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. From 1790 do not 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 innour excit (EIC). You may be able to take the EIC for 2017 if your adjusted gross income (AGI) is less than a certain amount. The amount of credit is based on income and family size. Workers without châldren could qualify for a smaller credit. You and any qualifying châldren must have valid social security numbers (SSNs). You can that the HEI City our investment income is more than the specified amount for 2017 or if income is earned for services provided while you were an intante at a penal institution. For 2017 in come limits and more information, vist www. six govietic.

Also see Pub. 596, Earnel Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Also see Pub. 390, named informe cream. Full factors and a finite factor 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 employer to correct your employer to the correct way and the state of the correct way and any statement, with the Social Security Administration (SSA) to correct any 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-2 from your employer for all corrections made so you may fift 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 mame at any SSA office or by calling 1-800-772-1213. You may also visit the SSA at www.SSA, gov. Cost of employer-sponsored beath coverage (is ache tost is provided by the employer). The reporting in Box 12, using Code DD, of the cost of employer-sponsored health coverage (is ache tost 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 2017 and more than \$7,886.40 in social security and/or Fire 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess gainsty your feder alm come tax. If you had more than ore than \$1,630.50 in Ter 2 RRTA tax was withheld, you also may be able to claim a credit for Form 1040 or Form 1040A instructions and Pub. 505, Tax Wahholding and Estimated Tax.

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. Tourn any 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 3, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips shown

\$200,000.

Box 8. This amount is not included in boxes 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 onless 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 9. If you are e-filing and if there is a code in this box, enter if when prompted by your software. The only valid characters are the letters AF and numerals 0-9. This code assists the IRS in validating the W-2 data submitted with your return. The code is not entered on paper-filed returns.

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) plani). 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 for (b) included in box 3 and/or 5 if it is a prior year deferred unount. This box should the two 457(b) plan the 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 should fit be true diff you had a deferral amount for Shot 131, we should fit be year, your employer should fits Form SSA-131, 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

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Blective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and Ely nuder all plans are generally limited to a total of \$18,000 (\$12,500 if you only) have SIMPLE plans; \$21,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. \$71). Deferrals under code G are limited to \$18,000. Deferrals under code H are limited to

have SIMPLE plans; S21,000 for section 403(b) plans it you quanty for the L3-yean L36-Spanished.

Plub, 571). Deferrals under code G are limited to \$18,000. Deferrals under code H are limited to \$7,000.

However, if you were at least age 50 in 2017, 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 and the intervention of the overall limit on decite 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 decite deferral limit must be included in income. See the "Wages, Salaries, Tips, etc." line instructions for Form 1040. Note, If a year follows code D through H, S. Y. And, 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 exceeded efforts, consider these amounts for the year shown, not the current year.

To 10.00 Sec Tybes

deferred compensation plan

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

J—Nontaxable Six pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See "Other Taxes" in the Form 1040

instructions.

L—Substantiated employee business expense reimbursements (nontaxable)

M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over

\$50,0000 (former employees only), See "Other Taxes" in the Form 1000 instructions.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1000 instructions.

P—Excludable moving expense reimbursements paid directly to employee (not included in boxes 1, 3, or 5)

O—Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A for details on

Q—consalastic consumptions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Tern Care Insurance Contracts.

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

—Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to impute any taxable and nontaxable amounts.

compute any taxable and nontaxable amounts.

W—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).

**Z—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 is also included in box 1. It is subject to an additional 20% tax plas interest. See "Other Taxes" in the Form 1040 instructions under a section 401(k) plan.

**AA—Designated Roth contributions under a section 403(b) plan.

**DD—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.

included in income. See the "Wages, Salaries, Tips, etc." line instructions for Form 1040.

Note. If a year follows code D through H. S. Y. Ad. Bb, or EE, you made a make-up person contribution for a prior year(s) show you were in unliture service. To glicus whether you made access deferreds, consider these amounts for the years shown, not the current year. If no year is shown, the contributions under a new property of the current year. If you year is shown, the contributions were a transcensor of the property of the current year. If no year is shown, the contributions under a new property of the current year. If no year is shown, the contributions were at an exceeping or an access contribution of the year shown, not the current year. If no year is shown, the contributions were at an exceeping or an access contribution of the property health retinbursement arrangement access that a star contributions you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions you may deduct. See Pub. 590-A. Contributions to Individual Retrement TRANS or you may deduct. See Pub. 590-A. Contributions you may

Form W-2 Wage and Tax Statement

2017

Copy C, for employee's records

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 immosted on your if this income is taxable and you fail to report it.

								may be imposed	on you if this income is tax	able and you fa		
0472-I		000047055-		Void		s name, address, and ZIP code MAHINDRA AMERICA	S INC	Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
b Employer's identification number 22-3282696 13 Statutory Retirement Employee Retirement Sick pay					SUITE :	RESTON PARK BLVD 500 D TX 75093		1 Wages, tips, other compensation 34615.80 3 Social Security wages 34615.80	34615.80 3596 3 Social Security wages 4 Social Security tax withheld			
12 See Instrs. for Box 12 C 40.59 UI/HC/WD 142.38 DD 2097.30 DI 80.40 DI PP# 223-282-6					SACHII BUILDI APT #2	•	DENS	5 Medicare wages and tips 34615.80 7 Social Security tips 10 Dependent care benefits	6 Medicare tax withheld 8 Allocated Tips 11 Nonqualified plans	501.90		
15 State NJ NJ	Employer's sta 223-282-69 FLI		16 State wages,	tips, etc.	5023.35	17 State Income tax 732.96 33.50	18 Local wages, tips, etc.	Verification Code 67bb-f8a3	-cbbd-4313			

Form W-2 Wage and Tax Statement

2017

2017

Copy B, to be filed with employee's FEDERAL tax return

0472-E	d Control number Void 472-D214 0000047055-000700					c Employer's name, address, and ZIP code TECH MAHINDRA AMERICAS INC				Department of the Treasury - Internal Revenue Service OMB No. 1545-0008			
''			873-	73-34-0625 Third-party sick pay		4965 PRESTON PARK BLVD SUITE 500 PLANO TX 75093				3 Social Security wages 4 Social Security tax withheld			3596.32
C DD	DD 2097.30 DI 80.40					e Employee's name, address, and ZIP code SACHIN BORKAR BUILDING 33 SKYTOP GARDENS APT #24 MIDDLETOWN NJ 08859				7 Socia	5 Medicare wages and tips 34615.80 7 Social Security tips 10 Dependent care benefits 11 Nonqualified plans Verification Code 67bb-f8a3-cbbd-4313		
15 State NJ NJ	Employer's 223-282-0 FLI			16 State wages,		5023.35	17 State income tax	732.96 33.50	18 Local wages, tips, etc.		19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement

Copy 2, to be filed with employee's tax return for NJ

d Control number					Void	c Employer's name, address, and ZIP code					Department of the Treasury - Internal Revenue Service OMB No. 1545-0008				
0472-D214 0000047055-000700				<u>ш</u> '	TECH MAHINDRA AMERICAS INC										
b Employer's identification number a Employee's social security number					mber	4965 PRESTON PARK BLVD					1 Wages, tips, other compensation 2 Federal Income tax withheld				
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											540.	15.80	2146.19		
	12 See Instrs. for Box 12 14 Other					e Employee's name, address, and ZIP code					are wages and tips		6 Medicare tax withheld		
C			I/HC/WD		142.38						346	15.80		501.90	
DD	DD 2097.30 DI 80.40					SACHIN BORKAR				7 Social	Security tips		8 Allocated Tips		
DI PP# 223-282-6					,	BUILDING 33 SKYTOP GARDENS									
					,	APT #2	APT #24				endent care benefits		11 Nonqualified plans		
					,	MIDDLETOWN NJ 08859									
				,	WIIDDLETOWN NJ 08039				Verification Code						
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15 State	Employe	er's state I.D	. No.	16 State wages,	, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name		
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