

Year To Date Earnings

Group Term Life > \$50,000	15.03
Paid Holiday	1438.40
Milestone Reward	577.42
Base Salary	43697.76
Termination Vacation	1640.23

Year To Date Deductions

1121/advance	4000.00
Negative Salary	139.56
Dental Pre-Tax	28.38
Group Term Life > \$50,000	15.03
Medical Pre-Tax	46.20
Vision Pre-Tax	6.60

008-015668-W2-W2-15220-HCL

Social Security No
 XXX-XX-7067

a Employee's social security number XXX-XX-7067	d Control number 035733 WY/OT3	7 Social security tips	1 Wages, tips, other compensation 47287.66	2 Federal income tax withheld 8088.30	
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 47287.66	4 Social security tax withheld 2931.83	
		9	5 Medicare wages and tips 47287.66	6 Medicare tax withheld 685.67	
b Employer identification number (EIN) 77-0205035		10 Dependent care benefits	c 12a See instructions for box 12 C 15.03	c 12b DD 2190.00	
e Employee's first name and initial Last name Suff PRADEEP REDDY RAJULA 100 CHATHAM PARK DR APT 203 PITTSBURGH, PA 15220		11 Nonqualified plans	c 12c W 400.00	c 12d	
		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	14 Other PA-SUI 28.44		
f Employee's address and ZIP code					
15 State Employer's State ID No PA 19096403	16 State wages, tips, etc. 47272.63	17 State income tax 1451.28	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-7067	d Control number 035733 WY/OT3	7 Social security tips	1 Wages, tips, other compensation 47287.66	2 Federal income tax withheld 8088.30	
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f Employee's address and ZIP code					
15 State Employer's State ID No PA 19096403	16 State wages, tips, etc. 47272.63	17 State income tax 1451.28	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-7067	d Control number 035733 WY/OT3	7 Social security tips	1 Wages, tips, other compensation 47287.66	2 Federal income tax withheld 8088.30	
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 47287.66	4 Social security tax withheld 2931.83	
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		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	14 Other PA-SUI 28.44		
f Employee's address and ZIP code					
15 State Employer's State ID No PA 19096403	16 State wages, tips, etc. 47272.63	17 State income tax 1451.28	18 Local wages, tips, etc.	19 Local income tax	20 Locality name