Payroll Calculation Sheet Effective 07/01/2025

HEALTH INSURANCE AND OTHER EMPLOYER CHARGES					
CODE		An	nount		
D865P	(Employer HI - Select Benefits)	See	Employer		
D867P	(Employer HI - ASEA)		mployee alth/Life		
D860P	(Employer HI - LTC)	Rate	surance Sheet on		
D866P	(Employer HI - PSEA)	we	F Payroll bsite for		
D902P	(Employer HI - MMP)	curr	ent rates		
D807P	ER Basic Life	•	-		
Plan A	All Other Units	\$	1.43		
Plan B	Units TM, MM, BB, CC, AA, AP	\$	0.29		
D805P	ER Basic ADD, Dep Life, Basic TA	\$	1.05		
UIP	Unemployment	0.	.60%		
D804P	ER Term Leave	1.	.00%		
D879P	ER Cashin Charge	2.	.31%		
D802P	ASEA Legal Trust per pay period	\$4	4.00		
D803P	APEA Legal Trust per month	\$1	2.00		
D810P	CEA Legal Trust per month	\$1	2.00		
D910P	GGU Injury Leave per year	\$8	8.00		
D937P	ER MEBA Pension	12	2.70%		

WORKERS' COMPENSATION					
DEPT	CODE	ER%	DEPT	CODE	ER%
01	D811P	0.99	12	D822P	4.18
02	D812P	0.96	16	D832P	0.72
03	D813P	0.69	18	D823P	0.61
04	D814P	0.44	20	D824P	3.35
05	D815P	0.57	25	D826P	3.74
07	D817P	1.24	26	D833P	4.58
08	D818P	0.57	31	D828P	0.52
09	D819P	2.70	33	D830P	0.57
10	D820P	2.48	41	D831P	0.77
11	D821P	1.69			

C	0.0	
31	BS	
CODE		%
D500 Employee	SBS	6.13
D800P Employer	SBS	6.13
Maximum Gross	\$	176,100.00
Maximum Deduction	\$	10,794.93

RETIREMENT- DEFINED BENEFIT PLAN					
TYPE	CODE	EE%	CODE	ER%	
PERS - A	D512	6.75	D840P	28.33	
PERS - C	D511	6.75	D841P	28.33	
PERS - E	D515	6.75	D842P	28.33	
PERS - F	D513	7.50	D843P	28.33	
PERS - M	D510	6.75	D844P	28.33	
PERS - P	D514	7.50	D845P	28.33	
PERS - D	D516	9.60	D840P	28.33	
TRS	D517	8.65	D846P	12.56	
LEGTRS	D518	8.65			
JRS	D519	7.00	D848P	39.22	

RETIREMENT- DEFINED CONTRIBUTION PLAN					
TYPE	CODE	EE%	CODE	ER%	
All Types	D570	8.00	D950P	5.00	
Occ De	ath & Disabil	ity - Other	D952P	0.24	
Occ D	eath & Disab	ility - F&P	D953P	0.69	
	Retiree Me	dical Plan	D954P	0.86	
F/T HRA D955P		\$94.92 bi-week	dy		
	P/T HRA	D957P	\$1.58 per hour		
Def. Ben. U	nfund. Liab.	D951P	28.33% less ab	ove amts	
TRS	D575	8.00	D960P	7.00	
Oce	c Death & Di	sability - T	D962P	0.08	
	Retiree Me	dical Plan	D964P	0.74	
	F/T HRA	D965P	\$94.92 bi-week	dy	
	P/T HRA	D966P	Contract % of I	F/T rate	
Def. Ben. Uı	nfund. Liab.	D961P	12.56% less abo	ove amts	

MEDICARE				
CODE	%			
MEDIE Employee Medicare	1.45			
MEDIP Employer Medicare	1.45			
Maximum Gross	NO LIMIT			
Maximum Deduction	NO LIMIT			
MEDIE Addt'l EE Medicare	0.90			
On Wages Over \$	200,000.00			

2025 Percentage Method Tables

STANDARD Withholding Rate Schedules					
(Use these if the Form W-4 is from 2019 or earlier, or if the Form W-					
4 is from 20	4 is from 2020 or later and the box in Step 2 of Form W-4 is NOT				
		checked.)			
If the Adjust Wage Amoun		The tentative		of the amount that the Adjusted	
	But less	amount to	Plus this	Annual Wage	
At least	than	withhold is	percentage	exceeds	
Α	В	С	D	E	
	N	Married Filing Jo	intly		
\$0	\$17,100	\$0.00	0%	\$0	
\$17,100	\$40,950	\$0.00	10%	\$17,100	
\$40,950	\$114,050	\$2,385.00	12%	\$40,950	
\$114,050	\$223,800	\$11,157.00	22%	\$114,050	
\$223,800	\$411,700	\$35,302.00	24%	\$223,800	
\$411,700	\$518,150	\$80,398.00	32%	\$411,700	
\$518,150	\$768,700	\$114,462.00	35%	\$518,150	
\$768,700		\$202,154.50	37%	\$768,700	
	Single o	or Married Filing	Separately	40.700/	
Φ0	00.400	#0.00	00/	12.70%	
\$0	\$6,400	\$0.00	0%	\$0	
\$6,400	\$18,325	\$0.00	10%	\$6,400	
\$18,325	\$54,875	\$1,192.50	12%	\$18,325	
\$54,875	\$109,750	\$5,578.50	22%	\$54,875	
\$109,750	\$203,700	\$17,651.00	24%	\$109,750	
\$203,700	\$256,925	\$40,199.00	32%	\$203,700	
\$256,925	\$632,750	\$57,231.00	35%	\$256,925	
\$632,750		\$188,769.75	37%	\$632,750	
Head of Household					
\$0	\$13,900	\$0.00	0%	\$0	
\$13,900	\$30,900	\$0.00	10%	\$13,900	
\$30,900	\$78,750	\$1,700.00	12%	\$30,900	
\$78,750	\$117,250	\$7,442.00	22%	\$78,750	
\$117,250	\$211,200	\$15,912.00	24%	\$117,250	
\$211,200	\$264,400	\$38,460.00	32%	\$211,200	
\$264,400	\$640,250	\$55,484.00	35%	\$264,400	
\$640,250		\$187,031.50	37%	\$640,250	

I	Form W-4, Step 2, Checkbox, Withholding Rate Schedules						
	(Use these if the Form W-4 is from 2020 or later and the box in Step						
	2 of Form W-4 IS checked.)						
Ī							
	If the Adjus	sted Annual					
ļ	Wage Amou	nt (line 2a) is	The tentative				
		But less	amount to	Plus this			
	At least	than	withhold is	percentage	28.33		
	Α	В	С	D	E		
			Married Filing Jo	intly			
	\$0	\$15,000	\$0.00	0%	\$0		
	\$15,000	\$26,925	\$0.00	10%	\$15,000		
	\$26,925	\$63,475	\$1,192.50	12%	\$26,925		
	\$63,475	\$118,350	\$5,578.50	22%	\$63,475		
	\$118,350	\$212,300	\$17,651.00	24%	\$39		
	\$212,300	\$265,525	\$40,199.00	32%	\$212,300		
	\$265,525	\$390,800	\$57,231.00	35%	\$265,525		
	\$390,800		\$101,077.25	37%	\$390,800		
ı		Cinalo	or Marriad Filipa	Caparataly			
ı		Single	or Married Filing	Separately			
	\$0	\$7,500	\$0.00	0%	\$0		
	\$7,500	\$13,463	\$0.00	10%	\$1		
	\$13,463	\$31,738	\$596.25	\$94.92 bi-wee	\$13,463		
	\$31,738	\$59,175	\$2,789.25	22%	\$31,738		
	\$59,175	\$106,150	\$8,825.50	\$1.58 per hou	\$59,175		
	\$106,150	\$132,763	\$20,099.50	28.33% les	\$106,150		
	\$132,763	\$320,675	\$28,615.50	35%	\$132,763		
	\$320,675		\$94,384.88	37%	\$320,675		
					0.74		
	H	Head of House	hold	\$94.92	bi-weekly		
	\$0	\$11,250	\$0.00	0%	\$0		
	\$11,250	\$19,750	\$0.00	10%	\$11,250		
	\$19,750	\$43,675	\$850.00	12%	\$19,750		
	\$43,675	\$62,925	\$3,721.00	22%	\$43,675		
	\$62,925	\$109,900	\$7,956.00	24%	\$62,925		
	\$109,900	\$136,500	\$19,230.00	32%	\$109,900		
	\$136,500	\$324,425	\$27,742.00	35%	\$136,500		
	\$324,425		\$93,515.75	37%	\$324,425		