2019 W-2 and EARNINGS SUMMARY

Employee Reference Wage and Tax Statement Copy C for employee's record

Copy

Control number Employer use only 8935 LOS2/XAW

Employer's name, address, and ZIP code

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

Batch #01650

e/f Employee's name, address, and ZIP code

LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY MOUNT LAUREL NJ 08054-1807**

b	Emplo	yer's FEI 58-176	D ID number 60235	а	E		/ee's SS. 789-01 -	A number ·8190
1	Wage	s, tips, ot	her comp.	2	Fe	ederal	income	tax withheld
		1	02251.10					18645.50
3	Social	security	wages	4	S	ocial	security	tax withheld
		1	02251.10					6339.57
5	Medic	are wage	s and tips	6	М	edica	re tax wi	thheld
		1	02251.10					1482.64
7	Social	security	tips	8	A	llocat	ed tips	
9				10	De	pend	ent care	benefits
11	Nonqu	alified pl	ans	12	a S	ee instr	ructions fo	r box 12 28.08
14	Other					DD		9098.12
	Otilioi	17	L47 SUI	12	_	!_		
		27	.52 FLI	12				
			.48 SDI 3.58 RSO	13	St	at emp	Ret. plan	3rd party sick pay
15			er's state ID no	16	St	ate w	ages, tip	s, etc.
		IOIAL	STATE					
17	State i	ncome ta		18	L	ocal w	ages, tip	
			4292.25					42131.86
19	Local	income t		20) Lo		name	
			1452.68				<u>PHILA</u>	DEL

Federal income tax withheld 102251.10 18645.50 Social security wages 102251.10 Social security tax withheld 6339.57 Medicare tax withheld 1482.64 Medicare wages and tips 102251.10 d Control number Employer use only 082808 LOS2/XAW 8935

Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b	Employer's FED ID number 58-1760235	a Empl	oyee's SS 789-0 1	A number -8190
7	Social security tips	8 Alloc	ated tips	
9		10 Deper	ndent care	benefits
11	Nonqualified plans	12a See C	instructio	ns for box 12 28.08
14	Other	^{12b} DD		9098.12
	171.47 SUI	12c		
	27.52 FLI	12d		
	58.48 SDI 978.58 RSO	13 Stat em	p. Ret. plan	3rd party sick pay
e/f	Employee's name, address an	d ZIP co	de	

LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY MOUNT LAUREL NJ 08054-1807**

15	State	Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.
17	State	income tax 4292.25	18 Local wages, tips, etc. 42131.86
19	Local	income tax 1452.68	20 Locality name PHILADEL
		Federal Fili	na Conv

Wage and Statement Copy B to be filed with employee's Federal Income Tax Return.

Wage

Copy

This blue section is your Earnings Summary which provides more detailed

information on the generation of your W-2 statement and W-4 profile. The

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

reverse side includes instructions and other general information.

	Wages, Tips, other	Social Security	Medicare	NJ. State Wages,
	Compensation	Wages	Wages	Tips, Etc.
	Box 1 of W-2	Box 3 of W-2	Box 5 of W-2	Box 16 of W-2
Gross Pay	106,696.57	106,696.57	106,696.57	65,370.03
Plus GTL (C-Box 12)	28.08	28.08	28.08	16.64
Less Other Cafe 125 Reported W-2 Wages	4,473.55	4,473.55	4,473.55	N/A
	102,251.10	102,251.10	102,251.10	65,386.67

2. Employee Current W-4 Profile. To make changes, file a new W-4 with your payroll department.

LEELAVATHI KYATH MALLESHAIAH HASTINGS WAY **MOUNT LAUREL NJ 08054-1807**

Social Security Number: 789-01-8190 Taxable Marital Status: SINGLE Exemptions/Allowances: FEDERAL: NR Alien STATE: Table A

¤© 2019 ADP, LLC

1	Wages, tips, other of 1022		2 Federal income tax withheld 18645.50			
3	Social security wag	es 51.10	4 Social	security	tax withheld 6339.57	
5	Medicare wages an 1022	d tips 51.10	6 Medica	are tax wi	thheld 1482.64	
d	Control number	Dept.	Corp.	Employ	er use only	
08	2808 LOS2/XAW			Α	8935	
• Foundational and a state of the state of t						

c Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b	Employer's FED ID number 58-1760235	a Employee's SSA number 789-01-8190				
7	Social security tips	8 Allocated tips				
9		10 Dependent care ben	efits			
11	Nonqualified plans	12a C 1	6.64			
14	Other	12b				
	146.20 UI/WF/SWF	12c				
	58.48 NJ DI	12d				
	27.52 FLI 978.58 RSO	13 Stat emp. Ret. plan 3rd p	arty sick pay			
e/f	e/f Employee's name, address and ZIP code					

NJ.State

LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY MOUNT LAUREL NJ 08054-1807**

15 State Employer's state ID no. 16 State wages, tips, etc. NJ 581760235/000 65386.67 17 State income tax 18 Local wages, tips, etc. 3077.95 19 Local income tax 20 Locality name

Reference

and Tax Statement
Copy 2 to be filed with employee's State Income Tax Return

1	Wages, tips, other of	omp.	2	Federa	I income	e tax withheld
١.			-			
	1022	51.10				18645.50
3	Social security was	es	4	Social	security	tax withheld
3 Social security wages 102251.10			`		,	6339.57
102231.10						0333.37
5	Medicare wages an 1022	d tins	6	Medica	are tax w	rithheld
١	1022	E 1 1 1	١٣			1482.64
	1022	31.10				1402.04
Ч	Control number	Dept.		Corp.	Emn	loyer use only
۳.	Control Hamber	Dopt.		ooip.		loyer doc orny
08	2808 LOS2/XAW		İ		Α	8935
			_			

c Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b	Employer's FED ID number 58-1760235	a Employee's SSA number 789-01-8190			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits		benefits	
11	Nonqualified plans	12a C		16.64	
14	Other	12b			
	146.20 UI/WF/SWF	12c			
	58.48 NJ DI	12d			
	27.52 FLI 978.58 RSO	13 Stat em	o. Ret. plan	3rd party sick pag	
Δ/f	Employee's name address a	nd ZIP code		•	

e/f Employee's name, address and ZIP code

LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY MOUNT LAUREL NJ 08054-1807**

15 State Employer's state ID no. 581760235/000	16 State wages, tips, etc. 65386.67
17 State income tax	18 Local wages, tips, etc.
3077.95	
19 Local income tax	20 Locality name
NU Ctata Cilia	Canil

NJ.State Filing Wage and Statement

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

PA.State Reference Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Control number Dept. Corp. Employer use only LOS2/XAW 8936

Employer's name, address, and ZIP code

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

Batch #01650

e/f Employee's name, address, and ZIP code LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY**

MOUNT LAUREL NJ 08054-1807

3 Social security wages 102251.10 4 Social security tax wi 633 5 Medicare wages and tips 6 Medicare tax withheld	vithheld 45.50 vithheld 39.57
3 Social security wages 102251.10 4 Social security tax wi 633 5 Medicare wages and tips 102251.10 6 Medicare tax withheld	ithheld 39.57
102251.10 633 5 Medicare wages and tips 102251.10 6 Medicare tax withheld	39.57 d
5 Medicare wages and tips 102251.10 6 Medicare tax withheld 144	d
102251.10	
102201110	82.64
7 Social security tips 8 Allocated tips	
9 10 Dependent care bene	efits
	.44
14 Other 12b DD 9098	8.12
25 27 DA SIII	
12d	
13 Stat emp. Ret. plan 3rd pa	irty sick pay
15 State Employer's state ID no. 16 State wages, tips, etc.	.
PA 1883 3228 393	71.74
17 State income tax 18 Local wages, tips, etc	Э.
1208.69	
19 Local income tax 20 Locality name	

Wages, tips, other comp 2 Federal income tax withheld 102251.10 18645.50 3 Social security wages 102251.10 4 Social security tax withheld 6339.57 6 Medicare tax withheld 1482.64 Medicare wages and tips 102251.10 Control number Employer use only 082808 LOS2/XAW 8936

Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b E	imployer's FED ID number 58-1760235	a Employee's SSA number 789-01-8190				
7 S	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11 N	lonqualified plans	12a See C	instructio	ns for box 12 11.44		
14 C	Other	^{12b} DD		9098.12		
	25.27 PA SUI	12c				
		12d				
		13 Stat em	p. Ret. plan	3rd party sick pay		
o/f □	mnlovoo'e namo addroce ar	d ZID oo	40	•		

e/f Employee's name, address and ZIP code

LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY MOUNT LAUREL NJ 08054-1807**

15 State PA	Employer's state ID no. 1883 3228	16 State wages, tips, etc. 39371.74
17 State	income tax 1208.69	18 Local wages, tips, etc.
19 Local	income tax	20 Locality name
	PA.State Fili	ng Copy

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement and W-4 profile. The reverse side includes instructions and other general information.

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

PA. State Wages, NJ. State Wages, Tips, Etc. Box 16 of W-2 Box 16 of W-2

Gross Pay 41,141.84 41,141.84 Plus GTL (C-Box 12) N/A 11.44 Less Other Cafe 125 1.770.10 N/A Reported W-2 Wages 39,371.74 41,153.28

2. Employee Current W-4 Profile. To make changes, file a new W-4 with your payroll department.

LEELAVATHI KYATH MALLESHAIAH HASTINGS WAY **MOUNT LAUREL NJ 08054-1807**

Social Security Number: 789-01-8190 Taxable Marital Status: SINGLE

Exemptions/Allowances: FEDERAL: NR Alien STATE:

© 2019 ADP, LLC

1	Wages, tips, other of 1022	omp. 51.10	2 Federa		x withheld 8645.50
3	Social security wag 1022	es 51.10	4 Social security tax withheld 6339.57		
5	Medicare wages an 1022	d tips 51.10	6 Medicare tax withheld 1482.64		
d	Control number	Dept.	Corp.	Employe	r use only
08	2808 LOS2/XAW			Α	8936

c Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b	Employer's FED ID number 58-1760235	a Employee's SSA number 789-01-8190			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	12a C		11.44	
14	Other	12b DD		9098.12	
		12c			
		12d			
		13 Stat em	p. Ret. plan	3rd party sick pay	
e/f	Employee's name, address a	nd ZIP co	de	•	

LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY MOUNT LAUREL NJ 08054-1807**

15 State	Employer's state ID no.	16 State wages, tips, etc.
NJ	581760235/000	41153.28
17 State	income tax	18 Local wages, tips, etc.
	5.61	
19 Local	income tax	20 Locality name

NJ.State Reference

Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return

Copy

1	Wages, tips, other of	comp.	2 Federa	I income ta	x withheld
	1022	51.10		1	8645.50
3	Social security wag	es E4 40	4 Social security tax withheld		
	1022	51.10	6339.57		
5	Medicare wages an	d tips	6 Medica	are tax with	held
	Medicare wages an 1022	51.10			1482.64
d	Control number	Dept.	Corp.	Employe	r use only
08	2808 LOS2/XAW			Α	8936

c Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b	Employer's FED ID number 58-1760235	a Employee's SSA number 789-01-8190			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	^{12a} C	ı		11.44
14	Other	12b DD		!	9098.12
		12c	ī		
		12d	i		
		13 Stat e	mp.	Ret. plan	3rd party sick pay
e/f	Employee's name, address a	nd ZIP co	de		

LEELAVATHI KYATH MALLESHAIAH **HASTINGS WAY MOUNT LAUREL NJ 08054-1807**

15 State NJ	Employer's state ID no. 581760235/000	16 State wages, tips, etc. 41153.28
17 State	income tax	18 Local wages, tips, etc.
	5.61	
19 Local	income tax	20 Locality name
	N.I. Stato Eilir	og Copy

NJ.State Filing Wage and Statement

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

2019 W-2 and EARNINGS SUMMARY

10
)8
ly
7
١

Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

Batch #01650

e/f Employee's name, address, and ZIP code

LEELAVATHI KYATH MALLESHAIAH HASTINGS WAY MOUNT LAUREL NJ 08054-1807

b		yer's FED ID number 58-1760235	а	Empl		ee's SS <i>i</i> ' 89-01 -	A number 8190
1	Wage	s, tips, other comp.	2	Feder	al	income	tax withheld
		102251.10					18645.50
3	Socia	security wages	4	Socia	ıls	security	tax withheld
		102251.10					6339.57
5	Medic	are wages and tips	6 Medicare tax withheld				
		102251.10					1482.64
7	Socia	security tips	8	Alloc	ate	ed tips	
9			10	Depe	nd	ent care	benefits
11	Nonqu	ualified plans		C		uctions fo	11.44
14	Other			b DD	_		9098.12
		25.27 SUI	120		_		
					nn.	Dot plan	3rd party sick pay
			13	Stat er	пр	Net. plan	oru party sick pay
15	State	Employer's state ID no	16	State	w	ages, tip	s, etc.
.,		ncome tax	18	Local	w	ages, tip	s, etc. 42131.86
19	Local	income tax 1452.68	20	Local		name PHILA	DEL

1	Wages, tips, other of 1022	omp. 51.10	2	Federa	l income	tax withheld 18645.50
3	Social security wag 1022	es 51.10	4	Social	security	tax withheld 6339.57
5	Medicare wages and 1022	tips 51.10	6 Medicare tax withheld 1482.64			thheld 1482.64
d	Control number	Dept.		Corp.	Emplo	yer use only
08	2808 LOS2/XAW				Α	8937

c Employer's name, address, and ZIP code

INFOSYS LIMITED 2400 N GLENVILLE DR C150 RICHARDSON TX 75082

b	Employer's FED ID number 58-1760235	a Empl	oyee's SS 789-01	A number -8190		
7	Social security tips	8 Allocated tips				
9		10 Depe	ndent car	e benefits		
11	Nonqualified plans	12a See C	instructio	ns for box 12 11.44		
14	Other	12b DD		9098.12		
	25.27 SUI	12c				
		12d				
		13 Stat em	p. Ret. plan	3rd party sick pay		
_		'				

e/f Employee's name, address and ZIP code

LEELAVATHI KYATH MALLESHAIAH HASTINGS WAY MOUNT LAUREL NJ 08054-1807

ı								
I	15	State	Emplo	yer's	state ID no.	16 State	e wages, tips, etc.	
I	17	State	income	tax			al wages, tips, etc. 42131.8	36
I	19	Local	income		452.68	20 Loc a	ality name PHILADEL	
I			City	or	Local	Filing	Сору	

W-2 Wage and Tax 2019
Statement OMB, No. 1545-00
Copy 2 to be filed with employee's City or Local Income Tax Return.

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement and W-4 profile. The reverse side includes instructions and other general information.

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

PHILADEL Local Wages, Tips, Etc. Box 18 of W-2 42,120.42 11.44 N/A 42,131.86

2. Employee Current W-4 Profile. To make changes, file a new W-4 with your payroll department.

LEELAVATHI KYATH MALLESHAIAH HASTINGS WAY MOUNT LAUREL NJ 08054-1807 Social Security Number:789-01-8190 Taxable Marital Status: SINGLE Exemptions/Allowances:

FEDERAL: NR Alien 1

LOCAL:

¤© 2019 ADP, LLC

Gross Pay

Plus GTL (C-Box 12)

Less Other Cafe 125

Reported W-2 Wages

INTENTIONALLY LEFT BLANK

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. **Box 2.** Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000.

Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. On Form 4137, you will calculate the social security and Medicare tax owed on the allocated tips shown on your Form(s) W-2 that you must report as income and on other tips you did not report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,000 (\$13,000 if you only have SIMPLE plans; \$22,000

for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,000. Deferrals under code H are limited to \$7.000.

However, if you were at least age 50 in 2019, your employer may have allowed an additional deferral of up to \$6,000 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the instructions for Form 1040.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See the Form 1040 instructions.

C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5)

D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E-Elective deferrals under a section 403(b) salary reduction agreement

F-Elective deferrals under a section 408(k)(6) salary reduction SEP

 ${\bf G-}Elective$ deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.

J–Nontaxable sick pay (information only, not included in box 1, 3, or 5) K–20% excise tax on excess golden parachute payments. See the Form 1040 instructions.

 $\ensuremath{\text{\textbf{L}}}\xspace-\ensuremath{\text{\textbf{S}}}\xspace$ business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Form 1040 instructions

P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

Q—Nortaxable combat pay. See the instructions for Form 1040 for details on reporting this amount.

R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S-Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1)

T—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525,

Taxable and Nontaxable Income, for reporting requirements. **W**—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y—Deferrals under a section 409A nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount also is included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.

AA—Designated Roth contributions under a section 401(k) plan **BB**—Designated Roth contributions under a section 403(b) plan

DD—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable.

EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF—Permitted benefits under a qualified small employer health reimbursement arrangement

GG—Income from qualified equity grants under section 83(i)

HH – Aggregate deferrals under section 83(i) elections as of the close of the calendar year

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

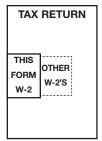
Department of the Treasury - Internal Revenue Service

NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL, STATE AND LOCAL/CITY INCOME TAX RETURNS.

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.

IMPORTANT NOTE:

In order to insure efficient processing, attach this W-2 to your tax return like this (following agency instructions):



Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2019 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2019 or if income is earned for services provided while you were an inmate at a penal institution. For 2019 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA)

to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You also may visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable.

Credit for excess taxes. If you had more than one employer in 2019 and more than \$8,239.80 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$4,836.30 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 instructions and Pub. 505, Tax Withholding and Estimated Tax.