



This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.



1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

| | Wages, Tips, other Compensation Box 1 of W-2 | Social Security Wages Box 3 of W-2 | Medicare Wages Box 5 of W-2 | CA. State Wages, Tips, Etc. Box 16 of W-2 |
|---------------------------|---|---------------------------------------|--------------------------------|--|
| Gross Pay | 51,563.60 | 51,563.60 | 51,563.60 | 51,563.60 |
| Plus GTL (C-Box 12) | 8.40 | 8.40 | 8.40 | 8.40 |
| Less Other Cafe 125 | 632.58 | 632.58 | 632.58 | 632.58 |
| Less Exempt Wages | N/A | 50,939.42 | 50,939.42 | N/A |
| Reported W-2 Wages | 50,939.42 | 0.00 | 0.00 | 50,939.42 |

2. Employee Name and Address.

HARSHITHA VEDAGIRI
1633 MELROSE AVE APT 106
106
SEATTLE WA 98122

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Fold and Detach Here →

Employee Reference Copy
W-2 Wage and Tax Statement 2021
 Copy C for employee's records
 OMB No. 1545-0008

| | | | |
|-------------------------------------|-------|-------|------------------------------|
| d Control number 285662 LOS2/XAW | Dept. | Corp. | Employer use only A 21382 |
|-------------------------------------|-------|-------|------------------------------|

c Employer's name, address, and ZIP code
INFOSYS LIMITED
2400 N GLENVILLE DR C150
RICHARDSON TX 75082

Batch #03371

e/f Employee's name, address, and ZIP code
HARSHITHA VEDAGIRI
1633 MELROSE AVE APT 106
106
SEATTLE WA 98122

| | |
|--|--|
| b Employer's FED ID number 58-1760235 | a Employee's SSA number XXX-XX-0688 |
|--|--|

| | |
|--|---|
| 1 Wages, tips, other comp. 50939.42 | 2 Federal income tax withheld 9331.16 |
| 3 Social security wages | 4 Social security tax withheld |
| 5 Medicare wages and tips | 6 Medicare tax withheld |
| 7 Social security tips | 8 Allocated tips |
| 9 | 10 Dependent care benefits |
| 11 Nonqualified plans | 12a See instructions for box 12 C 8.40 |
| 14 Other 811.17 SDI | 12b DD 1214.82 |
| | 12c |
| | 12d |
| | 13 Stat emp. Ret. plan 3rd party sick pay |

| | | |
|--------------------------------|---------------------------------------|--|
| 15 State CA | Employer's state ID no. 396-5281 3 | 16 State wages, tips, etc. 50939.42 |
| 17 State income tax 3539.45 | 18 Local wages, tips, etc. | |
| 19 Local income tax | 20 Locality name | |

Federal Filing Copy
W-2 Wage and Tax Statement 2021
 Copy B to be filed with employee's Federal Income Tax Return.
 OMB No. 1545-0008

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CA. State Reference Copy
W-2 Wage and Tax Statement 2021
 Copy 2 to be filed with employee's State Income Tax Return.
 OMB No. 1545-0008

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