2021 W-2 and EARNINGS SUMMARY



Employee Reference Copy Wage and Tax Statement

Copy C for employee's records.

d Control number Dept. 000345 SANF/VYX 000100

Employer use only

Employer's name, address, and ZIP code

VIBRANT AMERICA LLC 1021 HOWARD AVE STE B SAN CARLOS CA 94070-4034

Batch #01684

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

VIGNESH RAM KUMAR RAJENDRAN 2211 VILLAGE CT., APT 3 **BELMONT CA 94002**

b	Emplo	yer's FED I	D number	а	Emplo	оуе	e's SSA	numb	er
		45-4586	328			X	xx-xx	-1297	7
1	Wages	s, tips, othe	r comp.	2	Feder	al	income	tax wit	hheld
		33	3995.09					407	2.75
3	Social	security w	ages	4	Socia	Is	ecurity	tax with	nheld
5	Medica	are wages	and tips	6	Medic	are	tax wit	thheld	
7	Social	security tip	os	8	Alloca	ited	d tips		
9				10	Depen	deı	nt care	benefits	5
11	Nonqu	alified plan	S			str	uctionsfo	r box 12	
1/	Other			121		<u> </u>			
'	Other	407.9	4 SDI	120					
		407.5	4 301	120	•	<u> </u>			
				13	Stat er	np	Ret. plan	3rd part	y sick pay
15	State	Employer's	state ID no.	16	State	wa	ges, tip	s, etc.	
(CA	034-005	4 6					3399	5.09
17	State	income tax		18	Local	wa	ages, tip	s, etc.	
		1	1713.08						
19	Local	income tax		20	Locali	ity	name		

Wages, tips, other comp. Federal income tax withheld 33995.09 Social security wages Medicare wages and tips 6 Medicare tax withheld Employer use only 000345 SANF/VYX 000100 Т Employer's name, address, and ZIP code

VIBRANT AMERICA LLC 1021 HOWARD AVE STE B SAN CARLOS CA 94070-4034

b	Employer's FED ID number 45-4586328	a Employee's SSA number XXX-XX-1297
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12
14	Other	12b
	407.94 SDI	12c
		12d
		13 Stat emp Ret. plan 3rd party sick pay
e/f	Employee's name, address ar	id ZIP code

VIGNESH RAM KUMAR RAJENDRAN

2211 VILLAGE CT., APT 3 **BELMONT CA 94002**

15 State	Employer's state ID no.	16 State wages, tips, etc.
CA	034-0054 6	33995.09
17 State	income tax	18 Local wages, tips, etc.
	1713.08	
19 Local	income tax	20 Locality name
	Fodoral Fili	ina Conv

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

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	CA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	33,995.09	33,995.09	33,995.09	33,995.09
Less Exempt Wages	N/A	33,995.09	33,995.09	N/A
Reported W-2 Wages	33,995.09	0.00	0.00	33,995.09

2. Employee Name and Address.

VIGNESH RAM KUMAR RAJENDRAN 2211 VILLAGE CT., APT 3 **BELMONT CA 94002**

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1 Wages, tips, other comp. 33995.09	2 Federal income tax withheld 4072.75	1 Wages, tips, other comp. 33995.09
3 Social security wages	4 Social security tax withheld	3 Social security wages
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips
d Control number Dept.	Corp. Employer use only	d Control number Dept.
000345 SANF/VYX 000100	T 101	000345 SANF/VYX 00010
c Employer's name, address, ar	nd ZIP code	c Employer's name, address,
	CA LLC AVE STE B CA 94070-4034	VIBRANT AMER 1021 HOWARD SAN CARLOS
b Employer's FED ID number 45-4586328 7 Social security tips	a Employee's SSA number XXX-XX-1297 8 Allocated tips	b Employer's FED ID number
9	10 Dependent care benefits	9
11 Nonqualified plans	12a	11 Nonqualified plans
14 Other	12b	14 Other
407.94 CA SDI	12c	407.94 CA SDI
407.94 CA 3DI	12d	407.94 CA 3DI
	13 Stat emp. Ret. plan 3rd party sick pay	
e/f Employee's name, address ar	nd ZIP code	e/f Employee's name, address a
VIGNESH RAM KUMAR	R RAJENDRAN	VIGNESH RAM KUMA
2211 VILLAGE CT., A	PT 3	2211 VILLAGE CT.,
BELMONT CA 94002	-	BELMONT CA 94002
15 State Employer's state ID no. CA 034-0054 6	16 State wages, tips, etc. 33995.09	15 State Employer's state ID no 034-0054 6
17 State income tax	18 Local wages, tips, etc.	17 State income tax
1713.08	20 Legality name	1713.08 19 Local income tax
19 Local income tax	20 Locality name	19 Local income tax
CA. State Reward Wage at Statemer Copy 2 to be filed with employee's State	nd Tax 2021	CA.State F Wage a Staten Copy 2 to be filed with employee's Sta

1 Wages, tips, other comp. 33995.09	2 Federal income tax withheld 4072.75
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept.	Corp. Employer use only
000345 SANF/VYX 000100 c Employer's name, address, a	· · · · · · · · · · · · · · · · · · ·
SAN CARLOS	
b Employer's FED ID number	a Employee's SSA number
45-4586328	1
45-4586328 7 Social security tips	XXX-XX-1297 8 Allocated tips
7 Social security tips	XXX-XX-1297
7 Social security tips	XXX-XX-1297 8 Allocated tips
7 Social security tips 9 11 Nonqualified plans	8 Allocated tips 10 Dependent care benefits
7 Social security tips 9 11 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a
7 Social security tips 9 11 Nonqualified plans 14 Other	8 Allocated tips 10 Dependent care benefits 12a 12b
7 Social security tips 9 11 Nonqualified plans 14 Other	8 Allocated tips 10 Dependent care benefits 12a 12b 12c

18 Local wages, tips, etc.

20 Locality name

CA.State Filing Copy

Statement

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

Wage and Tax