2021 W-2 and EARNINGS SUMMARY

Employee Reference Copy Wage and Tax Statement OMB No. 1545-0008 Control num Employer use only YAWY 26138 Employer's name, address, and ZIP code CELGENE CORPORATION 86 MORRIS AVE BLDG 1-202 SUMMIT, NJ 07901 eff Employee's name, address, and ZIP code SHIVAM SHAH 77 WALL ST METUCHEN, NJ 08840 Employee's \$\$A number XXX-XX-1687 Employer's FED ID number 22-2711928 79525.43 10483.08 ity tax withheld Social security wages 87965.66 5453.87 edicare wages and tips 87965,66 1275,50 ity tipe 10 Dependent care benefits 11 Nonqualified plans 14 Other DI P.P. # SX-28777 153.86 UVHC/WD 8440.23 350.00 12b D | 12c W | 12d DD 8280.00 15 State Employer's state ID no NJ 222-711-928/000 81096.23 18 Local wages, tips, etc. 3220.19 19 Local income tax 20 Locality name

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 adjustments made by your employer.

5,453.87 SOCIAL SECURITY GROSS PAY 89,186.46 TAX WITHHELD BOX 04 OF W-2 MEDICARE TAX 1,275.50 FED. INCOME TAX WITHHELD BOX 02 OF W-2 10,483.08 WITHHELD BOX 06 OF W-2

153.86 SUI/SDI 3,220.19 STATE INCOME TAX BOX 14 OF W-2 BOX 17 OF W-2 LOCAL INCOME TAX 0.00 BOX 19 OF W-2

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

Social Security Number: XXX-XX-1687

SHIVAM SHAH 77 WALL ST METUCHEN, NJ 08840

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PAGE 01 OF 01 Fold and Detach Here

1	Wages, tips, other 795	comp. 25.43	2 Federa	income tax withheld 10483.08
3	Social security was	ges 65.66	4 Social security tax withheld 5453.87	
5	Medicare wages at 879	nd tips 65.66	6 Medica	re tax withheld 1275.50
d 00	Control number 000004471 U51	Dept.	Corp.	Employer use only 26138

Employer's name, address, and ZIP code CELGENE CORPORATION 86 MORRIS AVE BLDG 1-202 SUMMIT, NJ 07901

b Employer's FED ID number 22-2711928	 Employee's SSA number XXX-XX-1687 		
7 Social security tips	8 Allocated tips 10 Dependent care benefits		
9			
11 Nonqualified plans	12a See instructions for box 12 C 269.76		
14 Other 248,71 FLI DI P.P. # SX-28777	^{12b} D 8440.23		
153.86 UI/HC/WD	12c W 350.00		
	12d DD 8280.00		
	13 Stat emp. Ret. plan 3rd party sick pay		

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

SHIVAM SHAH 77 WALL ST METUCHEN, NJ 08840

15 State NJ	Employer's state ID no. 222-711-928/000	16 State wages, tips, etc. 81096.23	
		18 Local wages, tips, etc.	
19 Local	income tax	20 Locality name	

Federal Filing Copy

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

1 Wages, tips, other comp. 79525.43		2 Federal	income tax withheld 10483.08	
3 Social security wages 87965.66		4 Social t	security tax withheld 5453.87	
5	Medicare wages and tips 87965,66		6 Medica	re tax withheld 1275.50
d Control number Dept. 0000004471 U51		Dept	Corp.	Employer use only 26138

CELGENE CORPORATION 86 MORRIS AVE BLDG I-202 SUMMIT, NJ 07901

b	Employer's FED ID number 22-2711928	a Employee's	SSA number XX-XX-1687
7	Social security tips	8 Allocated ti	ps
9		10 Dependent	care benefits
11	Nonqualified plans	12a C	269.76
14	Other 249.71 FLI DI P.P. # SX-28777 153.88 U(HC/WD	12b D	8440.23
		12c W	350,00
		12d DD	8280.00
		13 Stat emp. Ret.	plan 3rd party sick pay

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

SHIVAM SHAH 77 WALL ST METUCHEN, NJ 08840

15	State NJ	Employer's state ID no. 222-711-928/000	16 State wages, tips, etc. 81096.23
17	State	3220.19	18 Local wages, tips, etc.
19	Local	income tax	20 Locality name

NJ. State Filing Copy Wage and Tax Statement

1	Wages, tips, other	comp.	2 Federal income tax withheld	
	795	25.43	10483.08	
3	Social security was	ges 65.66	4 Social security tax withheld 5453.87	
5	Medicare wages at 879	nd tips 65.66	6 Medica	re tax withheld 1275.50
d	Control number Dept.		Corp.	Employer use only
OC			YAWY	26138

CELGENE CORPORATION 86 MORRIS AVE BLDG 1-202 SUMMIT, NJ 07901

ь	Employer's FED ID number 22-2711928	a Employee	's SSA number XX-XX-1687
7	Social security tips	8 Allocated	tips
9		10 Depender	nt care benefits
11	Nonqualified plans	12a C	269.76
14	14 Other 249.71 FLI DI P.P. # SX-28777 153.88 ULHC/WD	12b D	8440.23
		12c W	350.00
		12d DD	8280.00
		13 Stat emp. R	et plan 3rd party sick par

SHIVAM SHAH 77 WALL ST METUCHEN, NJ 08840

15	State NJ	Employer's state ID no. 222-711-928/000	16 State wages, tips, etc. 81096.23
17	State	ncome tax 3220.19	18 Local wages, tips, etc.
19	Local	Income tax	20 Locality name

City or Local Filing Copy Wage and Tax Statement