

008-014612-W2-W2-78249-HCL

Year To Date Earnings

Group Term Life > \$50,000	5.40
Milestone Reward	1644.00
Base Salary	45000.00
Termination Vacation	1826.83

Year To Date Deductions

401k Pretax Contributions	1865.76
Group Accident Post Tax	57.24
Group Term Life > \$50,000	5.40
Medical Pre-Tax	765.00
Power Of 1	18.00
Vision Pre-Tax	100.08

Social Security No.:
XXX-XX-0209

a Employee's social security number XXX-XX-0209		d Control number 049414 WY/OT3		7 Social security tips		1 Wages, tips, other compensation 45745.39		2 Federal income tax withheld 6222.38		
c Employer's name, address, and ZIP code HCL AMERICA INC. 330 Potrero Ave. Sunnyvale, CA 94085-4113				8 Allocated tips		3 Social security wages		4 Social security tax withheld		
b Employer identification number (EIN) 77-0205035				9		5 Medicare wages and tips		6 Medicare tax withheld		
e Employee's first name and initial AKHIL YADAV JELLA		Last name 12319 CHENA LAKE		Suff. SAN ANTONIO, TX 78249		10 Dependent care benefits		11 Nonqualified plans		
f Employee's address and ZIP code		13 Statutory employee <input type="checkbox"/>		Retirement plan <input checked="" type="checkbox"/>		Third-party sick pay <input type="checkbox"/>		14 Other		
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

2021 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Employee's Copy Copy C - For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)
Department of the Treasury-Internal Revenue Service. 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.

2021 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

State Filing Copy Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-0209		d Control number 049414 WY/OT3		7 Social security tips		1 Wages, tips, other compensation 45745.39		2 Federal income tax withheld 6222.38		
c Employer's name, address, and ZIP code HCL AMERICA INC. 330 Potrero Ave. Sunnyvale, CA 94085-4113				8 Allocated tips		3 Social security wages		4 Social security tax withheld		
b Employer identification number (EIN) 77-0205035				9		5 Medicare wages and tips		6 Medicare tax withheld		
e Employee's first name and initial AKHIL YADAV JELLA		Last name 12319 CHENA LAKE		Suff. SAN ANTONIO, TX 78249		10 Dependent care benefits		11 Nonqualified plans		
f Employee's address and ZIP code		13 Statutory employee <input type="checkbox"/>		Retirement plan <input checked="" type="checkbox"/>		Third-party sick pay <input type="checkbox"/>		14 Other		
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

2021 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Federal Filing Copy Copy B - To Be Filed With Employee's FEDERAL Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-0209		d Control number 049414 WY/OT3		7 Social security tips		1 Wages, tips, other compensation 45745.39		2 Federal income tax withheld 6222.38		
c Employer's name, address, and ZIP code HCL AMERICA INC. 330 Potrero Ave. Sunnyvale, CA 94085-4113				8 Allocated tips		3 Social security wages		4 Social security tax withheld		
b Employer identification number (EIN) 77-0205035				9		5 Medicare wages and tips		6 Medicare tax withheld		
e Employee's first name and initial AKHIL YADAV JELLA		Last name 12319 CHENA LAKE		Suff. SAN ANTONIO, TX 78249		10 Dependent care benefits		11 Nonqualified plans		
f Employee's address and ZIP code		13 Statutory employee <input type="checkbox"/>		Retirement plan <input checked="" type="checkbox"/>		Third-party sick pay <input type="checkbox"/>		14 Other		
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