### Form W-2 Wage and Tax Statement 2021

d Control number 0472-0214 Voi 0000348489 - 003300 b Employer identification number (EIN)   a Employee's social security number			Void	c Employer's name, address, and ZIP code TECH MAHINDRA AMERICAS INC			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
22-3282696 XXX-XX-0962			5700 DEMOCRACY DRIVE SUITE 2000					lips, other compensation 69241.24	2 Federal income tax withheld 7883.63		
13 Statuto employ	rée p	ement Third-party fan sick pay		PLANO TX 7					ecurity wages 69241.24	4 Social security tax withheld	4292.98
12 See instru	octions for box 12 66.48	14 Other		e Employee's name	, address, and ZIP code			5 Medicar	e wages and tips 69241.24	6 Medicare tax withheld	1004.02
DD				SRAVYA VENKATA SAI BADHIRAJU 107 ASHFORD DRIVE				7 Social S	ecurity Tips	8 Allocated Tips	1004.02
				APT 2521 WEST MONROE LA 71291			10 Dependent care benefits		11 Nonqualified plans		
15 State	Employer's state ID r	number 16 State	wages, lip	s, etc.	17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name	
LA MO	1593448001 19078463			21564.96 47676.28		896.12 2005.00	4	7676.28	476.82	MO STLOU	

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

### Form W-2 Wage and Tax Statement 2021

d Control nu	Control number 0472-D214 Void 0000348489 - 003300			c Employer's name, address, and ZIP code  TECH MAHINDRA AMERICAS INC 5700 DEMOCRACY DRIVE SUITE 2000 PLANO TX 75024			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer identification number (EIN) a Employee's social security number  22-3282696 XXX-XX-0962  13 Stahutory Retirement plan Third-party sick play			party				1 Wages, tips, other compensation 69241.24 3 Social security wages 4 Social security tax with		4 Social security tax withheld	7883.63
12 See instru	uctions for box 12	14 Other		e Employee's name	, address, and ZIP code		5 Medicar	69241.24 re wages and tips	6 Medicare tax withheld	92.98
С	66.48						69241.24			1004.02
DD	DD 3224.64			SRAVYA VENKATA SAI BADHIRAJU 107 ASHFORD DRIVE APT 2521 WEST MONROE LA 71291			7 Social Security Tips 10 Dependent care benefits		8 Allocated Tips	
									11 Nonqualified plans	
15 State	Employer's state ID	Dumber 160 C								
LA MO	1593448001 19078463	number 16 S	tate wages, tip	21564.96 47676.28	17 State income tax 896.12 2005.00	18 Local wages, tips, etc.	7676.28	19 Local income tax 476.82	20 Locality name MO STLOU	

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.

# Form W-2 Wage and Tax Statement 2021

d Control number   0472-0214   Void			's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
			MAHINDRA AMERICAS INC IEMOCRACY DRIVE 2000 ) TX 75024		1 Wages, tips, other compensation 69241.24 3 Social security wages 69241.24	2 Federal income tax withheld 7883.63 4 Social security tax withheld 4292.98	
See instructions for box 12				5 Medicare wages and tips 69241.24 7 Social Security Tips 10 Dependent care benefits	6 Medicare tax withheld 1004.02 8 Allocated Tips 11 Nonqualified plans		
5 State	imber 16 State v	rages, tips, etc.	MONROE LA 71291  17 State income tax 64.96 896.12	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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

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

## Form W-2 Wage and Tax Statement 2021

d Control number 0472-D214 0000348489 - 0			c Employer's name, address, and ZIP code  TECH MAHINDRA AMERICAS INC 5700 DEMOCRACY DRIVE SUITE 2000 PLANO TX 75024			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b Employer identification number (EIN) 22-3282696	a Employee's social security number	5700 DEMO				ps, other compensation 69241.24	2 Federal income tax withheld 7883.63		
	rement Third-party slan sick pay	PLANO TX				curity wages 69241.24	4 Social security tax withheld 4292.98		
12 See instructions for box 12 C 66.48	14 Other	e Employee's nar	me, address, and ZIP code		5 Medicare	wages and tips 69241.24	6 Medicare tax withheld 1004.02		
DD 3224.64			SRAVYA VENKATA SAI BADHIRAJU 107 ASHFORD DRIVE			ecurity Tips	8 Allocated Tips		
			APT 2521 WEST MONROE LA 71291		10 Dependent care benefits		11 Nonqualified plans		
15 State Employer's state IO n	umber 16 State w	rages, tips, etc.	17 State income tax	18 Local wages, tips, etc.		19 Local income lax	20 Locality name		
MO 19078463		47676.28			7676.28	476.82			

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

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### Form W-2 Wage and Tax Statement 2021

	9 - 003300	Void	c Employer's name, address, and ZIP code			Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
b. Employer sterriffication number (EBI)         a. Employee's social security number           22-3282696         XXX-XX-0962           13. Statutory employee         Referement plan           17 Statutory employee         Skick pay		TECH MAHINDRA AMERICAS INC 5700 DEMOCRACY DRIVE SUITE 2000 PLANO TX 75024				s, lips, other compensation 69241.24 security wages	2 Federal income tax withheld 7883. 4 Social security tax withheld		
employée	plan sic	pay	T D III O I X I	5024			69241.24		4292.98
12 See instructions for box 12	14 Other		e Employee's name	e, address, and ZIP code		5 Medica	are wages and tips	6 Medicare tax withheld	
	3.48						69241.24	1000	1004.02
DD 322	DD 3224.64			SRAVYA VENKATA SAI BADHIRAJU 107 ASHFORD DRIVE			Security Tips	8 Allocated Tips	
217,			APT 2521 WEST MONROE LA 71291		10 Dependent care benefits		11 Nonqualified plans		
15 State Employer's st					29				
15 State Employer's st	te ID number	State wages, ti	ps, etc.	17 State income tax	18 Local wages, tips, etc.		19 Local income tax	20 Locality name	
MO 19078463			47676.28	2005.00	4	7676.28	476.82	MO STLOU	

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d Control number	Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Servi OMB No. 1545-0008		
b Employer identification number (EIN) a Employee's social sec	curity number	1		OMB NO. 1545-0006		
				1 Wages, tips, other compensation	2 Federal income tax withheld	
13 Statutory Retirement plan	Third-party sick pay			3 Social security wages	4 Social security tax withheld.	
12 See instructions for box 12 14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
				7 Social Security Tips	8 Allocated Tips	
				10 Dependent care benefits	11 Nonqualified plans	
15 State Employer's state ID number	16 State wages, tip	s, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

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d Control number	Void X	c Employer's name, address, and ZIP code		Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) a Employee's social security number				es, tips, other compensation	2 Federal income tax withheld	
13 Statutory Retirement Third-party employee plan sick pay			3 Soc	al security wages	4 Social security tax withheld	
12 See instructions for box 12 14 Other		e Employee's name, address, and ZIP code	5 Med	ficare wages and tips	6 Medicare tax withheld	
			7 Soc	ial Security Tips	8 Allocated Tips	
			10 De	pendent care benefits	11 Nonqualified plans	
15 State Employer's state ID number 16 State wa	ages, tips	etc. 17 State income tax 18 Local wages,	tips, etc.	19 Local income tax	20 Locality name	

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## Form W-2 Wage and Tax Statement 2021

Control number Void X		c Employer's name, address, and ZIP code	uje post post lukura.	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008		
b Employer identification number (EIN) a Employee's social security number	per			1 Wages, tips, other compensation	on 2 Federal income tax withheld	
13 Statutory Retirement Third-par employee plan sick pay	ly			3 Social security wages	4 Social security tax withheld	
12 See instructions for box 12 14 Other		e Employee's name, address, and ZIP code		5 Medicare wages and tips	6 Medicare tax withheld	
				7 Social Security Tips	8 Allocated Tips	
				10 Dependent care benefits	11 Nonqualified plans	
15 State Employer's state ID number 16 State	wages, tip	s, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income to	ax 20 Locality name	
		and the same of th		ALC: N		

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