2021 W-2 and EARNINGS SUMMARY

This Summary is included with your W-2 to help describe portions in more detail. The reverse side includes information that will also be helpful.

Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, Other Compensation	Social Security Wages	Medicare Wages
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
GROSS PAY	37,064.36	37,064.36	37,064.36
DENBTAXRET	-37.46	-37.46	-37.46
DEN BTAX	-337.14	-337.14	-337.14
HCFSA	-1,125.00	-1,125.00	-1,125.00
MEDBTRetro	-247.91	-247.91	-247.91
MED BTAX	-2,231.19	-2,231.19	-2,231.19
VISNBT Ret	-9.96	-9.96	-9.96
VisionBTX	-89.64	-89.64	-89.64
401K	-766.48		
W-2 WAGES	32,219.58	32,986.06	32,986.06

VINOD KUMAR BOLLOLLI APT # L

Social Security Number: XXX-XX-8370

2 Federal income tax withheld

4255.10

400 GOLDEN HORSESHOE CIRCLE MORRISVILLE, NC 27560

Wages, tips, other comp

32219.58

PAGE 01 OF 02

Wages, tips, other comp

32219.58

Federal income tax withheld

4255.10

NC	601079367			-	32219.5	8				
	income tax		18 Local v							
19 Local	income tax	85.00	20 Localit	tv name				m(C)	2021 AD	D Inc
								20	2021 AD	, IIIC
1 Wage	s, tips, other o	comn	2 Federa	al income	e tax withl	neld	1	Wane	s, tips, o	other
, mage		19.58	Z TOGOTO		4255.1		Ľ	· · · · ·	5, tip5, (32
3 Socia	l security wag 329	es 86.06	4 Social	security	tax withh 2045.1		3	Socia	l securi	329
5 Medic	are wages an 329	d tips 86.06	6 Medica	are tax w	ithheld 478.3	0	5	Medic	are wag	ges ai
d Contro 71340483	ol number 27 WDN	Dept. 5GSSVC	Corp.	Emplo	oyer use o	only 0372	d 71:		ol numb 27 WDN	
c Empl	oyer's name,	address, a	nd ZIP cod	de			С	Emplo	yer's n	ame,
ELE	DIT SUISS VEN MAD / YORK,	ISON A	VENUE	USA L	.LC			ELE\	DIT S VEN M V YOR	MAD
b Emplo	yer's FED ID 81-384538	number 32	a Emplo	yee's SS XXX-	A numbe	r 0	b	Emplo	oyer's F 81-3	
	security tips		8 Alloca				7	Socia	l securi	
9			10 Depen	dent car	e benefits	5	9			
11 Nonqu	alified plans		12a See ir D	nstructio	ns for box 766.		11	Nonq	ualified	plans
14 Other			^{12b} DD		12024.	.35	14	Other		
			12c							
				Dat alaa	2-4	al nav				
			13 Stat emp	X	ord party si	ск рау				
e/f Emplo	yee's name, a	address an	d ZIP cod	е			e/f	Emplo	oyee's n	iame,
400 APT	D KUMAF GOLDEN # L RISVILLE,	HORSES	-	IRCLE	≣			400 APT	D KU GOLD # L RISVI	EN
				41			45			
NC	Employer's s 601079367	tate ID no.	16 State v		ps, etc. 32219. 5	8		NC	Employ 60107	79367
17 State	income tax 14	85.00	18 Local	wages, t	ips, etc.		17	State	income	tax 14
19 Local	income tax		20 Locali	y name			19	Local	income	tax
	Federal	Filing	Сору						NC.	Sta
W -3	2 "	/age ar Stateme	nd Tax	2	021		V	N-	2	١
				_	3 No. 1545-					

Employee

Control number

7134048327 WDN

APT # L

Reference

Corp.

Wage and Tax Statement

5GSSVC

Employer's name, address, and ZIP code CREDIT SUISSE SERVICES USA LLC

ELEVEN MADISON AVENUE NEW YORK, NY 10010

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

MORRISVILLE, NC 27560

32219.58

32986.06

32986.06

Employer's FED ID number 81-3845382

Wages, tips, other comp.

Social security wages

Social security tips

11 Nonqualified plans

14 Other

Medicare wages and tips

400 GOLDEN HORSESHOE CIRCLE

Copy

a Employee's SSA number XXX-XX-8370

6 Medicare tax withheld

10 Dependent care benefits 12a See instructions for box 12 766.48

13 Stat emp. Ret. plan 3rd party sick pay

8 Allocated tips

12b DD

12d

15 State Employer's state ID no. 16 State wages, tips, etc.

Federal income tax withheld

Social security tax withheld

4255.10

2045.14

478.30

12024.35

Employer use only

10372

3	Social security was	_{jes} 186.06	4 Social security tax withheld 2045.14				
5	Medicare wages an 329	d tips 1 86.06	6 Medicare tax withheld 478.30				
d 71	Control number 34048327 WDN	Dept. 5GSSVC	Corp.	Employer use only 10372			
С	Employer's name, a	iddress, ai	nd ZIP cod	e			
	ELEVEN MADI NEW YORK, I						
b	Employer's FED ID 81-38453	number 82	a Employee's SSA number XXX-XX-8370				
7	Social security tips		8 Allocated tips				
9	10 Dependent care benefits						
11	Nonqualified plans		12a D	766.48			
14	4 Other		12b nn	12024.35			
	Other		טט	12024.33			
	Other		12c	12024.33			
	Other		טט	12024.33			
	Other		12c	Ret. plan 3rd party sick pay			
e/f	Employee's name,	address ai	12c 12d 13 Stat emp	Ret. plan 3rd party sick pay			
e/f		R BOLL HORSE	12d 13 Stat emp nd ZIP code	Ret. plan 3rd party sick pay X e			
	Employee's name, VINOD KUMAI 400 GOLDEN APT # L MORRISVILLE, State Employer's s NC 601079367	R BOLL HORSE	12c 12d 13 Stat emp od ZIP code. OLLI SHOE C	Ret. plan 3rd party sick pay X e			

. 1485.00

NC. State Reference

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

Wage and Tax

Statement

18 Local wages, tips, etc.

Copy

20 Locality name

3 Social security wages 32986.06		4 Social security tax withheld 2045.14		
5 Medicare wages and 32986	6 Medicare tax withheld 478.30			
d Control number Dept. 7134048327 WDN 5GSSVC		Corp.	Employ	er use only 10372
c Employer's name, add	dress, ar	nd ZIP cod	le	
CREDIT SUISSE SERVICES USA LLC ELEVEN MADISON AVENUE NEW YORK, NY 10010				
b Employer's FED ID no 81-3845382		a Emplo	yee's SSA XXX-X	N number (X-8370
7 Social security tips		8 Alloca	ted tips	
9		10 Dependent care benefits		
11 Nonqualified plans		12a D		766.48
14 Other				766.48 12024.35
		D 12b DD 12c		
		D 12b DD		
14 Other		D 12b DD 12c 12d 13 Stat em	X	
		D 12b DD 12c 12d 13 Stat em	X	12024.35
14 Other	dress ar BOLL(DRSES	D 12b DD 12c 12d 13 Stat em	e X	12024.35
e/f Employee's name, ad VINOD KUMAR 400 GOLDEN HO	dress ar BOLLO DRSES	D 12b DD 12c 12d 13 Stat em od ZIP cod DLLI SHOE C	X EIRCLE	12024.35 3rd party sick page
e/f Employee's name, ad VINOD KUMAR 400 GOLDEN HO APT # L MORRISVILLE,	Idress and BOLL(DRSES) NC 2 te ID no.	D 12b DD 12c 12d 13 State em d ZIP cod DLLI SHOE C 7560	X EIRCLE	12024.35 3rd party sick pay s, etc. 12219.58

NC. State Filing

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

Wage and

Statement

Copy

Tax

NJ. State Reference Copy Wage and Tax Statement Control number Corp. Employer use only 7134048327 WDN 5GSSVC 10373 Employer's name, address, and ZIP code CREDIT SUISSE SERVICES USA LLC ELEVEN MADISON AVENUE NEW YORK, NY 10010 e/f Employee's name, address, and ZIP code VINOD KUMAR BOLLOLLI 400 GOLDEN HORSESHOE CIRCLE APT # L MORRISVILLE, NC 27560 Employer's FED ID number 81-3845382 a Employee's SSA number XXX-XX-8370 Wages, tips, other comp. Federal income tax withheld 32219.58 4255.10 Social security tax withheld Social security wages 32986.06 2045.14 Medicare wages and tips 6 Medicare tax withheld 32986.06 478.30 Social security tips 8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12 766.48 11 Nonqualified plans 12024.35 12b DD 14 Other 13 Stat emp Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. NJ 813-845-382/000 30713.04 18 Local wages, tips, etc. 111.34 19 Local income tax 20 Locality name

1 Wages, tips, other comp. 32219.58			2 Federal income tax withheld 4255.10			
3	Social security wag	es 86.06	4 Socia	Social security tax withheld 2045.14		
5	5 Medicare wages and tips 32986.06		6 Medio	care tax withheld 478.30		
d 71	Control number 34048327 WDN	Dept. 5GSSVC	Corp.	Employer use only 10373		

c Employer's name, address, and ZIP code
CREDIT SUISSE SERVICES USA LLC
ELEVEN MADISON AVENUE
NEW YORK, NY 10010

b	Employer's FED ID number 81-3845382	a Employee's SSA number XXX-XX-8370			
7	Social security tips	8 Allocated tips			
9		10 Depe	ndent care	e benefits	
11	Nonqualified plans	D	instructio	ns for box 12 766.48	
14	Other	^{12b} DD		12024.35	
		12c			
		12d			
		13 Stat em	p. Ret. plan	3rd party sick pay	
Δ/f	Employee's name address ar	d ZIP co	de e		

f Employee's name, address and ZIP code

VINOD KUMAR BOLLOLLI 400 GOLDEN HORSESHOE CIRCLE APT # L MORRISVILLE, NC 27560

15	State NJ	Employer's state ID no. 813-845-382/000	16 State wages, tips, etc. 30713.04
17	State	income tax 111.34	18 Local wages, tips, etc.
19	Local	income tax	20 Locality name

NJ. State Filing Copy

W-2 Wage and Tax 202
Statement OMB No. 1
Copy 2 to be filed with employee's State Income Tax Return.

2021 W-2 and EARNINGS SUMMARY

This Summary is included with your W-2 to help describe portions in more detail. The reverse side includes information that will also be helpful.

Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, Other Compensation	Social Security Wages	Medicare Wages
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2
GROSS PAY	37,064.36	37,064.36	37,064.36
DENBTAXRET	-37.46	-37.46	-37.46
DEN BTAX	-337.14	-337.14	-337.14
HCFSA	-1,125.00	-1,125.00	-1,125.00
MEDBTRetro	-247.91	-247.91	-247.91
MED BTAX	-2,231.19	-2,231.19	-2,231.19
VISNBT Ret	-9.96	-9.96	-9.96
VisionBTX	-89.64	-89.64	-89.64
401K	-766.48		
W-2 WAGES	32,219.58	32,986.06	32,986.06

VINOD KUMAR BOLLOLLI 400 GOLDEN HORSESHOE CIRCLE APT # L MORRISVILLE, NC 27560 Social Security Number: XXX-XX-8370

© 2021 ADP, Inc.

PAGE 02 OF 02

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. **Box 2.** Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year, lf you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7.000.

However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

 $\mbox{\bf B---}\mbox{Uncollected}$ Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E—Elective deferrals under a section 403(b) salary reduction agreement F—Elective deferrals under a section 408(k)(6) salary reduction SEP

G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct.

J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)
K—20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)
 Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts.

V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—Designated Roth contributions under a section 401(k) plan **BB**—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG-Income from qualified equity grants under section 83(i)

HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct

your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2021 and more than \$8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax.