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

Corp. **Employer use only** d Control number 291031 LOS2/XAW T Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 **RICHARDSON TX 75082**

Batch #02832

e/f Employee's name, address, and ZIP code ANVESH GATADI 1639 E MAIN ST LOT 3 KENT OH 44240-2851

17 State income tax

19 Local income tax

b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-4967	
1 Wages, tips, other comp.	2 Federal income tax withheld	
40364.51	5311.13	
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	
	12b DD 1775.78	
14 Other	12c	
	12d	
	13 Stat emp. Ret. plan 3rd party sick pa	
15 State Employer's state ID	no. 16 State wages, tips, etc.	
OH 52-2416049	40364.51	
17 State income tax	18 Local wages, tips, etc.	

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

Gross Pay 40,865.37 40,865.37 40,865.37 40,865	Wages, W-2
0.40 9.40 8.40	5.37 8.40
Plus GTL (C-Box 12) 509 26 509 26	9.26
Less Super Care 125 N/A 40,364.51 40,364.51	N/A
Reported W-2 Wages 40,364.51 0.00 0.00 40,36	4.51

2. Employee Name and Address.

ANVESH GATADI 1639 E MAIN ST LOT 3 KENT OH 44240-2851

Fold and Detach Here

2 Federal income tax withheld

4 Social security tax withheld

6 Medicare tax withheld

5311.13

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Wages, tips, other comp.

3 Social security wages

5 Medicare wages and tips

40364.51

1 Wages, tips, other comp. 40364.51	2 Federal income tax withh 5311.	
3 Social security wages	4 Social security tax withheld	
5 Medicare wages and tips	6 Medicare tax withheld	
d Control number Dept. 291031 LOS2/XAW	Corp. Employer use o	

20 Locality name

1173.66

2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-4967	
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	12b DD 1775.78	
	12c	
	12d	
	13 Stat emp. Ret. plan 3rd party sick pay	

1639 E MAIN ST LOT 3 KENT OH 44240-2851

Copy B to be filed with employee's Federal Inco

OH 52-2416049	o. 16 State wages, tips, etc. 40364.51
17 State income tax 1173.66	18 Local wages, tips, etc.
19 Local income tax	20 Locality name
	iling Copy

	depart of	division in	CHARLES DOLL STREET
d Control number 291031 LOS2/XAW	Dept.	Corp.	Employer use only T 7656
c Employer's name, add INFOSYS L 2400 N GLI RICHARDSO	IMITE	D LF D	R C150
Employer's FED ID nut 58-1760235	mber	a Employ	yee's SSA number XXX-XX-4967
Social security tips		8 Allocat	ted tips
)		10 Dependent care benefits	
11 Nonqualified plans		12a C	8.40
14 Other		12b DD	1775.78
		12c	
	505 1100	12d	
		13 Stat emp	Ret. plan 3rd party sick pay
en Employee's name, add ANVESH GATADI 1639 E MAIN ST KENT OH 44240-	LOT		

15 State Employer's state ID no. 16 State wages, tips, etc. 40364.51

OH. State Reference Copy

Waga ait Tax

1173.66

Statement

Copy 2 to be filed with employee's State Incom

17 State income tax

19 Local income tax

18 Local wages, tips, etc.

20 Locality name

40364.51	5311.13
3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept. 291031 LOS2/XAW	Corp. Employer use only T 7656
infosys Limit 2400 N GLENV RICHARDSON	ED ILLE DR C150
b Employer's FED ID number 58-1760235	a Employee's SSA number XXX-XX-4967
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a C 8.40
14 Other	12b DD 1775.78
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pa
e/I Employee's name, address a ANVESH GATADI 1639 E MAIN ST LO KENT OH 44240-285	т з
15 State Employer's state ID no OH 52-2416049	o. 16 State wages, tips, etc. 40364.51
17 State income tax 1173.66	18 Local wages, tips, etc.
19 Local income tax	20 Locality name
OH.State F	iling Copy

Wage and Tax

Copy 2 to be filed with employee's State Income Tax Relurn.

1 Wages, tips, other comp. 2 Federal income tax withheld