	Year T	Year To Date Earnings				Year To Date Deductions				
Conve Group 008-006700-W2-W2-78240-HCL CGPB		ed Bonus Part of OGPB yance Reimbursement > Term Life > \$50,000 ation Payment Suppl Salary		4828. 448. 103. 912. 175. 70812.	.92 .60 .16 .78	DENTAL PRE-TZ Group Term Li MEDICAL PRE-TZ VISION PRE-TZ	lfe > \$50 TAX	241. ),000 103. 2441. 328.	.60 .60	
Social Security No.: <b>858-41-1137</b> Marital Status: <b>Married</b> Exemptions/Allowances: Federal: 0/0 State: 0/0										
a Employee's social security number	d Control number		7 Social sec	urity tips	1 Wages	s, tips, oth	er compensation	2 Federa	I income tax withheld	
858-41-1137 c Employer's name, address, and ZIP	034364 WY/0T3		8 Allocated t	ins	3 Social	security v	73821.03	4 Social	9715.55 security tax withheld	4
HCL AMERICA INC.			o / moodiou i	.00	o obolul	sooung i	73821.03	1 Coolar	4576.90	
330 Potrero Ave.			9		5 Medicare wag		and tips	6 Medicare tax withheld		
Sunnyvale, CA 94085-4194	1				0		73821.03	0	1070.40	_
b Employer identification number (EIN)	77-0205035		10 Dependa	nt care benefits	g 12a See	e instructi	ons for box 12 103.60	012b d <b>DD</b>	11623.04	
e Employee's first name and initial	Last name	Suff.	11 Nonqualit	ied plans	ç 12c	1	200000	ç 12d		-
AMIT MISHRA 4980 USAA BLVD APT 10 SAN ANTONIO, TX 78240 f Employee's address and ZIP code	36		13 Statutory employee	Retirement Third-party plan sick pay	14 Other	<u> </u>		e		_
15 State Employer's State ID No 16 St	tate wages, tips, etc.	17 State incom	e tax	18 Local wages, t	ips, etc.	19 Loca	l income tax	20 L	Locality name	-
2016 0MB No. 1545-0008	age and Tax State		Employe Copy State Filing Co	Departmen to the Interr or other sar	t of the Tre nal Revenue nction may <b>5 Be Filed</b>	e Service. be impos	ernal Revenue Se If you are require ed on you if this in	rvice. This ed to file a ncome is t ty, or Loc	nployee on back.) information is being furnis tax return, a negligence pe axable and you fail to repo al Income Tax Return.	enalty
a Employee's social security number	d Control number		7 Social sec	. Boparanor					I income tax withheld	
858-41-1137	034364 WY/0T3			· ·	Ĵ		73821.03		9715.55	
c Employer's name, address, and ZIP	code		8 Allocated	ips	3 Social	security v	•	4 Social	security tax withheld	
HCL AMERICA INC. 330 Potrero Ave.			0		E Madi-		73821.03	6 Madia -	4576.90	_
Sunnyvale, CA 94085-4194	4		9		5 IVIEDICA	are wages	and tips 73821.03	o iviedica	are tax withheld 1070.40	
			10 Dependa	nt care benefits	C 12a See	e instructi	ons for box 12	C 12b	10/0.40	-
b Employer identification number (EIN	77-0205035				d C		103.60	d DD	11623.04	

2016 MB No. 1545-0008 Form W-2 W		Federal Filing Copy B - To Be Filed With Employee's FEDERAL Tax Return. Department of the Treasury-Internal Revenue Service.						
a Employee's social security number 858-41-1137 d Control number 034364 WY/0T3		7 Social security tips		1 Wages	, tips, other compensation 73821.03	2 Federal income tax withheld 9715.55		
C Employer's name, address, and ZIP code			8 Allocated ti	ps	3 Social s	security wages 73821.03	4 Social security tax withheld 4576.90	
330 Potrero Ave. Sunnyvale, CA 94085-4194			9		5 Medica	re wages and tips 73821.03	6 Medicare tax withheld 1070.40	
b Employer identification number (EIN) 77–0205035			10 Dependan	t care benefits	C12a See	instructions for box 12 103.60	<sup>C</sup> 12b d <b>DD</b>	11623.04
e Employee's first name and initial AMIT MISHRA 4980 USAA BLVD APT 1036 SAN ANTONIO, TX 78240 f Employee's address and ZIP code	Last name	Suff.		ed plans Retirement Third-party plan sick pay	C12c		C 12d	
15 State Employer's State ID No 16 St	tate wages, tips, etc.	17 State income	tax	18 Local wages, tip	ps, etc.	19 Local income tax	20 l	_ocality name

11 Nonqualified plans

13 Statutory Retirement Third-party employee plan sick pay

18 Local wages, tips, etc.

Suff.

17 State income tax

C 12c

19 Local income tax

12d

20 Locality name

f Employee's address and ZIP code 15 State Employer's State ID No 16 State wages, tips, etc.

e Employee's first name and initial Last name

AMIT MISHRA 4980 USAA BLVD APT 1036 SAN ANTONIO, TX 78240

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 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

If you do not have to file a tax return, you may be eligible for a retund if box 2 shows an amount or it you are eligible tor any credit. Earned income credit (EIC). You may be eligible for a retund if box 2 shows an amount or it you are eligible tor any credit. Earned income credit (EIC). You may be able to take the EIC for 2016 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 want is based on income and family size. Workers without children is earned for services provided while you were an inmate at a penal institution. For 2016 income limits a more than your tax liability is refunded to you, but only if you file a tax return. Clergy and religious workers. If you are not 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 sak your employer to correct your employer tor. Be sure to ask the employer to file Form 42. Be sure to get your copies of Form W-2c. But any name, SSN, or more yamount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c that are not more your social security and like hement, with the your tax return. If you mane and SSN are correct any name, SSN, or more yamount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c that are not he same as shown on your social security and your should have a more and many for day our copies of A, you show they dur tax return. If you tare and tax the are any SSA office or by calling 1-800-772-1213. You also

may visit the SSA at www.socialsecurity.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 2016 and more than \$7,347 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheid, you may be able to claim a credit for the excess gainst your federal income tax. If you had more than one railroad employer and more than \$4,321.80 in Tier 2 RRTA tax was withheid, you also may be able to claim a credit. See your Form 1040 or Form 1040A instructions and Pub. 505, Tax Withhoding 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. 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 6. This amount in clucked in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see

Well 83 the 0.4% Additional medicate is a on any or most another instance interpret with your income tax return, see your Form 1040 instructions. You must like 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 your celevied, growthat 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. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips. On Form 4137 you will calculate the social security and Medicare tax owed on the allocated tips. Dort 10. This amount lincludes the total dependent care benefits that your employer, pad to your or located the 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 not 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 52 by the end of the calendar year, your employer should file form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administrati

should file Form SSA-131, Employer Report of Special wage Payments, with the Social Security Parameteristic and the social Security Parameteristic Parameter

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

Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form 0 instructions Uncollected Medicare tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form 1040

instructions.

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. Elective deferrals under a section 403(b) salary reduction agreement Elective deferrals under a section 408(k)(d) salary reduction SEP C=Elective deferrals under a section 408(k)(d) salary reduction SEP C=Elective deferrals under a section 408(k)(d) salary reduction SEP C=Elective deferrals under as account 408(k)(d) salary reduction SEP C=Elective deferrals under as section 408(k)(d) salary reduction SEP C=Elective deferrals on the omployer contributions (including nonelective deferrals) to a section 457(b) deferred

G—Elective deferrals and employer contributions (including nonelective deterrals) to a section 437(u) veneries 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 sick pay (information only, not included in boxes 1, 3, or 5) M—Uncollected Neclar each of the section of the form 1040 instructions. L—Substantiated employee business expense reimbursements (nontaxable) M—Uncollected Neclar each of the section of the cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions. M—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions. M—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions paid directly to employee (not included in hoxes 1, 3, or 5) O—Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A for details on reporting this amount.

Control a value Control a pay. Sec in a manufacture of a mount.
 Amount.
 R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care
 Insurance Contracts.
 State 1 - 406(a) State E plan (not included in box 1)

Insura S

Insurance Contracts. Sememployee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1) Tendoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. W—Employee contributions (included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. W—Employee contributions (included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. W—Employee contributions (including and wonts 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—Deferrats under a section 409A nonqualified deferred compensation plan Z—income under a nonqualified deferred compensation plan Tuctuder in box 1. It is subject to an additional 20% tax plus interest. See "Other Taxes" in the Form 1040 instructions. BB—Designeted Roth contributions under a section 401(k) plan BB—Designeted 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 section 457(b) plan. This amount does not apply to contributions under a tax-extend transition section 457(b) plan.

EC-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.

Box 13. If the "Retirement pan" 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.