Form **1095-C**

Department of the Treasury
Internal Revenue Service

Employer-Provided Health Insurance Offer and Coverage

► Do not attach to your tax return. Keep for your records
► Go to www.irs.gov/Form1095C for instructions and the latest information.

☐ VOID

☐ CORRECTED

OMB No. 1545-2251

2022

Part I Employee

1 Name of employee (first name, middle initial, last name) Saloni Pathania	2 Social security number (SSN) xxx-xx-7380
3 Street address (including apartment no.) 180 Hutton St Apt 2r	

4 City or town Jersey City	5 State or province NJ	6 Country and ZIP or foreign postal code USA 07307

Applicable Large Employer Member (Employer)

7 Name of employer Infosys Limited	8 Employer identification number (EIN) 58-1760235
9 Street address (including apartment no.) 2400 N. Glenville Drive, STE C150	10 Contact telephone number 469-269-9314

11 City or town Richardson	12 State or province TX	13 Country and ZIP or foreign postal code USA 75082

Part II Employee Offer and Coverage

Employee's Age on January 1

Plan Start Month: 04

	All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
14 Offer of Coverage (enter required code)		1H	1H	1H	1H	1H	1H	1H	1E	1E	1H	1H	1H
15 Employee Required Contribution (see instructions)	$	$	$	$	$	$	$	$	$ 89.24	$ 89.24	$	$	$
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)		2A	2A	2A	2A	2A	2A	2D	2C	2C	2B	2A	2A

17 ZIP Code

Part III Covered Individuals   If Employer provided self-insured coverage, check the box and enter the information for each individual enrolled in coverage, including the employee. ☒

(a) Name of covered individual(s) First name, middle initial, last name	(b) SSN or other TIN	(c) DOB (If SSN or other TIN is not available)	(d) Covered all 12 months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
18 Saloni Pathania	xxx-xx-7380		☐	☐	☐	☐	☐	☐	☐	☒	☒	☒	☒	☐	☐
19			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
20			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
21			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
22			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
23			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
24			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
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For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 60705M

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