2021 W-2 and EARNINGS SUMMARY (AD)

Employee Ref Wage al Copy C for employee's records. d Control number Dept. 000007 KW/HGS c Employer's name, address, a IT OPENDOORS 5830 GRANITE PLANO, TX 750	nent 2021 Corp. Employer use only 12 Ind ZIP code 5 LLC PARKWAY 100-351	This blue section is your I information on the genera includes instructions and	ation of your W-2	2 statement. T		= = = = = = = = = = = = = = = = = = = =
		1. Your Gross Pay was adjus	sted as follows to	produce your W	/-2 Statement.	
The state of the same	Batch #93308	Wag	ges, Tips, other	Social Security	Medicare	
e/f Employee's name, address, a SHRUTHI KOORA	and ZIP code		npensation 1 of W-2	Wages Box 3 of W-2	Wages Box 5 of W-2	
1004 GREEN PINE B	BLVD	Gross Pay	9,168.00	9,168.00	9,168.00	
APT A2	L EL 22400	Reported W-2 Wages	9,168.00	9,168.00		
b Employer's FED ID number	a Employee's SSA number					
85-1017701 1 Wages, tips, other comp. 9168.00	XXX-XX-1953 2 Federal income tax withheld 848.21					
3 Social security wages 9168.00	4 Social security tax withheld 568.42					
5 Medicare wages and tips	6 Medicare tax withheld					
9168.00 7 Social security tips	8 Allocated tips					
9	10 Dependent care benefits	2. Employee Name and Ad	dress.			
11 Nonqualified plans	12a See instructions for box 12					
	12b	SHRUTHI K		LVD		
14 Other	12c 12d	1004 GREE APT A2	N PINE B	LVD		
	13 Stat emp. Ret. plan 3rd party sick pay	WEST PAL	M BEACH	, FL 334	09	
15 State Employer's state ID no	o. 16 State wages, tips, etc.					
17 State income tax	18 Local wages, tips, etc.					
19 Local income tax	20 Locality name	© 2021 ADP, Inc.				
		- Fold and Del	tach Here —			
1 Wassa tips other comp	2 Federal income tax withheld	1 Wages, tips, other comp.	2 Federal income t	av withheld	1 Wages, tips, other comp.	2 Federal income tax withheld
1 Wages, tips, other comp. 9168.00	848.21	9168.00	Z Tederar medine i	848.21	9168.00	848.21
3 Social security wages 9168.00	4 Social security tax withheld 568.42	3 Social security wages 9168.00	4 Social security t	ax withheld 568.42	3 Social security wages 9168.00	4 Social security tax withheld 568.42
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax wit	thheld	5 Medicare wages and tips	6 Medicare tax withheld
9168.00 d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Emplo	132.94 yer use only	9168.00 d Control number Dept.	Corp. Employer use only
000007 KW/HG8	12	000007 KW/HG8		12	000007 KW/HG8	12
e Employer's name, address, IT OPENDOOR! 5830 GRANITE PLANO, TX 750	S LLC PARKWAY 100-351	c Employer's name, address, a IT OPENDOORS 5830 GRANITE PLANO, TX 750	PARKWAY	100-351	c Employer's name, address, IT OPENDOOR 5830 GRANITE PLANO, TX 75	S LLC PARKWAY 100-351
b Employer's FED ID number	a Employee's SSA number	b Employer's FED ID number	a Employee's S	SA number	b Employer's FED ID number	er a Employee's SSA number
85-1017701	XXX-XX-1953	85-1017701 7 Social security tips	8 Allocated tips	XX-1953	85-1017701	XXX-XX-1953
7 Social security tips	8 Allocated tips		· ·		7 Social security tips	8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent ca	re benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a		11 Nonqualified plans	12a
14 Other	12b	14 Other	12b		14 Other	12b
	12c		12c		1	12c
	12d		12d			12d
	13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. p	lan 3rd party sick pa	У	13 Stat emp. Ret. plan 3rd party sick pa
e/I Employee's name, address a SHRUTHI KOORA 1004 GREEN PINE E APT A2 WEST PALM BEACH	BLVD	e/f Employee's name, address SHRUTHI KOORA 1004 GREEN PINE APT A2 WEST PALM BEAC	BLVD	9	e/I Employee's name, add SHRUTHI KOOR/ 1004 GREEN PIN APT A2 WEST PALM BE	NE BLVD
15 State Employer's state ID no	The second secon	15 State Employer's state ID			73	te ID no. 16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.	17 State income tax	18 Local wage		17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality na	ime	19 Local income tax	20 Locality name
Federal F	iling Copy and Tax 2021	State R	leference C and Tax	2021	W-2 W	ocal Reference Copy age and Tax 2021 Statement DMR NO. 1645-00

2021 W-2 and EARNINGS SUMMARY



nd Tax	20)21
Corp.		er use only 208
		102316
	ie	
TER 3467		
3467	oyee's SS/	
a Emplo	XXX-X	
a Emplo	XXX-X	X-1953
	nd Tax nent Corp. Ind ZIP cod MENT DE #32 A 1522 Band ZIP cod	Corp. Employ

5 Medicare wages and tips 71175.99

11 Nonqualified plans

17 State income tax

14 Other

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.						
1. 1001 0.000 129 110 0.5	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	FL. State Wages, Tips, Etc. Box 16 of W-2		
Gross Pay Less Other Cafe 125 Reported W-2 Wages	74,375.07 3,199.08 71,175.99	74,375.07 3,199.08 71,175.99	74,375.07 3,199.08 71,175.99			

2. Employee Name and Address.

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1032.05

7251.75

12a See instructions for box 12

20 Locality name

DD 12b

SHRUTHI KOORA 4591 SANDY COVE TER LAKE WORTH FL 33467

1 Wages, tips, other cor 71175	mp. 5.99	2 Federa	l income t	ax withheld 7772.95
3 Social security wages 71175	5.99	4 Social	security to	x withheld 4412.91
5 Medicare wages and t 71175	ips 5.99	6 Medica	re tax wit	hheld 1032.05
d Control number	Dept	Corp.	Employ	er use only
020651 PITT/81S C	C0016		Α	208

SDLC MANAGEMENT INC ONE PPG PLACE #3200 PITTSBURGH PA 15222

b	Employer's FED ID number 20-1825615	a Emplo	yee's SS XXX-)	X number	
7	Social security tips	8 Alloca	ted tips		
g		10 Dependent care benefits			
11	Nonqualified plans	12a See i	nstructio	ns for box 12 7251 . 75	
14	Other	12b			
		12c			
		12d	The last		
		13 Stat em	Ret plan	3rd party sick pay	

SHRUTHI KOORA 4591 SANDY COVE TER LAKE WORTH FL 33467

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

Federal Filing Copy W-2 Wage and Tax 2021
Statement
Opy B to be filed with employee's Federal Income Tax Federal

1	Wages, tips, other of	2 Federa	al income t	ax withheld 7772.95	
3	Social security wag	4 Social security tax withheld			
5	Medicare wages an 711	6 Medic	are tax wit	hheld 1032.05	
d	Control number	Dept	Corp.	Employ	er use only
020651 PITT/81S CC0016				A	208

SDLC MANAGEMENT INC ONE PPG PLACE #3200 PITTSBURGH PA 15222

b	Employer's FED ID number 20-1825615	a Employee's SSA number XXX-XX-1953		
7	Social security tips	8 Allocated tips		
9		10 Dependent care benefits		
11	Nonqualified plans	12a DD ₁ 7251.75		
14	Other	12b		
		12c		
		12d		
		13 Stat emp. Ret. plan 3rd party sick pay		
e/	Employee's name, address	and ZIP code		
S	HRUTHI KOORA			

4591 SANDY COVE TER LAKE WORTH FL 33467

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

FL.State Reference Copy
W-2 Wage and Tax 20
Statement
Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other co	omp. '5.99	2	Federal	income	tax withheld 7772.95
3 Social security wages 71175.99			4	Social	security t	tax withheld 4412.91
5 Medicare wages and tips 71175.99			6	Medica	re tax wi	thheld 1032.05
d	Control number	Dept	Г	Corp.	Empl	oyer use only
020651 PITT/81S CC0016			1		A	208

SDLC MANAGEMENT INC ONE PPG PLACE #3200 PITTSBURGH PA 15222

8 Allocated tips
10 Dependent care benefits
12a DD 7251.75
12b
12c
12d
13 Stat emp. Ret. plan 3rd party sick pa

4591 SANDY COVE TER LAKE WORTH FL 33467

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 Locality name

FL.State Filing Copy

2 Wage and Tax

Statement Statement

2021 W-2 and EARNINGS SUMMARY

ER

W-2 W	Staten	I'M I M	2021 MB No. 1545-0008
d Control number 000130 DALL/J7L	Dept	Corp.	Employer use only T 45

c Employer's name, address, and ZIP cod ABILITY COMMERCE INC 1300 PARK OF COMMERCE BL DELRAY BEACH FL 33445-9616

Batch #03230

e/f Employee's name, address, and ZIP code SUMAN SHIVA 4591 SANDY COVE TER LAKE WORTH FL 33467

b Emplo	36 - 4334124	a Employee's SSA number XXX-XX-2979	
1 Wage	es, tips, other comp. 92499.83	2 Federal income tax withhe 9378.5	
3 Socia	I security wages 98757.06	4 Social security tax withhe	
5 Medic	gare wages and tips 98757.06	6 Medicare tax withheld 1431.	98
7 Socia	l security tips	8 Allocated tips	
9		10 Dependent care benefits	
11 Nonq	ualified plans	12a See instructions for box 12 D 6257.23 12b W 1000.09	
14 Other		12c DD 11512.20	
		13 Stat emp. Ret. plan 3rd party si	ck pa
15 State FL	Employer's state ID n	io. 16 State wages, tips, etc.	
17 State	income tax	18 Local wages, tips, etc.	
19 Local	income tax	20 Locality name	

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. Medicare Wages Box 5 of W-2 FL. State Wages, Wages, Tips, other Compensation Social Security Tips, Etc. Box 16 of W-2 Wages Box 3 of W-2 Compensatio Box 1 of W-2 104,288.16 104,288.16 104,288.16 Gross Pay Less 401(k) (D-Box 12) Less Other Cafe 125 6,257.23 N/A 4,531.02 4,531.02 4,531.02

1.000.08

92,499.83

1,000.08

98,757.06

1,000.08

98,757.06

2. Employee Name and Address.

Less Cafe 125 HSA (W-Box 12)

Reported W-2 Wages

SUMAN SHIVA 4591 SANDY COVE TER LAKE WORTH FL 33467

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1	Wages, tips, other comp. 92499.83			Federa	l income tax withheld 9378.56	
3	3 Social security wages 98757.06			4 Social security tax withheld 6122.94		
5					are tax withheld 1431.98	
d 00	Control number 00130 DALL/J7L	Dept. DEVTCC		Corp.	Employer use only T 45	

ployer's name, address, and ZIP cod ABILITY COMMERCE INC 1300 PARK OF COMMERCE BL DELRAY BEACH FL 33445-9616

b Employer's 36 -	FED ID number 4334124	a Employee	e's SSA number (X-XX-2979
7 Social secu	rity tips	8 Allocated tips	
9		10 Depender	nt care benefits
11 Nonqualifie	d plans	12a See inst	ructions for box 12 6257.23
14 Other		12b W	1000.08
		12c DD	11512.26
		12d	
		13 Stat emp. R	et. plan 3rd party sick pay

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

SUMAN SHIVA 4591 SANDY COVE TER LAKE WORTH FL 33467

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

Federal Filing Copy W-2 Wage and Tax 2021
Statement
Copy B to be filed with employee's Federal Income Tax Wellurk. 1545-0008

1	Wages, tips, other comp. 92499.83		2	Federa	l income	9378.56		
3	3 Social security wages 98757.06			4 Social security tax withheld 6122.94				
5	Medicare wages and tips 98757.06		Medicare wages and tips 98757.06	s and tips 98757.06		6 Medicare tax withheld 1431.98		
d 00	Control number 00130 DALL/J7L	Dept. DEVTCC		Corp.	Emplo T	oyer use only 45		
c	Employer's name,			ZIP cod	ie			

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ABILITY COMMERCE INC 1300 PARK OF COMMERCE BL DELRAY BEACH FL 33445-9616

b	Employer's FED ID number 36-4334124	a Employee's SSA number XXX-XX-2979
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a D 6257.23
14	Other	12b W 1000.08
		12c DD 11512.26
		12d
		13 Stat emp. Ret. plan 3rd party sick pay

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

SUMAN SHIVA 4591 SANDY COVE TER LAKE WORTH FL 33467

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 Locality name

FL.State Reference Copy W-2 Wage and Tax 2021
Statement
Copy 2 to be filed with employee's State Income Tax Refun. 1545-0008

1	Wages, tips, other comp. 92499.83		2	Federal	income t	9378.56
3 Social security wages 98757.06		4	Social s	security t	ax withheld 6122.94	
5	5 Medicare wages and tips 98757.06		6	Medica	re tax wit	1431.98
d	Control number	Dept.	T	Corp.	Empl	oyer use only
0	00130 DALL/J7L	DEVTCC	1		T	45

Employer's name, address, and ZIP code ABILITY COMMERCE INC 1300 PARK OF COMMERCE BL DELRAY BEACH FL 33445-9616

ь	Employer's FED ID number 36-4334124	a Employe	e's SSA XX-XX	
7	Social security tips	8 Allocate	d tips	
9		10 Depende	ent care t	penefits
11	Nonqualified plans	12a D	6	257.23
14	4 Other	12b W		1000.08
		12c DD	1	1512.26
		12d		
		13 Stat em	p. Ret. plan	3rd party sick pa

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

SUMAN SHIVA 4591 SANDY COVE TER LAKE WORTH FL 33467

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

FL.State Filing Copy 2 Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.