A Record of Engagement, Not a Claim – Part VI

June 15, 2026

This series has, until now, dealt in frameworks, history, distinctions, and foundational processes.

This part is different.

This part presents evidence. Not theory. Not philosophy. Not interpretation. Simply a documented record of what changed when one individual changed how they engaged with administrative systems – and what the systems produced in response.

The record spans from 2021 to 2026. It covers three separate employers. It includes forms submitted, confirmations received, and payroll outputs generated across multiple years and pay

periods. Every element described here is drawn from actual documents — emails, paystubs, tax forms, and institutional correspondence.

It is presented in the same spirit as everything else in this series: as observation, not argument. The reader is invited to examine what occurred and to draw their own conclusions.

Lawful Lane Scope Note: This article documents one living man's records and observed outcomes after establishing a public-record foundation and engaging administrative systems from a Lawful Lane posture. It is not instruction for the general public, Legal Lane participants, or anyone seeking payroll, tax, banking, or form-completion guidance. It does not advise any reader how to complete an I-9, W-4, G-4, payroll form, tax form, check endorsement, or banking instrument. Each man or woman studying the Lawful Lane remains responsible for their own research, competent counsel where needed, decisions, and conduct.

The Sequence: Foundation → Inputs → Processing → Outputs

Before examining the evidence, it is worth restating the sequence described in Part V.

Foundation was established first. The 928 paperwork — served in May 2021 through The Georgia Assembly — created a documented public record of identity, standing, and intent. This was the compass.

Only after that foundation was in place did administrative

inputs change. Forms were completed differently. Identity was presented differently. Engagement with institutional systems shifted from default participation to intentional, documented interaction.

The systems then processed those inputs. They did not evaluate philosophy. They did not assess political standing. They did what systems do — they received inputs, applied their internal logic, and produced outputs.

The outputs are what this part documents.

The Forms: What Changed in the Inputs

When one enters employment within the Legal Lane, several administrative forms establish how the system classifies and processes the individual. The most significant of these, for purposes of this record, are the federal I-9 form, the federal W-4 form, and the state withholding form (for Georgia, the G-4).

The I-9 — Employment Eligibility

The I-9 is the federal form used to verify employment eligibility. It includes a section where the individual attests to their citizenship or immigration status.

The I-9 provides four options. Option 1 is “A citizen of the United States.” Option 2 is “A noncitizen national of the United States.” Option 3 is “A lawful permanent resident.” Option 4 is “An alien authorized to work.”

In this study, the I-9 submitted after status correction

selected Option 2 — a noncitizen national of the United States. This option exists on the form as printed by the Department of Homeland Security. It is not a modification, not an addition, and not an unauthorized entry. It is one of the four standard selections provided by the form itself.

Within the framework of this series, this selection aligns with the standing established in the 928 paperwork — specifically, the Declaration of Political Status, which references the definition of "national" under federal code.

The W-4 — Federal Withholding

The W-4 is the form through which an employee communicates withholding preferences to their employer. It determines how much federal income tax is deducted from each paycheck.

In the standard configuration — the default that most employees accept without modification — the W-4 results in federal income tax being withheld from every pay period based on serving status, dependents, and other standard inputs.

In this study, the W-4 submitted after status correction was completed differently. The withholding designation was marked as EXEMPT. The form was autographed — not signed — with a reservation of rights notation: "All Rights Reserved, Without Prejudice." The Social Security number field included a notation indicating that it was provided for identification purposes, not as a tax identification number.

This is described only as the input used in this documented record, not as instruction or eligibility guidance for any other reader.

These are input changes. They communicate specific information to the payroll system about how to process the individual’s compensation.

The G-4 – State Withholding

The G-4 is the State of Georgia’s withholding form – the state-level equivalent of the federal W-4.

In the standard configuration, this form results in Georgia state income tax being deducted from each pay period.

In this study, the G-4 submitted after status correction utilized Section 8 of the form – the exemption section. This section, printed on the form itself by the Georgia Department of Revenue, provides a checkbox for claiming exemption from withholding. The form was completed accordingly, with the exemption claimed and the autograph accompanied by the same reservation of rights notation.

I-9, W-4, and G-4 Tax Forms – Example Images

Employment Eligibility Verification

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
OMB No.1615-0047
Expires 05/31/2027

START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the Instructions.

ANTI-DISCRIMINATION NOTICE: All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in **Section 1**, or specify which acceptable documentation employees must present for **Section 2** or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

Section 1. Employee Information and Attestation: Employees must complete and sign Section 1 of Form I-9 no later than the **first day of employment**, but not before accepting a job offer.

Last Name (Family Name)	First Name (Given Name)	Middle Initial (if any)	Other Last Names Used (if any)
Doe	John	S	

Address (Street Number and Name)	Apt. Number (if any)	City or Town	State	ZIP Code
123 Main street		Anycity	State	12345

Date of Birth (mm/dd/yyyy)	U.S. Social Security Number	Employee's Email Address	Employee's Telephone Number
12/15/1900	123456789	email@example.com	555-222-1111

I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct.

Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions.):

- ☐ 1. A citizen of the United States
- ☒ 2. A noncitizen national of the United States (See Instructions.)
- ☐ 3. A lawful permanent resident (Enter USCIS or A-Number.)
- ☐ 4. An alien authorized to work until (exp. date, if any) _____

If you check **Item Number 4.**, enter one of these:

USCIS A-Number	OR	Form I-94 Admission Number	OR	Foreign Passport Number and Country of Issuance

Signature of Employee	Today's Date (mm/dd/yyyy)
By: John-Smith: DOE	05/07/2026

If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page 3.

Section 2. Employer Review and V … entative must complete and sign **Section 2** within three business days after the employee's first … or examine consistent with an alternative procedure authorized by the Secretary of DHS, doc… entation from List B and List C. Enter any additional documentation in the Additional Information box; see instructions.

	List A	OR	List B	AND	List C
Document Title 1					
Issuing Authority					
Document Number (if any)					
Expiration Date (if any)					
Document Title 2 (if any)					
Issuing Authority					
Document Number (if any)					
Expiration Date (if any)					
Document Title 3 (if any)					
Issuing Authority					
Document Number (if any)					
Expiration Date (if any)					

Additional Information

☐ Check here if you used an alternative procedure authorized by DHS to examine documents.

Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears to be genuine and to relate to the employee named, and (3) to the best of my knowledge, the employee is authorized to work in the United States.

First Day of Employment (mm/dd/yyyy):

Last Name, First Name and Title of Employer or Authorized Representative	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)

Employer's Business or Organization Name	Employer's Business or Organization Address, City or Town, State, ZIP Code

For reverification or rehire, complete Supplement B, Reverification and Rehire on Page 4.

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Withholding Certificate

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.
Give Form W-4 to your employer.
Your withholding is subject to review by the IRS.

OMB No. 1545-0074

2026

Step 1: Enter Personal Information

(a) First name and middle initial: John S
Last name: Doe
(b) ~~Social security number~~ NIN: 123456789

Address: In Care Of: 123 Main Street
City or town, state, and ZIP code: Anycity, State [12345] Non-Domestic Without the United States

Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.

(c) ☐ **Single** or **Married filing separately**
☐ **Married filing jointly** or **Qualifying surviving spouse**
☐ **Head of household** (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

Caution: To claim certain credits or deductions on your tax return, you (and/or your spouse if married filing jointly) are required to have a social security number valid for employment. See page 2 for more information.

TIP: Consider using the estimator at *www.irs.gov/W4App* to determine the most accurate withholding for the rest of the year if you: are completing this form after the beginning of the year; expect to work only part of the year; or have changes during the year in your marital status, number of jobs for you (and/or your spouse if married filing jointly), dependents, other income (not from jobs), deductions, or credits. Have your most recent pay stub(s) from this year available when using the estimator. At the beginning of next year, use the estimator again to recheck your withholding.

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, and when to use the estimator at *www.irs.gov/W4App*.

Step 2: Multiple Jobs or Spouse Works

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at *www.irs.gov/W4App* for the most accurate withholding for this step (and Steps 3–4). If you or your spouse have self-employment income, use this option; **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is generally more accurate than Step 2(b) if pay at the lower paying job is more than half of the pay at the higher paying job. Otherwise, Step 2(b) is more accurate . . . . . ☐

Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependent and Other Credits

If your total income will be $200,000 or less ($400,000 or less if married filing jointly):

(a) Multiply the number of qualifying children under age 17 by $2,200 . . . . . 3(a) $

(b) Multiply the number of other dependents by $500 . . . 3(b) $

Add the amounts from Steps 3(a) and 3(b), plus the amount for other credits. Enter the total here . . . . . 3 $

Step 4: Other Adjustments

(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . . 4(a) $

(b) Deductions. Use the Deductions Worksheet on page 4 to determine the amount of deductions you may claim, which will reduce your withholding. (If you skip this line, your withholding will be based on the standard deduction.) Enter the result here . . 4(b) $

(c) Extra withholding. Enter any additional tax you want withheld each **pay period** . . 4(c) $

"EXEMPT" NRA "EXEMPT"

Exempt from withholding

I claim exemption from withholding for 2026. See *Exemption fro*

et **both** of the conditions for exemption for need to submit a new Form W-4 for 2027 . ☐

Step 5: Sign Here

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

By: John-Smith: DOE ©
All rights reserved - Without prejudice

Employee's signature (This form is not valid unless you sign it.) **Date** May 01, 2026

Employers Only

Employer's name and address	First date of employment	Employer identification number (EIN)

Download and use the latest version - Look at the Form date above

Form G-4 (Rev. 08/15/24)

2511004015

STATE OF GEORGIA EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

1a. YOUR FULL NAME	1b. ~~YOUR SOCIAL SECURITY NUMBER~~ None Tax Payer
John Smith Doe	123456789 Identification number
2a. HOME ADDRESS (Number, Street, or Rural Route)	2b. CITY, STATE AND ZIP CODE
123 Main Street	Anycity, State [12345]

PLEASE READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING LINES 3 – 8

3. MARITAL STATUS
Enter letter below on Line 7.

A. Single
B. Married Filing Separate or Married Filing Joint, both spouses working
C. Married Filing Joint, one spouse working
D. Head of Household

4. DEPENDENT ALLOWANCES [ ]

5. GEORGIA ADJUSTMENTS ALLOWANCE [ ]
(See instructions for details. Worksheet below must be completed)

6. ADDITIONAL WITHHOLDING $_____

WORKSHEET FOR CALCULATING ADDITIONAL ALLOWANCES
(Must be completed for step 5)

This is an Example Form

A. Federal Estimated Itemiz… …ctions (If Itemizing Deductions) ..... $_____
B. Georgia Standard De… (enter one): $_____
Single/Head of H… …old $12,000
Married Filing… $24,000
Married Fi… …arate $12,000
C. Subtract … from Line A (If zero or less, enter zero) ..... $_____
D. Allo… …orgia Adjustments to Federal Adjusted Gross Income ..... $_____
E. Add th… Amounts on Lines C and D ..... $_____
F. Estimate of Taxable Income not Subject to Withholding ..... $_____
G. Subtract Line F from Line E (if zero or less, stop here) ..... $_____
H. Divide the Amount on Line G by $4,000. Enter total here and on Line 5 above ..... _____
(This is the number of Georgia Adjustments Allowances you can claim. If the remainder is over $1,500 round up)

7. LETTER USED (Marital Status A, B, C or D) _____ **TOTAL ALLOWANCES** (Total of Lines 4 - 5) _____
(Employer: The letter indicates the tax tables in Employer's Tax Guide)

8. EXEMPT: (Do not complete Lines 4 - 7 if claiming exempt) **Read the Line 8 instructions on page 2 before completing this section.**
a) I claim exemption from withholding because I incurred no Georgia income tax liability last year **and** I do not expect to have a Georgia income tax liability this year. **Check here** ☑
b) I certify that I am not subject to Georgia withholding because I meet the conditions set forth under the Servicemembers Civil Relief Act as provided on page 2. My state of residence is _____. My spouse's (servicemember) state of residence is _____. The states of residence must be the same to be exempt. **Check here** ☐

I certify under penalty of perjury that I am entitled to the number of withholding allowances or the exemption from withholding status claimed on this Form G-4. Also, I authorize my employer to deduct per pay period the additional amount listed above.

Employee's Signature By:John-Smith:DOE© Date May 01,2026

Employer: Complete Line 9 and mail entire form only if … …or exempt from withholding. If necessary, mail form to: Georgia Department of Revenu… …5. Atlanta, GA 30348-5685

This is an Example Form

9. EMPLOYER'S NAME AND ADDRESS:

EMPLOYER'S FEIN: _____

EMPLOYER'S WH#: _____

Do not accept forms claiming additional allowances unless the worksheet has been completed. Do not accept forms claiming exempt if numbers are written on Lines 4 - 7.

Download and use the latest version - Look at the Form date above

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⚡ The Processing: Institutional Response

What happened after these forms were submitted is documented through direct correspondence from the employers' human resources / payroll departments.

Employer One — Corporation A, Inc. (2022)

On May 31, 2022, correspondence was sent to the employer's human resources department inquiring about the processing of the W-4 and G-4 forms that had been submitted.

On June 15, 2022, the human resources representative responded directly. The communication stated that the individual's profile had been marked to be exempt from Federal Withholding and State Withholding. It confirmed that the change would reflect on the next week's payroll. It further stated that the only taxes that would continue to apply were Social Security and Medicare taxes.

This was not a negotiation. It was not an argument. It was an administrative process: forms were submitted, the system processed them, and the human resources department confirmed the resulting configuration.

From [redacted]

To [redacted]

Subject **Re: American State National**

Reply | Reply All | Forward | Archive | Junk | Delete | More

6/15/22, 13:36

Good Afternoon [redacted],

Your profile has been marked to be exempt from Federal Withholding and State Withholding. It should reflect on the next week's payroll. The only taxes that American State National are not exempt from is Social Security and Medicare taxes based on US company is paying you wages. Please let me know if anything else is needed.

Kisha

On 5/31/2022 11:01 PM, [redacted] wrote:

> Dear Kisha,
>
> I forgot to ask you if you need me to upload those W-4 and G-4 forms documents into ADP account and frankly I have no idea how to upload them.
>
> If you want me to share those files with ADP too, please let me know how to do that.
>
> Thank you!
>
> [redacted]
>
> On 5/25/22 08:58, Lakisha [redacted] wrote:

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Withholding Certificate

OMB No. 1545-0074

2022

▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**
▶ **Give Form W-4 to your employer.**
▶ **Your withholding is subject to review by the IRS.**

Step 1: Enter Personal Information

(a) First name and middle initial [redacted] Last name [redacted]

(b) ~~Social security number~~ [redacted] NRA #

Address
In Care Of [redacted]

City or town, state, and ZIP code
Marrietta, Georgia [30067] Non-Domestic Without the United States

▶ **Does your name match the name on your social security card?** If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.

(c) ☐ **Single** or **Married filing separately**
☐ **Married filing jointly** or **Qualifying widow(er)**
☐ **Head of household** (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, when to use the estimator at *www.irs.gov/W4App*, and privacy.

Step 2: Multiple Jobs or Spouse Works

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at *www.irs.gov/W4App* for most accurate withholding for this step (and Steps 3–4); **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . ▶ ☐

TIP: To be accurate, submit a 2022 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependents

If your total income will be $200,000 or less ($400,000 or less if married filing jointly):

Multiply the number of qualifying children under age 17 by $2,000 ▶ $

Multiply the number of other dependents by $500 . . . . ▶ $

Add the amounts above and enter the total here . . . . . 3 $

Step 4 (optional): Other Adjustments

(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . . 4(a) $

(b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . . 4(b) $

(c) Extra withholding. Enter any additional tax you want withheld each **pay period** . . 4(c) $

"EXEMPT" NRA "EXEMPT"

Step 5: Sign Here

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

By [redacted] All Rights Reserved without prejudice

Employee's signature (This form is not valid unless you sign it.) **Date** May 19, 2022

Employers Only

Employer's name and address	First date of employment	Employer identification number (EIN)

Form G-4 (Rev. 05/13/21)

2211004013

STATE OF GEORGIA EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

1a. YOUR FULL NAME [redacted]	1b. ~~YOUR SOCIAL SECURITY NUMBER~~ [redacted] None Tax Payer Identification Number
2a. HOME ADDRESS (Number, Street, or Rural Route) [redacted]	2b. CITY, STATE AND ZIP CODE Marrietta, Georgia [30067]

PLEASE READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING LINES 3 – 8

3. MARITAL STATUS
(If you do not wish to claim an allowance, enter "0" in the brackets beside your marital status.)

A. Single: Enter 0 or 1 ..... [ ]
B. Married Filing Joint, both spouses working:
Enter 0 or 1 ..... [ ]
C. Married Filing Joint, one spouse working:
Enter 0 or 1 or 2 ..... [ ]
D. Married Filing Separate:
Enter 0 or 1 ..... [ ]
E. Head of Household:
Enter 0 or 1 ..... [ ]

4. DEPENDENT ALLOWANCES [ ]

5. ADDITIONAL ALLOWANCES [ ]
(worksheet below must be completed)

6. ADDITIONAL WITHHOLDING $_____

WORKSHEET FOR CALCULATING ADDITIONAL ALLOWANCES
(Must be completed in order to enter an amount on step 5)

1. COMPLETE THIS LINE ONLY IF USING STANDARD DEDUCTION:
Yourself: ☐ Age 65 or over ☐ Blind
Spouse: ☐ Age 65 or over ☐ Blind Number of boxes checked _____ x 1300 ..... $_____
2. ADDITIONAL ALLOWANCES FOR DEDUCTIONS:
A. Federal Estimated Itemized Deductions (If Itemizing Deductions) ..... $_____
B. Georgia Standard Deduction (enter one): Single/Head of Household $4,600
Each Spouse $3,000 $_____
C. Subtract Line B from Line A (If zero or less, enter zero) ..... $_____
D. Allowable Deductions to Federal Adjusted Gross Income ..... $_____
E. Add the Amounts on Lines 1, 2C, and 2D ..... $_____
F. Estimate of Taxable Income not Subject to Withholding ..... $_____
G. Subtract Line F from Line E (if zero or less, stop here) ..... $_____
H. Divide the Amount on Line G by $3,000. Enter total here and on Line 5 above ..... $_____
(This is the maximum number of additional allowances you can claim. If the remainder is over $1,500 round up)

7. LETTER USED (Marital Status A, B, C, D, or E) _____ **TOTAL ALLOWANCES** (Total of Lines 3 - 5) _____
(Employer: The letter indicates the tax tables in Employer's Tax Guide)

8. EXEMPT: (Do not complete Lines 3 - 7 if claiming exempt) **Read the Line 8 instructions on page 2 before completing this section.**
a) I claim exemption from withholding because I incurred no Georgia income tax liability last year **and** I do not expect to have a Georgia income tax liability this year. **Check here** ☑
b) I certify that I am not subject to Georgia withholding because I meet the conditions set forth under the Servicemembers Civil Relief Act as provided on page 2. My state of residence is _____. My spouse's (servicemember) state of residence is _____. The states of residence must be the same to be exempt. **Check here** ☐

I certify under penalty of perjury that I am entitled to the number of withholding allowances or the exemption from withholding status claimed on this Form G-4. Also, I authorize my employer to deduct per pay period the additional amount listed above.

Employee's Signature By [redacted] and Without Prejudice Date May 19, 2022

Employer: Complete Line 9 and mail entire form only if the employee claims over 14 allowances or exempt from withholding.
If necessary, mail form to: Georgia Department of Revenue, Taxpayer Services Division, P.O. Box 105499, Atlanta, GA 30359

9. EMPLOYER'S NAME AND ADDRESS:

EMPLOYER'S FEIN: _____

EMPLOYER'S WH#: _____

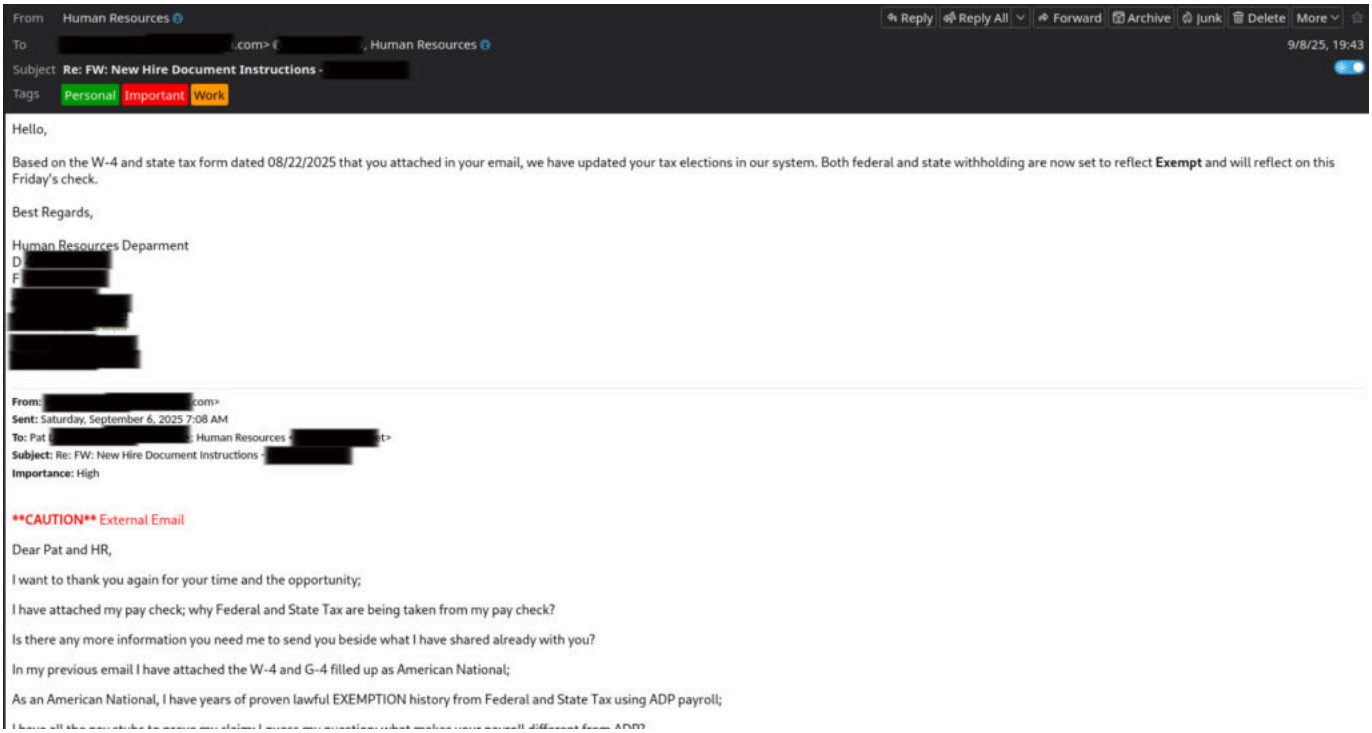
Do not accept forms claiming additional allowances unless the worksheet has been completed. Do not accept forms claiming exempt if numbers are written on Lines 3 - 7.

Employer Two — Corporation B, LLC (2025)

Upon beginning employment with a second employer in 2025, the same process was followed. Updated W-4 and state withholding forms were submitted, completed in the same manner as described above.

On September 25, 2025, the human resources department responded. The communication stated that based on the W-4 and state tax forms submitted, tax elections had been updated in their system. It confirmed that both federal and state withholding were now set to reflect exempt status.

A different employer. A different human resources department. A different payroll system. The same inputs produced the same processing outcome.



From Human Resources
To [redacted].com> ([redacted], Human Resources
Subject Re: FW: New Hire Document Instructions - [redacted]
Tags Personal Important Work
Reply Reply All Forward Archive Junk Delete More
9/8/25, 19:43

Hello,

Based on the W-4 and state tax form dated 08/22/2025 that you attached in your email, we have updated your tax elections in our system. Both federal and state withholding are now set to reflect **Exempt** and will reflect on this Friday's check.

Best Regards,

Human Resources Deparment
D[redacted]
F[redacted]
[redacted]

From: [redacted].com>
Sent: Saturday, September 6, 2025 7:08 AM
To: Pat [redacted]; Human Resources [redacted]t>
Subject: Re: FW: New Hire Document Instructions - [redacted]
Importance: High

****CAUTION**** External Email

Dear Pat and HR,

I want to thank you again for your time and the opportunity;

I have attached my pay check; why Federal and State Tax are being taken from my pay check?

Is there any more information you need me to send you beside what I have shared already with you?

In my previous email I have attached the W-4 and G-4 filled up as American National;

As an American National, I have years of proven lawful EXEMPTION history from Federal and State Tax using ADP payroll;

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Withholding Certificate

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.
Give Form W-4 to your employer.
Your withholding is subject to review by the IRS.

OMB No. 1545-0074

2025

Step 1: Enter Personal Information

(a) First name and middle initial [redacted] | Last name [redacted] | (b) ~~Social security number~~ NIN# [redacted]

Address: In Care Of: [redacted]

City or town, state, and ZIP code: Lawrenceville, Georgia [30044] Non-Domestic Without the United States

Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.

(c)
- ☐ **Single** or **Married filing separately**
- ☐ **Married filing jointly** or **Qualifying surviving spouse**
- ☐ **Head of household** (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

TIP: Consider using the estimator at *www.irs.gov/W4App* to determine the most accurate withholding for the rest of the year if: you are completing this form after the beginning of the year; expect to work only part of the year; or have changes during the year in your marital status, number of jobs for you (and/or your spouse if married filing jointly), dependents, other income (not from jobs), deductions, or credits. Have your most recent pay stub(s) from this year available when using the estimator. At the beginning of next year, use the estimator again to recheck your withholding.

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, and when to use the estimator at *www.irs.gov/W4App*.

Step 2: Multiple Jobs or Spouse Works

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at *www.irs.gov/W4App* for the most accurate withholding for this step (and Steps 3–4). If you or your spouse have self-employment income, use this option; **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is generally more accurate than (b) if pay at the lower paying job is more than half of the pay at the higher paying job. Otherwise, (b) is more accurate . . . . . ☐

Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependent and Other Credits

If your total income will be $200,000 or less ($400,000 or less if married filing jointly):

Multiply the number of qualifying children under age 17 by $2,000 $ _____

Multiply the number of other dependents by $500 . . . . . $ _____

Add the amounts above for qualifying children and other dependents. You may add to this the amount of any other credits. Enter the total here . . . . . 3 $

Step 4 (optional): Other Adjustments

(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . . 4(a) $

(b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . . 4(b) $

(c) Extra withholding. Enter any additional tax you want withheld each **pay period** . . 4(c) $

"EXEMPT" NRA "EXEMPT"

Step 5: Sign Here

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

By: [redacted]

All rights reserved - Without prejudice August 22, 2025

Employee's signature (This form is not valid unless you sign it.) **Date**

Employers Only

Employer's name and address	First date of employment	Employer identification number (EIN)

Form G-4 (Rev. 08/15/24)

2511004015

STATE OF GEORGIA EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

1a. YOUR FULL NAME	1b. ~~YOUR SOCIAL SECURITY NUMBER~~ None Tax Payer Identification Number
[redacted]	[redacted]
2a. HOME ADDRESS (Number, Street, or Rural Route)	2b. CITY, STATE AND ZIP CODE
[redacted]	Lawrenceville Georgia [30044]

PLEASE READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING LINES 3 – 8

3. MARITAL STATUS
Enter letter below on Line 7.

A. Single
B. Married Filing Separate or Married Filing Joint, both spouses working
C. Married Filing Joint, one spouse working
D. Head of Household

4. DEPENDENT ALLOWANCES [ ]

5. GEORGIA ADJUSTMENTS ALLOWANCE [ ]
(See instructions for details. Worksheet below must be completed)

6. ADDITIONAL WITHHOLDING $_____

WORKSHEET FOR CALCULATING ADDITIONAL ALLOWANCES
(Must be completed for step 5)

A. Federal Estimated Itemized Deductions (If Itemizing Deductions) ..... $_____
B. Georgia Standard Deduction (enter one): $_____
   Single/Head of Household $12,000
   Married Filing Joint $24,000
   Married Filing Separate $12,000
C. Subtract Line B from Line A (If zero or less, enter zero) ..... $_____
D. Allowable Georgia Adjustments to Federal Adjusted Gross Income ..... $_____
E. Add the Amounts on Lines C and D ..... $_____
F. Estimate of Taxable Income not Subject to Withholding ..... $_____
G. Subtract Line F from Line E (if zero or less, stop here) ..... $_____
H. Divide the Amount on Line G by $4,000. Enter total here and on Line 5 above ..... _____
(This is the number of Georgia Adjustments Allowances you can claim. If the remainder is over $1,500 round up)

7. LETTER USED (Marital Status A, B, C or D) _____ **TOTAL ALLOWANCES** (Total of Lines 4 - 5) _____
(Employer: The letter indicates the tax tables in Employer's Tax Guide)

8. EXEMPT: (Do not complete Lines 4 - 7 if claiming exempt) **Read the Line 8 instructions on page 2 before completing this section.**
a) I claim exemption from withholding because I incurred no Georgia income tax liability last year **and** I do not expect to have a Georgia income tax liability this year. **Check here** ☑
b) I certify that I am not subject to Georgia withholding because I meet the conditions set forth under the Servicemembers Civil Relief Act as provided on page 2. My state of residence is _____. My spouse's (servicemember) state of residence is _____. The states of residence must be the same to be exempt. **Check here** ☐

I certify under penalty of perjury that I am entitled to the number of withholding allowances or the exemption from withholding status claimed on this Form G-4. Also, I authorize my employer to deduct per pay period the additional amount listed above.

Employee's Signature By: [redacted] Date August 22, 2025

Employer: Complete Line 9 and mail entire form only if the employee claims over 14 allowances or exempt from withholding. If necessary, mail form to: Georgia Department of Revenue, Taxpayer Services Division, P.O. Box 105685, Atlanta, GA 30348-5685

9. EMPLOYER'S NAME AND ADDRESS: **EMPLOYER'S FEIN:** _____

EMPLOYER'S WH#: _____

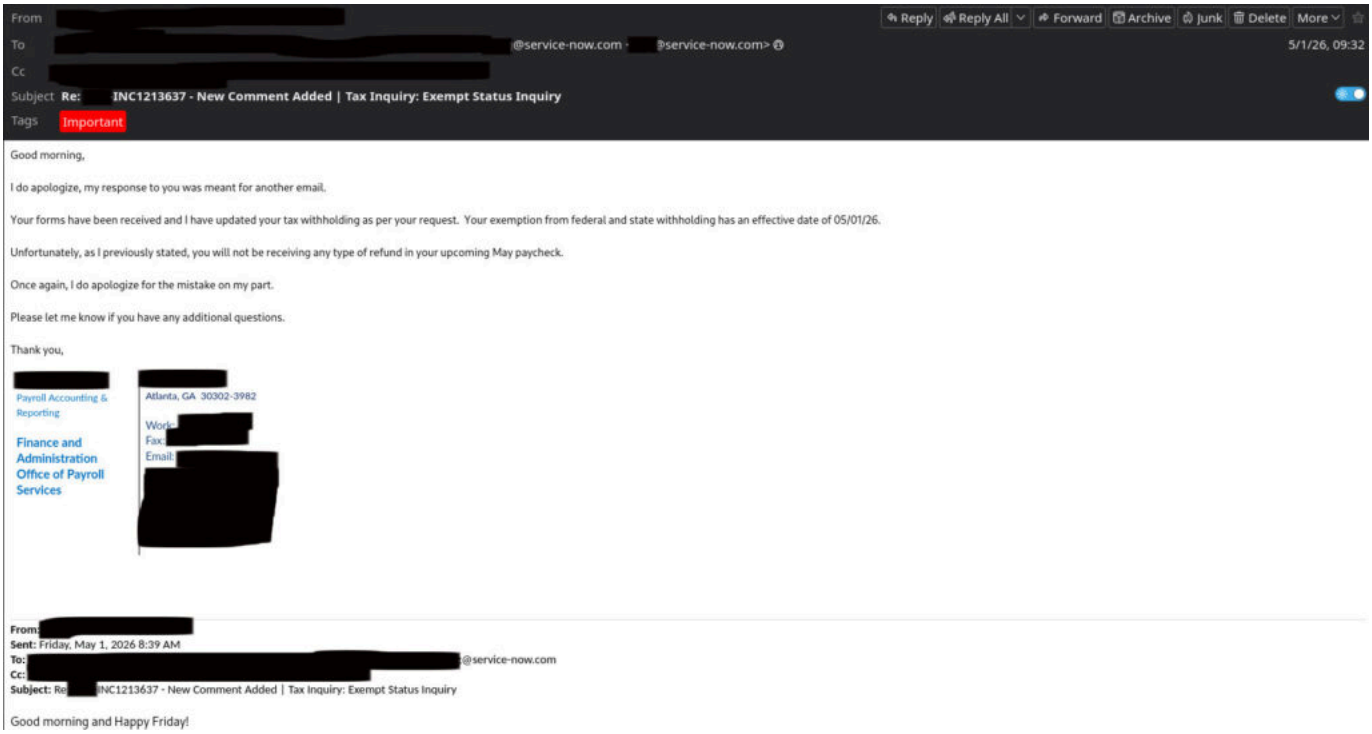
Do not accept forms claiming additional allowances unless the worksheet has been completed. Do not accept forms claiming exempt if numbers are written on Lines 4 - 7.

Employer Three — Corporation C, Inc. 501(c)(3) (2026)

With a third employer — a 501(c)(3) tax-exempt organization — the same process was followed once more. The same forms were submitted with the same configurations.

The payroll record for January 2026 reflects the result. Federal withholding status is listed as Exempt. State withholding status is listed as Exempt. Federal income tax withheld: zero. Georgia state income tax withheld: zero. Social Security and Medicare contributions continue to be deducted as expected.

Three employers. Three separate human resources departments. Three separate payroll systems. Spanning four years. The same foundation, the same inputs, and the same outputs — consistently. It’s mechanical and systematic.



From [redacted]
To [redacted]@service-now.com [redacted]@service-now.com>
Cc [redacted]
Subject Re: INC1213637 - New Comment Added | Tax Inquiry: Exempt Status Inquiry
Tags Important
Reply Reply All Forward Archive Junk Delete More
5/1/26, 09:32

Good morning,

I do apologize, my response to you was meant for another email.

Your forms have been received and I have updated your tax withholding as per your request. Your exemption from federal and state withholding has an effective date of 05/01/26.

Unfortunately, as I previously stated, you will not be receiving any type of refund in your upcoming May paycheck.

Once again, I do apologize for the mistake on my part.

Please let me know if you have any additional questions.

Thank you,

[redacted]
Payroll Accounting & Reporting
Finance and Administration
Office of Payroll Services

[redacted]
Atlanta, GA 30302-3982
Work [redacted]
Fax:
Email:
[redacted]

From: [redacted]
Sent: Friday, May 1, 2026 8:39 AM
To: [redacted]@service-now.com
Cc: [redacted]
Subject: Re: [redacted]INC1213637 - New Comment Added | Tax Inquiry: Exempt Status Inquiry

Good morning and Happy Friday!

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Withholding Certificate

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.
Give Form W-4 to your employer.
Your withholding is subject to review by the IRS.

OMB No. 1545-0074

2026

Step 1: Enter Personal Information

(a) First name and middle initial [redacted] | Last name [redacted] | (b) ~~Social security number~~ NINA [redacted]

Address: In Care Of: [redacted]

City or town, state, and ZIP code: Johns Creek, Georgia [30022] Non-Domestic without the United States

Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to *www.ssa.gov*.

(c) ☐ **Single** or **Married filing separately**
☐ **Married filing jointly** or **Qualifying surviving spouse**
☐ **Head of household** (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

Caution: To claim certain credits or deductions on your tax return, you (and/or your spouse if married filing jointly) are required to have a social security number valid for employment. See page 2 for more information.

TIP: Consider using the estimator at *www.irs.gov/W4App* to determine the most accurate withholding for the rest of the year if you: are completing this form after the beginning of the year; expect to work only part of the year; or have changes during the year in your marital status, number of jobs for you (and/or your spouse if married filing jointly), dependents, other income (not from jobs), deductions, or credits. Have your most recent pay stub(s) from this year available when using the estimator. At the beginning of next year, use the estimator again to recheck your withholding.

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, and when to use the estimator at *www.irs.gov/W4App*.

Step 2: Multiple Jobs or Spouse Works

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at *www.irs.gov/W4App* for the most accurate withholding for this step (and Steps 3–4). If you or your spouse have self-employment income, use this option; **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is generally more accurate than Step 2(b) if pay at the lower paying job is more than half of the pay at the higher paying job. Otherwise, Step 2(b) is more accurate . . . . . ☐

Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependent and Other Credits

If your total income will be $200,000 or less ($400,000 or less if married filing jointly):

(a) Multiply the number of qualifying children under age 17 by $2,200 . . . . . **3(a)** $

(b) Multiply the number of other dependents by $500 . . . **3(b)** $

Add the amounts from Steps 3(a) and 3(b), plus the amount for other credits. Enter the total here . . . . . **3** $

Step 4: Other Adjustments

(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . . **4(a)** $

(b) Deductions. Use the Deductions Worksheet on page 4 to determine the amount of deductions you may claim, which will reduce your withholding. (If you skip this line, your withholding will be based on the standard deduction.) Enter the result here . . **4(b)** $

(c) Extra withholding. Enter any additional tax you want withheld each **pay period** . . **4(c)** $

"EXEMPT" NRA "EXEMPT"

Exempt from withholding

I claim exemption from withholding for 2026, and I certify that I meet **both** of the conditions for exemption for 2026. See *Exemption from withholding* on page 2. I understand I will need to submit a new Form W-4 for 2027 . ☐

Step 5: Sign Here

Under penalties of [illegible] the best of my knowledge and belief, is true, correct, and complete.

By: [redacted] © All rights reserved-Without prejudice April 30, 2026

Employee's signature (This form is not valid unless you sign it.) **Date**

Employers Only

Employer's name and address	First date of employment	Employer identification number (EIN)

Form G-4 (Rev. 08/15/24)

2511004015

STATE OF GEORGIA EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

1a. YOUR FULL NAME	1b. YOUR SOCIAL SECURITY NUMBER None Tax Payer Indentification Number
[redacted]	[redacted]
2a. HOME ADDRESS (Number, Street, or Rural Route)	2b. CITY, STATE AND ZIP CODE
[redacted]	Johns Creek, Georgia [30022]

PLEASE READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING LINES 3 – 8

3. MARITAL STATUS
Enter letter below on Line 7.

A. Single
B. Married Filing Separate or Married Filing Joint, both spouses working
C. Married Filing Joint, one spouse working
D. Head of Household

4. DEPENDENT ALLOWANCES [ ]

5. GEORGIA ADJUSTMENTS ALLOWANCE [ ]
(See instructions for details. Worksheet below must be completed)

6. ADDITIONAL WITHHOLDING $_____

WORKSHEET FOR CALCULATING ADDITIONAL ALLOWANCES
(Must be completed for step 5)

A. Federal Estimated Itemized Deductions (If Itemizing Deductions) ..... $_____
B. Georgia Standard Deduction (enter one): $_____
   Single/Head of Household $12,000
   Married Filing Joint $24,000
   Married Filing Separate $12,000
C. Subtract Line B from Line A (If zero or less, enter zero) ..... $_____
D. Allowable Georgia Adjustments to Federal Adjusted Gross Income ..... $_____
E. Add the Amounts on Lines C and D ..... $_____
F. Estimate of Taxable Income not Subject to Withholding ..... $_____
G. Subtract Line F from Line E (if zero or less, stop here) ..... $_____
H. Divide the Amount on Line G by $4,000. Enter total here and on Line 5 above _____
(This is the number of Georgia Adjustments Allowances you can claim. If the remainder is over $1,500 round up)

7. LETTER USED (Marital Status A, B, C or D) _____ **TOTAL ALLOWANCES** (Total of Lines 4 - 5) _____
(Employer: The letter indicates the tax tables in Employer's Tax Guide)

8. EXEMPT: (Do not complete Lines 4 - 7 if claiming exempt) **Read the Line 8 instructions on page 2 before completing this section.**
a) I claim exemption from withholding because I incurred no Georgia income tax liability last year **and** I do not expect to have a Georgia income tax liability this year. **Check here** ☑
b) I certify that I am not subject to Georgia withholding because I meet the conditions set forth under the Servicemembers Civil Relief Act as provided on page 2. My state of residence is _____. My spouse's (servicemember) state of residence is _____. The states of residence must be the same to be exempt. **Check here** ☐

I certify under penalty of perjury that I am entitled to the number of withholding allowances or the exemption from withholding status claimed on this Form G-4. Also, I authorize my employer to deduct per pay period the additional amount listed above.

Employee's Signature By: [redacted] Date April 30, 2026

Employer: Complete Line 9 and mail entire form only if the employee claims over 14 allowances or exempt from withholding. If necessary, mail form to: Georgia Department of Revenue, Taxpayer Services Division, P.O. Box 105685, Atlanta, GA 30348-5685

9. EMPLOYER'S NAME AND ADDRESS:

EMPLOYER'S FEIN: _____

EMPLOYER'S WH#: _____

Do not accept forms claiming additional allowances unless the worksheet has been completed. Do not accept forms claiming exempt if numbers are written on Lines 4 - 7.

The Outputs: Before and After

The most direct evidence of this process is found in the payroll records themselves.

Corporation A, Inc.

Before Status Correction — Aug 2020 to June 2022

Employer: Corporation A, Inc.

Payroll processor: ADP

Weekly Gross pay: $1,881.74

Deductions:

- Social Security Tax: −$116.67
- Medicare Tax: −$27.28
- Federal Income Tax: −$274.90
- Georgia State Income Tax: −$98.91

Net pay: $1,363.98

> *This was the standard configuration — the default output of a system processing a standard set of inputs.*

CO. FILE DEPT. CLOCK NUMBER 030
BUO [redacted] 1

SEQ 000020

[redacted] INC.
COVINGTON GA 30014

Earnings Statement

Period Beginning: 05/28/2022
Period Ending: 06/03/2022
Pay Date: 06/10/2022

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

[redacted]
MARIETTA GA 30067

Earnings	rate	salary/hours	this period	year to date
Regular	1881.74		1,881.74	43,280.02
Holiday		8.00		
Gross Pay			**$1,881.74**	43,280.02

Deductions	Statutory		
Federal Income Tax	-274.90		6,322.70
Social Security Tax	-116.67		2,683.36
Medicare Tax	-27.28		627.56
GA State Income Tax	-98.91		2,274.93
Net Pay	**$1,363.98**		
Net Check	**$1,363.98**		

Your federal taxable wages this period are $1,881.74

Important Notes
BASIS OF PAY: SALARY

Additional Tax Withholding Information
Taxable Marital Status:
GA: Single
Exemptions/Allowances:
GA: 0

TEAR HERE

VERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

[redacted] INC.
COVINGTON GA 30014

BUO
Payroll check number: [redacted]
Pay date: 06/10/2022

Pay to the order of: [redacted]

This amount: ONE THOUSAND THREE HUNDRED SIXTY THREE AND 98/100 DOLLARS $1363.98

ASSISTANCE WITH VERIFICATION AVAILABLE AT 877-423-7243

VOID AFTER 180 DAYS

Wells Fargo Bank, N.A.
171 17th St NW
Atlanta, GA 30363

ADP AUTHORIZED SIGNATURE

[redacted]

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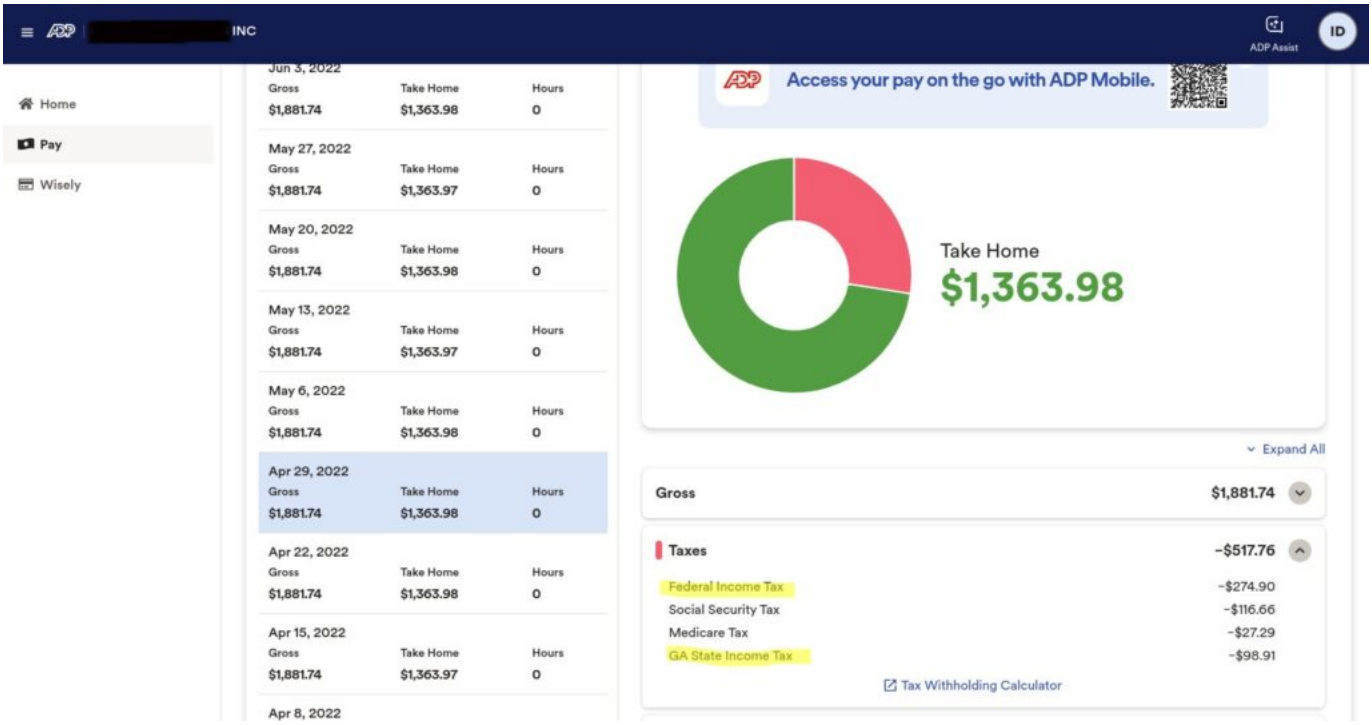

After Status Correction – June 2022 to August 2024

Employer: Corporation A, Inc.

Payroll processor: ADP

Weekly Gross pay: $1,957.01

Deductions:

- Social Security Tax: –$121.34
- Medicare Tax: –$28.37
- Federal Income Tax: –$0.00
- State Income Tax: –$0.00

Net pay: $1,807.30

Last Paycheck from Corporation A

Weekly Gross pay: $2,178.16

Deductions:

- Social Security Tax: −$135.05
- Medicare Tax: −$31.58
- Federal Income Tax: −$0.00
- State Income Tax: −$0.00

Net pay: $2,011.53

> *The only deductions remaining are Social Security and Medicare — contributions that continued in the records presented here.. Federal and state income tax withholding: zero.*

CO. FILE DEPT. CLOCK NUMBER 030
BUO [redacted] [redacted] 1
SEQ [redacted]
[redacted] INC.
COVINGTON GA 30014

Earnings Statement

Period Beginning: 04/15/2023
Period Ending: 04/21/2023
Pay Date: 04/28/2023

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Tax blocked

[redacted]
MARIETTA GA 30067

Earnings	rate	salary/hours	this period	year to date
Regular	1957.01		1,957.01	33,269.17
Gross Pay			**$1,957.01**	33,269.17

Deductions	Statutory		
Social Security Tax		-121.34	2,062.69
Medicare Tax		-28.37	482.40
Net Pay		**$1,807.30**	
Net Check		**$1,807.30**	

Your federal taxable wages this period are $1,957.01

Important Notes
BASIS OF PAY: SALARY

Additional Tax Withholding Information
Taxable Marital Status:
GA: Single
Exemptions/Allowances:
GA: 0,Tax Blocked

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VERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

[redacted] INC.
COVINGTON GA 30014

BUO
Payroll check number: [redacted]
Pay date: 04/28/2023

Pay to the order of: [redacted]

This amount: ONE THOUSAND EIGHT HUNDRED SEVEN AND 30/100 DOLLARS $1807.30

ASSISTANCE WITH VERIFICATION AVAILABLE AT 877-423-7243

VOID AFTER 180 DAYS

Wells Fargo Bank, N.A.
171 17th St NW
Atlanta, GA 30363

ADP AUTHORIZED SIGNATURE

[redacted]

THIS ORIGINAL DOCUMENT HAS A [redacted] ON THE BACK. HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE ENDORSEMENT

CO. FILE DEPT. CLOCK NUMBER 030
BUO [redacted] SEQ [redacted]
[redacted] INC.
COVINGTON GA 30014

Earnings Statement

Period Beginning: 08/10/2024
Period Ending: 08/16/2024
Pay Date: 08/23/2024

[redacted]
MARIETTA GA 30067

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Tax blocked

Earnings	rate	salary/hours	this period	year to date
Regular	2116.51		2,116.51	69,926.89
PTO		8.00		
Retroactive			61.65	61.65
Gross Pay			**$2,178.16**	69,988.54

Deductions	Statutory		
Social Security Tax		-135.05	4,339.29
Medicare Tax		-31.58	1,014.83
Net Pay		**$2,011.53**	
Net Check		**$2,011.53**	

Your federal taxable wages this period are $2,178.16

Important Notes

BASIS OF PAY: SALARY

YOUR SALARY RATE HAS BEEN CHANGED FROM 2,054.86 TO 2,116.51.

Additional Tax Withholding Information

Taxable Marital Status:
GA: Single
Exemptions/Allowances:
GA: 0,Tax Blocked

TEAR HERE

VERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

[redacted] INC.
COVINGTON GA 30014

BUO
Payroll check number: [redacted]
Pay date: 08/23/2024

Pay to the order of: [redacted]

This amount: TWO THOUSAND ELEVEN AND 53/100 DOLLARS $2011.53

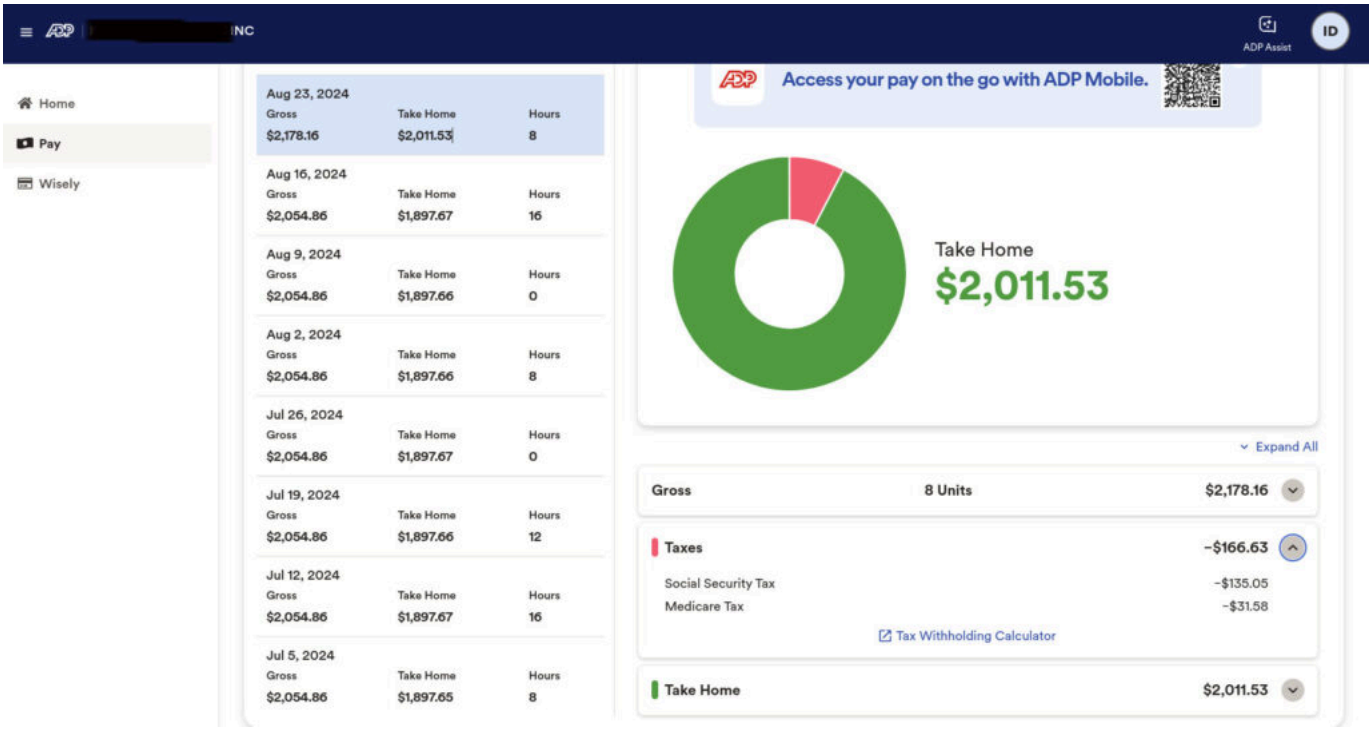
ASSISTANCE WITH VERIFICATION AVAILABLE AT 877-423-7243

VOID AFTER 180 DAYS

Wells Fargo Bank, N.A.
171 17th St NW
Atlanta, GA 30363

ADP AUTHORIZED SIGNATURE

[redacted]



Corporation B, LLC. — September 2025

Gross pay: $1,634.80

Payroll processor: Internal

Deductions:

- **FICA Tax (Social Security):** −$101.36
- **FICA Med (Medicare):** −$23.71
- **Federal Tax:** −$0.00
- **Georgia State Tax:** −$0.00

Net pay: $1,509.73

Corporation B refused to send paychecks by mail and instead required direct deposit. As an alternative, a monthly bank statement with Redemption using "12 U.S.C. §411 — in Lawful

Money” can be sent to the Union Credit Union CEO. ***Note:*** *the first weekly paycheck was not yet processed with Federal and State exemption.*

[redacted] LLC
[redacted]
El Segundo, CA 90245

Employee: [redacted]
SSN:
Check #:
Check Date: 9/5/2025

Federal Filing Status:	Single
State Filing Status:	Single
Net Check Amount:	$1,240.46
EE#:	679721

Client	Work Week	Earnings Code	Hours	*Rate
[redacted] LLC	08/25/2025 - 08/31/2025	HOURLY	40.00	$40.87
[redacted] LLC	08/25/2025 - 08/31/2025	OTIME	0.12	$61.30

Withholdings	Tax	YTD Tax
Federal Taxes		
Federal Tax	$200.01	$200.01
FICA Med	$23.81	$23.81
FICA Tax	$101.81	$101.81
State/Local Taxes		
Georgia	$76.07	$76.07

Deductions	Amount	YTD Ded.

Total Hours:	Gross Wages:	Taxable Gross Wages:	Total Withholding	Total Deductions:	Net Wages:	YTD Taxable Gross Wages:
40.12	$1,642.16	$1,642.16	$401.70	$0.00	$1,240.46	$1,642.16

Direct Deposit Information

Bank Routing	Account Number	Amount
[redacted]		$1,240.46

[redacted] LLC
[redacted]
El Segundo, CA 90245

Employee: [redacted]
SSN:
Check #:
Check Date: 9/26/2025

Federal Filing Status:	Single
State Filing Status:	Single
Net Check Amount:	$1,509.73
EE#:	679721

Client	Work Week	Earnings Code	Hours	*Rate
[redacted] LLC	09/15/2025 - 09/21/2025	HOURLY	40.00	$40.87

Withholdings	Tax	YTD Tax
Federal Taxes		
Federal Tax	$0.00	$200.01
FICA Med	$23.71	$90.93
FICA Tax	$101.36	$388.79
State/Local Taxes		
Georgia	$0.00	$76.07

Deductions	Amount	YTD Ded.

Total Hours:	Gross Wages:	Taxable Gross Wages:	Total Withholding	Total Deductions:	Net Wages:	YTD Taxable Gross Wages:
40.00	$1,634.80	$1,634.80	$125.07	$0.00	$1,509.73	$6,270.84

Direct Deposit Information

Bank Routing	Account Number	Amount
[redacted]		$1,509.73

Corporation C, Inc. 501(c)(3) — May 2026

Gross pay: $5,583.33

Payroll processor: Internal

Deductions:

- Federal OASDI (Social Security): −$342.14
- Federal Medicare: −$80.02
- Federal Withholding: −$0.00
- Georgia Withholding: −$0.00

Net pay: $4,537.84

DA0904

[redacted]

Atlanta, GA 30302

[redacted] 20,911

010456 R3K3T1A

[redacted]

JOHNS CREEK GA 30022

[redacted]

Pay Date: 05/29/2026
Period Ending: 05/31/2026
No. Fed Exempt: 0
No. State Exempt: 0
Tax W/H Status: E
Additional Fed W/H:
Employee ID Number:

EARNINGS

DESCRIPTION	HOURS	CURRENT	YTD
Regular	0.00	5,583.33	27,916.65
Holiday EX	8.00	257.69	773.07
VacationEX	0.00	0.00	257.69
Total:		5,583.33	27,916.65

DEDUCTIONS

DESCRIPTION	CURRENT	YTD
Fed Withhold	0.00	1,294.19
Fed MED/EE	80.02	400.08
Fed OASDI/EE	342.13	1,710.68
GA Withholdi	0.00	0.00
Teachers Ret	335.00	2,121.66
Parking/Tran	65.00	325.00
Total:	822.15	5,851.61
Net Pay:	4,761.18	22,065.04

THIS CHECK CONTAINS MULTIPLE FRAUD DETERRENT SECURITY FEATURES

[redacted]

Atlanta, GA 30302

11-24/1210

Date: 05/29/2026
Check #: [redacted]

Pay Exactly **Four Thousand Seven Hundred Sixty-One and 18/100 -US Dollars **

Amount
$**4,761.18**

TO THE ORDER OF [redacted]

Authorized Signer

WELLS FARGO BANK, N.A.

[redacted]

[redacted]

R3K3T146 010456 146101519131 NNNNN NNNNN NNNNNNNN 000001

[redacted]

ENDORSE HERE

By [redacted]

"All rights reserved" and "Redeemed - 12 U.S.C 411 - in lawful Money"

☐ CHECK HERE IF MOBILE DEPOSIT

DO NOT WRITE, SIGN OR STAMP BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE *

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What the Record Demonstrates

This record does not prove a legal theory. It does not validate a political philosophy. It does not establish that any particular status carries any particular legal consequence.

What it demonstrates is something simpler and more fundamental:

Systems respond to inputs.

When the inputs changed — when forms were completed differently, when identity was presented through a different selection on a standard government form, when withholding was designated as exempt using the exemption provisions printed on the forms themselves — the system processed those inputs accordingly.

The outputs changed not because the system was convinced of anything. Not because it recognized a different jurisdiction. Not because it acknowledged a philosophical framework. The outputs changed because the inputs changed.

This is how administrative systems work. They receive. They classify. They process. They output.

This case study shows: the individual did not fight the system. Did not argue with the system. Did not demand that the system change. The individual simply changed the inputs — consistently, with documented foundation, across multiple employers and multiple years — and observed the results.

🏦 The Banking Dimension

One additional dimension of this record deserves mention.

After status correction, the way compensation was received also changed. Rather than direct deposit into a commercial bank account, compensation was received by physical check. The check was then endorsed with specific language: “All rights reserved and Redeemed — 12 U.S.C. §411 — in Lawful Money.”

This endorsement references the statutory provision regarding the redemption of Federal Reserve Notes in lawful money. Within the framework of this series, it represents one more point of intentional, documented interaction — a conscious choice about how to receive and process the value of one’s labor.

In the author’s observed lawful experience, a credit union must be used rather than a commercial bank, and the author found that member-based credit union institution allows account establishment using alternative identification credentials, including the American State Citizen Credentials issued by The American States Assemblies.

These are operational details. They reflect the practical reality of conducting oneself intentionally across different systems of engagement. They are not presented as universally applicable steps, but as documentation of what occurred in this particular experience.

🗂️ What This Record Is — And What It

Is Not

This record documents one individual’s experience over a defined period of time, supported by verifiable documents.

It is not a guarantee that others will experience identical outcomes. It is not a prescription for action. It is not legal advice. And it is not a claim that the legal subsystem has recognized, validated, or endorsed any particular status or philosophy.

What it is, simply, is a pattern:

Foundation was established. Inputs were changed. Processing occurred. Outputs were observed. Consistency was maintained. And the pattern held — across employers, across years, and across payroll systems.

Whether this pattern reflects a deeper truth about the nature of administrative systems, or whether it reflects something else entirely, is left to the reader’s own discernment.

The record simply shows what happened.

Closing Reflection

There is a moment in every system administrator’s experience when a seemingly complex problem is resolved not through force, not through argument, and not through extraordinary measures — but through the simple, precise correction of an input.

The system was never broken. The output was never random. The configuration was simply set to a default that nobody had questioned.

When the input changed, the output changed.

That observation — quiet, repeatable, and entirely impersonal — may be the most important thing this series has to offer.

Not a battle. Not a victory. Not a revolution.

Just a configuration change. And the patience to observe what follows.

> *This article is not legal advice. It is a documented record of one individual's experience with administrative systems over a defined period. No claim of universal applicability, legal exemption, or institutional recognition is being made. Outcomes described here are specific to the circumstances documented and should not be interpreted as guaranteed or replicable without independent research and personal responsibility.*