2021 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement

Copy C for employee's records.
d Control number Corp. Employer use only RH/DPR

Employer's name, address, and ZIP code ACTIVE ENTERPRISE

SOLUTIONS LLC 991 US HWY 22 STE 200 BRIDGEWATER, NJ 08807

Batch #99935

e/f Employee's name, address, and ZIP code

SANTA RABINA 3710 YELLOW STONE ST IRVING, TX 75062

b	Emplo	yer's FED I 26-0245		а	Empl		e's SS/		
1	Wages	s, tips, othe	r comp.	2	Feder	ral	income	tax v	vithheld
		9	5000.00					156	82.22
3	Social	security w	ages	4	Socia	al s	security	tax w	/ithheld
		95	5000.00					58	90.00
5	Medicare wages and tips 95000.00			6	Medic	car	e tax wi	thhel	d
								13	77.50
7	Social	security tip	s	8	Alloc	ate	d tips		
9				10	Depen	ıde	nt care	bene	fits
11	Nonqualified plans		S	12:	a See ir	nstr 	uctionsfo	r box	12
11	Other			12	b				
14	Other			12	С				
				12		<u> </u>			
				13	Stat e	mp.	Ret. plan	3rd p	arty sick pa
15	State	Employer's	state ID no	. 16	State	wa	ages, tip	s, etc	э.
17 State income tax				18	Local	w	ages, tip	s, et	c.
19 Local income tax					20 Locality name				

Wages, tips, other 95000.00 15682.22 Social security wages 95000.00 tax withhera 5890.00 Medicare wages and tips 95000.00 Medicare tax withheld 1377.50 d Control number Dept. Employer use only 000127 RH/DPR 36 Employer's name, address, and ZIP code

ACTIVE ENTERPRISE SOLUTIONS LLC 991 US HWY 22 STE 200 BRIDGEWATER, NJ 08807

b	Employer's FED ID number 26-0245460	a Employee's SSA number XXX-XX-3001
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
e/f	Employee's name address an	d ZIP code

SANTA RABINA 3710 YELLOW STONE ST IRVING, TX 75062

15	State	Employer's	state ID	no . 16	6 State wages, tips, etc.
17	State	income tax		18	8 Local wages, tips, etc.
19	Local	income tax		20	20 Locality name

Federal Filing Copy Wage and Tax Statement OMB Copy B to be filed with employee's Federal Income Tax Retu This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. 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

Gross Pav Reported W-2 Wages

95,000.00 95,000.00

95,000.00 95,000.00

95,000.00 95,000.00

2. Employee Name and Address.

SANTA RABINA 3710 YELLOW STONE ST IRVING, TX 75062

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1 Wages, tips, other comp. 95000.00				2 Federal income tax withheld 15682.22				
3 Social security wages 95000.00				4 Social security tax withheld 5890.00				
5	Medicare	wages and 950	tips 00.00	6 Medica	re tax with	neld 1377.50		
d	Control nu	ımber	Dept.	Corp.	Employer	use only		
"		ımber RH/DPR	Dept.	Corp.	Employer	use only 36		

ACTIVE ENTERPRISE SOLUTIONS LLC 991 US HWY 22 STE 200 BRIDGEWATER, NJ 08807

Employer's FED ID number 26-0245460	a Employee's SSA number XXX-XX-3001						
Social security tips	8 Allocated tips						
	10 Dependent care benefits						
Nonqualified plans	12a						
Other	12b						
	12c						
	12d						
	13 Stat emp. Ret. plan 3rd party sick pay						
	Nonqualified plans						

e/f Employee's name, address and ZIP code

SANTA RABINA 3710 YELLOW STONE ST IRVING, TX 75062

15	State	Employer's	state	ID	no.	16	State	wages,	tips,	etc.
17	State	income tax				18	Local	wages,	tips,	etc.
19	Local	income tax				20	Local	ity nam	е	

State Reference

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax

1	Wages, tips, other o	omp. 00.00	2 Federal income tax withheld 15682.22					
3	Social security wage	es 00.00	4 Social security tax withheld 5890.00					
5	Medicare wages and 950	d tips 00.00	6	Medica	re tax withheld 1377.50			
d	d Control number Dept.			Corp.	Employer use only			
000127 RH/DPR					36			
С	c Employer's name, address, and ZIP code							

NJ 08807

ACTIVE ENTERPRISE SOLUTIONS LLC 991 US HWY 22 STE 200

BRIDGEWATER,

Employer's FED ID number 26-0245460 a Employee's SSA number XXX-XX-3001 Social security tips Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a 12h 14 Other 12c 12d 13 Stat emp. Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code

SANTA RABINA 3710 YELLOW STONE ST IRVING, TX 75062

L							
l	15	State	Employer's	state	ID no.	16	State wages, tips, etc.
L							
Γ	17	State	income tax			18	Local wages, tips, etc.
L							
Γ	19	Local	income tax			20	Locality name
l							

or Local Reference Wage and Tax Statement Copy 2 to be filed with employee's City or Local Inco