, 401(k), cafeteria plans, etc...

To change your employee W-4 profile information, file a new W-4 with your payroll department.

**KARTIK HARIHARANMANI
1350 BRANSON AVE APT 18
LAS CRUCES, NM 88001**

Social Security Number: 032-13-1642
Taxable Marital Status: MARRIED
Exemptions/Allowances:
Federal: 0
State: 0
Local: 0



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PAGE 01 OF 01

← Fold and Detach Here →

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3 Social security wages 775.02	4 Social security tax withheld 48.05
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d Control number 0000097215 T9V	Dept. Y216
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b Employer's FED ID number 31-1260729	a Employee's SSA number 032-13-1642
7 Social security tips	8 Allocated tips
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Federal Filing Copy	
W-2	2018
Wage and Tax Statement	
Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008	

NM. State Filing Copy	
W-2	2018
Wage and Tax Statement	
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008	

City or Local Filing Copy	
W-2	2018
Wage and Tax Statement	
Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008	

Copy B -- To Be Filed With Employee's FEDERAL Tax Return.		41-1628061 OMB No. 1545-0008	
a Employee's soc. sec. no 032-13-1642	1 Wages, tips, other comp.	2 Federal income tax withheld	0.00
	3 Social security wages	4 Social security tax withheld	
	5 Medicare wages and tips	6 Medicare tax withheld	0.34
b Employer ID number (EIN) 63-1180986	23.75	1.47	
c Employer's name, address, and ZIP code ONIN STAFFING, LLC SUITE 450N 1 PERIMETER PARK SOUTH BIRMINGHAM, AL 35243			
d Control number 0000312-0101			
e Employee's name, address, and ZIP code KARTIK HARIHARANMANI 316 E FOSTER RD 1003 LAS CRUCES, NM 88005			
7 Social security tips 0.00	8 Allocated tips	9 Verification Code	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
NM 03-232458-00-8	23.75	0.00	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement **2018** Dept. of the Treasury -- IRS
This information is being furnished to the Internal Revenue Service

Copy 2 -- To Be Filed With Employee's State, City, or Local Income Tax Return.		41-1628061 OMB No. 1545-0008	
a Employee's soc. sec. no 032-13-1642	1 Wages, tips, other comp.	2 Federal income tax withheld	0.00
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c Employer's name, address, and ZIP code ONIN STAFFING, LLC SUITE 450N 1 PERIMETER PARK SOUTH BIRMINGHAM, AL 35243			
d Control number 0000312-0101			
e Employee's name, address, and ZIP code KARTIK HARIHARANMANI 316 E FOSTER RD 1003 LAS CRUCES, NM 88005			
7 Social security tips 0.00	8 Allocated tips	9 Verification Code	
10 Dependent care benefits	11 Nonqualified plans	12a Code	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
NM 03-232458-00-8	23.75	0.00	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement **2018** Dept. of the Treasury -- IRS

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d Control number 0000312-0101			
e Employee's name, address, and ZIP code KARTIK HARIHARANMANI 316 E FOSTER RD 1003 LAS CRUCES, NM 88005			
7 Social security tips 0.00	8 Allocated tips	9 Verification Code	
10 Dependent care benefits	11 Nonqualified plans	12a Code	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
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Form W-2 Wage and Tax Statement **2018** Dept. of the Treasury -- IRS

FORM L4UP

Form **W-2 Wage and Tax Statement 2018**

c Employer's name, address, and ZIP code ALLEGIANCE STAFFING 5726 ROOT RD SPRING, TX 77389			7 Social security tips	1 Wages, tips, other compensation 7059.10	2 Federal income tax withheld 374.03
e Employee's name, address, and ZIP code Hariharanmani, Kartik 1350 Branson Ave #18 Las Cruces, NM 88001			8 Allocated tips	3 Social security wages 7059.10	4 Social security tax withheld 437.66
			9 Advance EIC payment	5 Medicare wages and tips 7059.10	6 Medicare tax withheld 102.37
15 State NM			Employer's state ID number 03-245671-00-9	16 State wages, tips, etc. 7059.10	17 State income tax 232.97
				18 Local wages, tips, etc.	19 Local income tax
					20 Locality name

Copy B-To Be Filed With Employee's FEDERAL tax return

This information is being furnished to the Internal Revenue Service

Dept. of the Treasury - IRS

Form **W-2 Wage and Tax Statement 2018**

c Employer's name, address, and ZIP code ALLEGIANCE STAFFING 5726 ROOT RD SPRING, TX 77389			7 Social security tips	1 Wages, tips, other compensation 7059.10	2 Federal income tax withheld 374.03
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Copy 2-To Be Filed With Employee's State, City, or Local Tax Return

Dept. of the Treasury - IRS

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Dept. of the Treasury - IRS

Form **W-2 Wage and Tax Statement** 2018

c Employer's name, address, and ZIP code
 VOLT MANAGEMENT CORP.
 P O BOX 13500 10062
 ORANGE CA 92857

7 Social security tips	1 Wages, tips, other compensation 2473.92	2 Federal income tax withheld 198.26
8 Allocated tips	3 Social security wages 2473.92	4 Social security tax withheld 153.38
9 Verification code	5 Medicare wages and tips 2473.92	6 Medicare tax withheld 35.87
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 DD 149.77
13 <small>Statutory employee Retirement plan Third-party sick pay</small>	14 Other	12b
b Employer identification number (EIN) 13-3568039		12c
a Employee's social security number 032-13-1642		12d

15 State NM	Employer's state ID number 02-244847-000	16 State wages, tips, etc. 2473.92	17 State income tax 57.05	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Copy B-To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS website at www.irs.gov/efile.

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Form **W-2 Wage and Tax Statement** 2018

c Employer's name, address, and ZIP code
 VOLT MANAGEMENT CORP.
 P O BOX 13500 4199
 ORANGE CA 92857

7 Social security tips	1 Wages, tips, other compensation 5321.32	2 Federal income tax withheld 265.59
8 Allocated tips	3 Social security wages 5321.32	4 Social security tax withheld 329.92
9 Verification code	5 Medicare wages and tips 5321.32	6 Medicare tax withheld 77.16
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
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 KARTIK HARIHARANMANI
 1350 BRANSON AVE APT 18
 LAS CRUCES NM 88001-5379

15 State NM	Employer's state ID number 02-244847-000	16 State wages, tips, etc. 5321.32	17 State income tax 82.85	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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	3 Social security wages 5606.25	4 Social security tax withheld 347.59
b Employer ID number (EIN) 74-2837758	5 Medicare wages and tips 5606.25	6 Medicare tax withheld 81.29
c Employer's name, address, and ZIP code dmDickason Personnel Services 4900 North Mesa El Paso, TX 79912		
d Control number 864945		
e Employee's name, address, and ZIP code Kartik Hariharanmani 1350 Branson Ave Apt 18 Las Cruces, NM 88001		
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10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
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NM 02-473908-00-1	5606.25	35.50
15 State Employer's state ID Number	16 State wages, tips, etc.	17 State income tax
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NM 02-473908-00-1	5606.25	35.50
15 State Employer's state ID Number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018 Dept. of the Treasury -- IRS

Copy C -- For EMPLOYEE'S RECORDS (See Notice to Employee.)		38-2099803 OMB No. 1545-0008
a Employee's soc. sec. no. 032-13-1642	1 Wages, tips, other comp. 5606.25	2 Federal income tax withheld 169.09
	3 Social security wages 5606.25	4 Social security tax withheld 347.59
b Employer ID number (EIN) 74-2837758	5 Medicare wages and tips 5606.25	6 Medicare tax withheld 81.29
c Employer's name, address, and ZIP code dmDickason Personnel Services 4900 North Mesa El Paso, TX 79912		
d Control number 864945		
e Employee's name, address, and ZIP code Kartik Hariharanmani 1350 Branson Ave Apt 18 Las Cruces, NM 88001		
7 Social security tips	8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
Third-party sick pay		12d Code
NM 02-473908-00-1	5606.25	35.50
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018 Dept. of the Treasury -- IRS
This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

Copy 2 -- To Be Filed With Employee's State, City, or Local Income Tax Return.		38-2099803 OMB No. 1545-0008
a Employee's soc. sec. no. 032-13-1642	1 Wages, tips, other comp. 5606.25	2 Federal income tax withheld 169.09
	3 Social security wages 5606.25	4 Social security tax withheld 347.59
b Employer ID number (EIN) 74-2837758	5 Medicare wages and tips 5606.25	6 Medicare tax withheld 81.29
c Employer's name, address, and ZIP code dmDickason Personnel Services 4900 North Mesa El Paso, TX 79912		
d Control number 864945		
e Employee's name, address, and ZIP code Kartik Hariharanmani 1350 Branson Ave Apt 18 Las Cruces, NM 88001		
7 Social security tips	8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
Third-party sick pay		12d Code
NM 02-473908-00-1	5606.25	35.50
15 State Employer's state ID Number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement 2018 Dept. of the Treasury -- IRS