Safe, accurate, Visit the IRS Website FAST! Use at www.irs.gov. **Employee** Reference Copy Wage and Tax Statement Copy C for employee's record: Control number Corp. Employer use only 018418 74/XAW Employer's name, address, and ZIP code **INFOSYS TECHNOLOGIES** 6607 KAISER DRIVE FREMONT CA 94555

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

ANAND NIDAMANURU

C/O INDIA

Batch #01481

B	ANG	ALORE								
SI	KOK	IE IL 6	007	6						
b	Emplo	yer's FED 58-1760		mber	d	Emp		ee's SS. 37-04-		er
1	Wage	s, tips, oth	er cor	np.	2	Fede	eral	income	tax with	held
			8233	.67					1547	.87
3	Socia	security w	ages 8233		4	Soci	ial s	security	tax with 510	
5	Medic	are wages	and ti 8233		6	Med	icaı	e tax wi	thheld 119	.39
7	Social	security ti	ps		8	Allo	cate	ed tips		
9	Advar	ice EIC pay	ment		10	Dep	end	ent care	benefit	S
11	Nonqu	alified plar	าร				nstr	uctions fo	r box 12	
14	14 Other		12b							
					120		$\frac{1}{1}$			
					13	Stat e	emp.	Ret. plan	3rd party	sick pay
15	State	Employer'	s stat	e ID no	. 16	State	e wa	ages, tip	s, etc.	
II	L	58-17602	235	000	1				8233	.67
17	State i	ncome tax			18 Local wages, tips, etc.					
			247	.01						
19	19 Local income tax					20 Locality name				

247.01					
19 Local income tax	20 Locality name				
	_				
1 Wages, tips, other comp. 8233.67	2 Federal income tax withheld 1547.87				
3 Social security wages 8233.67	4 Social security tax withheld 510.49				
5 Medicare wages and tips 8233.67	6 Medicare tax withheld 119.39				
a Control number Dept.	Corp. Employer use only				
018418 74/XAW	A 4447				
INFOSYS TECHNOLOGIES LTD 6607 KAISER DRIVE FREMONT CA 94555					
b Employer's FED ID number 58-1760235	d Employee's SSA number 337-04-3179				
7 Social security tips	8 Allocated tips				
9 Advance EIC payment	10 Dependent care benefits				
11 Nonqualified plans	12a See instructions for box 12				
14 Other	12b				
	12c				
	12c 12d				
e/f Employee's name, address a ANAND NIDAMANUR C/O INDIA BANGALORE SKOKIE IL 60076	12d 3rd party sick pay and ZIP code				
ANAND NIDAMANUR C/O INDIA BANGALORE SKOKIE IL 60076 15 State Employer's state ID no IL 58-1760235 000	13 State emp. Ret. plan 3rd party sick pay and ZIP code				
ANAND NIDAMANUR C/O INDIA BANGALORE SKOKIE IL 60076 15 State Employer's state ID no	13 State emp. Ret. plan 3rd party sick pay and ZIP code				
ANAND NIDAMANUR C/O INDIA BANGALORE SKOKIE IL 60076 15 State Employer's state ID no 17 State income tax	13 State emp. Ret. plan 3rd party sick pay and ZIP code				

Wage

Copy B to be filed with employee's Federal Income Tax Retur

and Statement

2005 W-2 and EARNINGS SUMMARY

This blue Earnings Summary section is included with your W-2 to help describe portions in more detail. The reverse side includes general information that you may also find helpful.

1. The following information reflects your final 2005 pay stub plus any adjustments submitted by your employer.

Gross Pay 8233.67 **Social Security**

Tax Withheld Box 4 of W-2

510.49 IL. State Income Tax Box 17 of W-2

SUI/SDI Box 14 of W-2 247.01

Fed. Income Tax Withheld 1547.87 Medicare Tax Withheld Box 2 of W-2

Box 6 of W-2

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

Medicare IL. State Wages, Wages, Tips, other **Social Security** Compensation Box 1 of W-2 Tips, Etc. Box 16 of W-2 Wages Wages Box 3 of W-2 Box 5 of W-2

119.39

GrossPay 8,233.67 8,233.67 8,233.67 8,233.67 Reported W-2 Wages 8,233.67 8,233.67 8,233.67 8,233.67

3. Employee W-4 Profile. To change your Employee W-4 Profile Information, file a new W-4 with your payroll dept.

ANAND NIDAMANURU C/O INDIA BANGALORE SKOKIE IL 60076

Social Security Number: 337-04-3179 Taxable Marital Status: SINGLE Exemptions/Allowances:

2 Federal income tax withheld

1547.87

FEDERAL: 0 STATE:

8233.67

Wages, tips, other comp

m© 2005 AUTOMATIC DATA PROCESSING, INC

Wages, tips, other comp. 8233.67			2 Federal income tax withheld 1547.87					
3	Social security wa	4 Social security tax withheld 510.49						
5	Medicare wages a	6 Medicare tax withheld 119.39						
а	Control number	Dept.	Corp.	Employ	er use only			
01	8418 74/XAW			Α	4447			
C	Employer's name, address, and ZIP code INFOSYS TECHNOLOGIES LTD 6607 KAISER DRIVE FREMONT CA 94555							
b	b Employer's FED ID number 58-1760235			d Employee's SSA number 337-04-3179				
7	Social security tip	8 Allocated tips						
9	Advance EIC payr	10 Dependent care benefits						
11	Nonqualified plans	3	12a					
14	Other		12b					
			12c					
			12d					
			13 Stat em	p. Ret. plan	3rd party sick pay			
e/f	e/f Employee's name, address and ZIP code							
C/ B/	NAND NIDAN O INDIA ANGALORE KOKIE IL 60		U					
15 	State Employer's 58-176023		16 State	wages, tip	os, etc. 8233.67			

18 Local wages, tips, etc.

Copy

20 Locality name

Reference

Wage and Tax

Statement

17 State income tax

19 Local income tax

IL.State

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

1					
4 Social security tax withheld 510.49					
6 Medicare tax withheld 119.39					
Corp. Employer use only					
A 4447					
and ZIP code					
INFOSYS TECHNOLOGIES LTD 6607 KAISER DRIVE FREMONT CA 94555					
d Employee's SSA number 337-04-3179					
8 Allocated tips					
10 Dependent care benefits					
12a					
12b					
12c					
12d					
13 Stat emp. Ret. plan 3rd party sick par					
e/f Employee's name, address and ZIP code ANAND NIDAMANURU C/O INDIA BANGALORE SKOKIE IL 60076					
15 State Employer's state ID no. 16 State wages, tips, etc. 58-1760235 000 1 8233.67					
18 Local wages, tips, etc.					
20 Locality name					
ng Copy					
W-2 Copy 2 to be filed with employee's State Income Tax Return. Wage and Tax 2005 OMB No. 1545-0008					

Notice to Employee

Refund. Even if you do not have to file a tax return, you should file to get a refund if box 2 shows federal income tax withheld or if you can take the earned income credit. Earned income credit (EIC). You must file a tax return if any amount is shown in box 9.

any amount is shown in box 9.

You may be able to take the EIC for 2005 if: (a) you do not have a qualifying child and you earned less than \$11,750 (\$13,750 if married filing jointly), (b) you have one qualifying child and you earned less than \$31,030 (\$33,030 if married filing jointly), or (c) you have more than one qualifying child and you earned less than \$35,263 (\$37,263 if married filing jointly). You and any qualifying children must have valid social security numbers (\$5Ns). You cannot take the EIC if your investment income is more than \$2,700. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return. If you have at least one qualifying child, you may get as much as \$1,597 of the EIC in advance by completing Form W-5, Earned Income Credit Advance Payment Certificate, and giving it to your employer. giving it to your employer.

Clergy and religious workers. If you are not subject to social security and Medicare taxes, see Publication 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Ciergy 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. If your name and SSN are correct but are not the same as shown on your social security card, you should ask for a new card at any SSA office or call 1-800-772-1213.

call 1-800-772-1213.

Credit for excess taxes. If you had more than one employer in 2005 and more than \$5,580.00 in social security and/or Tier I 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 \$2,943.60 in Tier II RRTA tax was withheld, you also may be able to claim a credit. See your Form 1040 or Form 1040A instructions and Publication 505, Tax Withholding and Estimated Tax.

Instructions

Box 1. Enter this amount on the wages line of your tax

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

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.

Box 9. Enter this amount on the advance earned income credit payments line of your Form 1040 or Form 1040A Box 10. This amount is 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. You must complete Schedule 2 (Form 1040A) or Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxable amounts.

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.

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) under all plans are generally limited to a total of \$14,000 (\$17,000 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$14,000. Deferrals under code H are limited to \$7,000. However, if you were at least age 50 in 2005, your employer may have allowed an additional deferral of up to \$4,000 (\$2,000 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 three 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 "Wages, Salaries, Tips, etc." line instructions for Form 1040.

Note. If a year follows code D, E, F, G, H, or S, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excest 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 "Total Tax" in the Form 1040 instructions.

B—Uncollected Medicare tax on tips. Include this tax on Form 1040. See "Total Tax" in 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),

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

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 "Adjusted Gross Income" in the Form 1040 instructions for how to deduct.

-Nontaxable sick pay (information only, not included in boxes 1, 3, or 5)

K—20% excise tax on excess golden parachute payments. See "Total Tax" 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 \$50,000 (former employees only). See "Total Tax" in the Form 1040

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

P—Excludable moving expense reimbursements paid directly to employee (not included in boxes 1, 3, or 5) Q—Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A 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 (not included in box 1)

T—Adoption benefits (not included in box 1). You **must** 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) W—Employer contributions 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 section 409A on a nonqualified deferred compensation plan. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See "Total Tax" in the Form 1040 instructions.

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions that you may deduct.

contributions that you may deduct.

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. Review the information shown on your annual (for workers over 25) Social Security Statement. 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. 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.

Department of the Treasury - Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

IMPORTANT NOTE:

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

TAX RETURN THIS OTHER **FORM** W-2'S W-2

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

Department of the Treasury - Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

IMPORTANT NOTE:

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

TAX RETURN THIS OTHER **FORM** W-2'S W-2

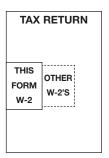
NOTE: THESE ARE SUBSTITUTE WAGE AND TAX STATEMENTS AND ARE ACCEPTABLE FOR FILING WITH YOUR FEDERAL. STATE AND LOCAL/CITY INCOME TAX RETURNS.

Department of the Treasury - Internal Revenue

This information is being furnished to the Internal Revenue Service.

IMPORTANT NOTE:

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



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