Employee Reference Copy Wage and Tax Statement Copy C for employee's records. any adjustments made by your employer d Control number Dept. Corp. Employer use only 0000001218 VMI 001 **BU44** S 22116 Employer's name, address, and ZIP code SCMS ADMINISTRATIVE SERVICES INC 8125 SEDGWICK WAY MEMPHIS, TN 38125 AGENT FOR COGNIZANT e/f Employee's name, address, and ZIP code SHANMUGANATHAN MANIVANNAN 9698 CHERRY TREE DR **APT 208** STRONGSVILLE, OH 44136-2779 Employer's FED ID number a Employee's SSA number 62-1660982 XXX-XX-3471 Wages, tips, other comp. 2 Federal income tax withheld 5460.72 286.34 Social security wages 4 Social security tax withheld 5460.72 338.56 Medicare wages and tips 6 Medicare tax withheld 5460.72 79.18 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 SHANMUGANATHAN MANIVANNAN 12b 14 Other 12c 9698 CHERRY TREE DR **APT 208** 13 Stat emp. Ret. plan 3rd party sick pay STRONGSVILLE, OH 44136-2779 15 State Employer's state ID no. 16 State wages, tips, etc. ОН 52-395348 5460.72 17 State income tax 18 Local wages, tips, etc. 156.90 19 Local income tax 20 Locality name © 2021 ADP, Inc. PAGE 01 OF 01 Fold and Detach Here -Wages, tips, other comp. 2 Federal income tax withheld Wages, tips, other comp. 2 Federal income tax withheld 5460.72 286.34 5460.72 286.34 3 Social security wages 5460.72 Social security wages 5460.72 4 Social security tax withheld 4 Social security tax withheld 338.56 338.56 6 Medicare tax withheld Medicare wages and tips Medicare wages and tips 6 Medicare tax withheld 5460.72 79.18 5460.72 79.18 Employer use only Control number Dept. Corp. d Control number Dept. Corp. Employer use only 0000001218 VMI **BU44** 0000001218 VMI 22116 001 **BU44** 22116 Employer's name, address, and ZIP code c Employer's name, address, and ZIP code SCMS ADMINISTRATIVE SERVICES INC SCMS ADMINISTRATIVE SERVICES INC 8125 SEDGWICK WAY 8125 SEDGWICK WAY MEMPHIS, TN 38125 MEMPHIS, TN 38125 AGENT FOR COGNIZANT AGENT FOR COGNIZANT a Employee's SSA number XXX-XX-3471 Employer's FED ID number Employer's FED ID number a Employee's SSA number 62-1660982 62-1660982 XXX-XX-3471 Social security tips 8 Allocated tips Social security tips 8 Allocated tips 10 Dependent care benefits 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 11 Nonqualified plans 12a 12b 14 Other 12b 14 Other 12c 12c 12d 12d 13 Stat emp. Ret. plan 3rd party sick pay 13 Stat emp. Ret. plan 3rd party sick pay e/f Employee's name, address and ZIP code e/f Employee's name, address and ZIP code SHANMUGANATHAN MANIVANNAN SHANMUGANATHAN MANIVANNAN 9698 CHERRY TREE DR 9698 CHERRY TREE DR **APT 208 APT 208** STRONGSVILLE, OH 44136-2779 STRONGSVILLE, OH 44136-2779 15 State Employer's state ID no. 16 State wages, tips, etc. OH 52-395348 7 5460 15 State Employer's state ID no. 16 State wages, tips, etc. 5460.72 52-395348 OH 5460.72 17 State income tax 17 State income tax 18 Local wages, tips, etc. 18 Local wages, tips, etc. 156.90 156.90 19 Local income tax 20 Locality name 20 Locality name 19 Local income tax Federal Filing Copy OH. State Filing Copy

Wage and Tax

Statement

Copy B to be filed with employee's Federal Income Tax Return.

2021 W-2 and EARNINGS SUMMARY

This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that you may also find helpful. The following reflects your final pay stub, plus

chocce maile by you	ir employer.		
GROSS PAY	5,460.72	SOCIAL SECURITY	338.56
		TAX WITHHELD	
FFD THEONE		BOX 04 OF W-2	
FED. INCOME	286.34	MEDICARE TAX	79.18
TAX WITHHELD		WITHHELD	
BOX 02 OF W-2			
BOX OZ OF W-Z		BOX 06 OF W-2	
STATE INCOME TAX	156.90	SUI/SDI	0.00
BOX 17 OF W-2	130.90		0.00
		BOX 14 OF W-2	
LOCAL INCOME TAX	0.00		
BOX 19 OF W-2			
2011 20 01 11-2			

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

Wage and Tax

Statement

Copy 2 to be filed with employee's State Income Tax Return.

Social Security Number: XXX-XX-3471



1	Wages, tips, other comp. 5460.72 Social security wages 5460.72		2 Federa	l income tax withheld 286.34
3			4 Social security tax withheld 338.56	
5	Medicare wages a		6 Medica	are tax withheld 79.18
d oc	Control number 000001218 VMI	Dept. 001	Corp. BU44	Employer use only A 22116

Employer's name, address, and ZIP code

SCMS ADMINISTRATIVE SERVICES INC 8125 SEDGWICK WAY MEMPHIS, TN 38125

AGENT FOR COGNIZANT

ь	Employer's FED ID number 62-1660982	a Employee's SSA number XXX-XX-3471	
7	Social security tips	8 Allocated tips	
9		10 Dependent care benefits	
11	Nonqualified plans	12a	
14 Other	Other	12b	
		12c	
		12d	
		13 Stat emp. Ret. plan 3rd party sick	

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

SHANMUGANATHAN MANIVANNAN 9698 CHERRY TREE DR **APT 208** STRONGSVILLE, OH 44136-2779

15 State Employer's state ID no. OH 52-395348 7	16 State wages, tips, etc. 5460.72	
17 State income tax 156.90	18 Local wages, tips, etc.	
19 Local income tax	20 Locality name	

City or Local Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's City or Local Income Tax Return