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 do not have to file a tax return, you may be eligible for a refund if hox 2 shows an amount or if you are eligible for any credit. Emmed income credit (BC), You may be able to take the EIC for 2020 if your adjusted gross income (AGI) is less than a certain amount. The annount of credit is based on income and framily size. Workers without children could quality for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC for your avissment income is more than the specified amount for 2020 or if income is carned for services provided while you were an immate at a penal institution. For 2020 in come hims and more information, vist www srs. gov/ETIC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax lability is refunded to you, but only if you file a tax return.

Also see Pub. 590, taiment income creater, sur lace una to more una series and series an 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-2 form our 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-sponsore the datch coverage (if stack 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 2020 and more than S8,537.40 in social security and/or Tjer 1 railroad retirement (RKTA) taxes were withheld, you also may be able to claim a credit for the scccss against your federal neone tax. If you had more than calload employer and more than S5,012.70 in Tire 2 RRTA tax was withheld, you also may be able to claim actual instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax. Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any

Instructions for Employee

A set of the set of

S200.00.
Bors. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tigs on the term at certain the advantagement.
Sour strate 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 adequire records that you received, endernals under a section 430(k) (s) stary reduction SEP
Gurung file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with adequire records that you received, endernals under a section 430(k) (s) stary reduction SEP
Gurung file Form 4137, Social security and Medicare Tax on Unreported Tip Income, with adequire records that you received, endernals under a section 430(k) (s) stary reduction SEP
Group that mount even if it is more or less than the allocated tips. Use Forms 1040 and 100-SR for how to educt.
Form W-2 Wage and Tax Statement
2020
Copy C, for employee's

figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this J—Nontaxable six k pay (information only, not included in boxss 1, 3, or 5) K=20% excise tax on excess golden parachute payments. See the instructions for Forms 1040 and 1040-SR. Computer on your behalf (including amounts from a section 125 (carteering plan). Any amount over 50,000 also in included in box 1, 1, Chil and Dependent Care Expenses of the social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your incurred compensation or nongovernmental section 457(b) plant has became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your incurred admediate control to box 1 if is a distribution made to you from a nonqualified deferred a compensation or nongovernmental section 457(b) plant has became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forficure of your and and efferral and received a distribution in the same calendar year, mil same calendar year. If you made a deferral and received a distribution in the same calendar year, our are or will be age 62 by the need of the calendary exert, your employer should file Form SSA13, propring this mount.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrads (codes D, E, F, and S) and esignated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19.5001 (\$13.500 (\$15.5 Box 12. The following list explains the codes shown in box 12. You may need this information to

Caccas decremary, consider mack alternation on the year assoring non-the current year. It in year as shown, the combinations are for the current year. A—Theollected 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.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and 1040-SR. $C{\rm --Taxable}$ cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under

B—Elective deferrals to a section 40(k) cash of a section 40(k) arrangement a SIMPLE reitement account that is part of a section 40(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

employees only). See the instructions for Forms 1040 and 1040-SR. P—Excludable moving expense reimburscennesh paid directly to a member of the U.S. Armed Forces (not included in boxes 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 Ferra Care Insurance Contracts: S—Employee sharp reductive contributions under a section 408(p) SIMPLE plan (not included in box S—Employee sharp reductive contributions

1) T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to

requirements. W—Emphyser 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 (HSA)

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.

amount is also include in tox1. It is subject to an automal 20% tack puts interest. See the instructions for forms 100 and 100 SR. AA—Designated Roth contributions under a section 403(b) plan BB—Designated Roth contributions under a section 403(b) plan DD—Cox of employer-sponsored health coverage. The amount reported with Code DD is not take. BB—Designated Roth contributions under a section 403(b) plan. The amount reported with Code DD is not take. BB—Designated Roth contributions under a generation section 457(b) plan. This amount does not take. BB—Designated Roth contributions under a generation section 457(b) plan. The—Termitted Roth contributions under a section 83(b) (TB—Perential deterrais under section 33(c) existion 83(c) (TB—Agergated detrains under section 33(c) existion 83(c) (TB—Agergated detrains under section 33(c) existion 83(c) (TBA contributions you may deduct. See Pub. 500-A. Contributions to Individual Retrement Arrangements (IRAs).

withheld, unnor dues, unitorm payments, neath insurance premiums deducted, nontaxable neome, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Raihoad empbyers use this hox to report raihoad 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 raihoad retirement (RRTA) compensation.

empasyer in maroaa returement (RKIA) 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.

Form w-2 waye and Tax Statemen	L	2020	0
d Control number	Void	c Employer's name, address, and ZIP code	
0940-P4088952 0000007967-000USA		LARSEN & TOUBRO INF	FOT

2020

Copy C, for employee's records 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.

d Control number 0940-P4088952 0000007967-000US	Void	c Employer's name, address, and ZIP code LARSEN & TOUBRO INFOTECH LIMIT	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number a Employee's social securit		2035 LINCOLN HWY STE 3000					
22-3524303 405-93-8055			1 Wages, tips, other compensation 77787.06	2 Federal Income tax withheld 4404.30			
13 Statutory Retirement Third-p	rty	EDISON NJ 08817		4 Social Security tax withheld			
Employee plan sick pa			3 Social Security wages 77787.06	4 Social Security tax withheid 4822.80			
12 See Instrs. for Box 12 14 Other		e Employee's name, address, and ZIP code	5 Medicare wages and tips	6 Medicare tax withheld			
C 92.96 CASDI	776.85		77787.06	1127.91			
DD 13682.04		PRAVEEN KUMAR AGRAWAL	7 Social Security tips	8 Allocated Tips			
		8101 CAMINO MEDIA APT 198					
		BAKERSFIELD CA 93311	10 Dependent care benefits	11 Nonqualified plans			
			Verification Code				
15 State Employer's state I.D. No. 16 State w	ges, tips, etc	. 17 State income tax 18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
CA 439-9161-1	7	7787.06 1160.91					

Form W-2 Wage and Tax Statement

Copy B, to be filed with employee's FEDERAL tax return

d Control number			Void	c Employer's name, address, and ZIP code LARSEN & TOUBRO INFOTECH LIMIT				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008						
0940-P4088952 0000007967-		000USA												
b Employer	r's identificat	ion number	a Employee's	s social security nu	mber	2035 LINCOLN HWY STE 3000								
22-352	24303		405-	93-8055	I)	1 Wage	is, tips, other compensation	2 Federal Income tax with		
13 Statute		Retiren		Third-party		EDISON NJ 08817					77787.06		4404.30	
Employ		plan	ient	sick pay	I					3 Socia	I Security wages	4 Social Security tax with	held	
				l						77787.06	4822.80			
12 See Inst	trs. for Box 1		Other			e Employee	's name, address, and ZIP code			5 Medie	care wages and tips	6 Medicare tax withheld		
С	C 92.96 CASDI 776.85								77787.06		1127.91			
DD 13682.04					1	PRAVEEN KUMAR AGRAWAL			7 Social Security tips		8 Allocated Tips			
					I	8101 C	8							
				I	BAKERSFIELD CA 93311					endent care benefits	11 Nonqualified plans			
				I	DAILLI	COLLED CA 75511								
							Verification Code							
15 State Employer's state I.D. No. 16 State wages, tips, etc.					tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name		
CA 4	CA 439-9161-1		1	77	7787.06	1160	91							
0.1				1			1100							
				1										

Form W-2 Wage and Tax Statement 2020

Copy 2, to be filed with employee's tax return for CA

d Control number Void			c Employer's name, address, and ZIP code					Department of the Treasury - Internal Revenue Service						
0940-P4088952 0000007967-000USA			LARSEN & TOUBRO INFOTECH LIMIT				OMB No. 1545-0008							
b Employ	/er's identificat	ion number	a Employee's	social security nu	mber	2035 LI	2035 LINCOLN HWY STE 3000				1 Wages, tips, other compensation 2 Federal Income tax withheld			
22-35	524303		405-9	93-8055		EDISON NJ 08817					77787.06	2 Tederal Income tax with	4404.30	
13 Statutory Retirement Employee plan			Third-party sick pay						3 Social Security wages		4 Social Security tax withheld			
Site pay									77787.06		4822.80			
12 See In	nstrs. for Box 1		Other			e Employee's name, address, and ZIP code					care wages and tips	6 Medicare tax withheld		
С		92.96 CA	ASDI	7	76.85						77787.06		1127.91	
DD 13682.04				PRAVEEN KUMAR AGRAWAL 8101 CAMINO MEDIA APT 198 BAKERSFIELD CA 93311					al Security tips	8 Allocated Tips				
			endent care benefits						11 Nonqualified plans					
								Verification Code						
15 State	Employ	ver's state I.D.	No.	16 State wages,	tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name		
CA	CA 439-9161-1 7		71	7787.06		1160.91								