## 2020 W-2 and EARNINGS SUMMARY



Employee Reference
Wage and Tax
Statement

Copy 2020 OMB No. 1545-0008

 Copy C for employee's records.

 d
 Control number
 Dept.
 Corp.
 Er

 109412
 CHIC/PXC
 T
 T

Corp. Employer use only T 2031

Employer's name, address, and ZIP code

CAPGEMINI AMERICA INC 6640 SHAFER CT STE#500 ROSEMONT IL 60018

Batch #03205

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

NIKHITHA KODIMYALA 6850 PEACHTREE DUNWOODY RD APT#1007

1	- I#I	<i>,</i> 0, 0									
S	ANDY	' '	SPRI	NGS,G	A	3	0328				
b	Emplo	yer's	FED	ID numb	oer	а	Emplo	ye	e's S	SA	number
	22-2575929						X	XX-X	X	-8903	
1	Wages	s, tip	s, oth	er comp		2	Federa	al	incom	e	tax withheld
			2	2647.	12						3426.76
3	Social	sec	urity v	wages		4	Social	l s	ecurit	у	tax withheld
5	Medic	are 1	wages	and tips	5	6	Medic	are	tax	wii	thheld
7	Social	sec	urity t	ips		8	Alloca	tec	l tips		
9						10	Depen	der	nt car	e	benefits
11	Nonqu	alifie	d pla	ns		12a	See in	strı	uctions	fo	r box 12 13.89
44	Other					12t	DD I				1319.84
14	Other				[	120	;				
					[	120	l k				
						13	Stat en	np.	Ret. pl	an	3rd party sick pay
15	State	Emp	oloyer'	s state	ID no.	16	State	wa	ges, 1	tip	s, etc.
	ΞA	206	1024	l-CX							22647.12
17	State	incor	ne tax			18	Local	wa	ges,	tip	s, etc.
				1166.	89						
19	19 Local income tax			20 Locality name							

1	1 Wages, tips, other comp. 22647.12			Federa	l income tax	withheld 3426.76	
3	3 Social security wages			4 Social security tax withheld			
5	5 Medicare wages and tips		6	Medica	re tax withh	eld	
d	Control number	Dept.		Corp.	Employer	use only	
10	09412 CHIC/PXC				T	2031	
С	c Employer's name, address, and ZIP code						

Employer's name, address, and ZIP code

CAPGEMINI AMERICA INC 6640 SHAFER CT STE#500 ROSEMONT IL 60018

b	Employer's FED ID number 22-2575929	a Employee's SSA number XXX-XX-8903
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12 C 13.89
14	Other	12b DD 1319.84
		12d
		13 Stat emp Ret. plan 3rd party sick pay

e/f Employee's  $% \left( 1\right) =\left( 1\right) \left( 1\right) =\left( 1\right) \left( 1\right) \left($ 

NIKHITHA KODIMYALA 6850 PEACHTREE DUNWOODY RD APT#1007

SANDY SPRINGS,GA 30328

Wage and Tax 2020
Statement
Copy B to be filed with employee's Federal Income Tax Return.

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

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

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	GA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	22,807.79	22,807.79	22,807.79	22,807.79
Plus GTL (C-Box 12)	13.89	13.89	13.89	13.89
Less Other Cafe 125	174.56	174.56	174.56	174.56
Less Exempt Wages	N/A	22,647.12	22,647.12	N/A
Reported W-2 Wages	22,647.12	0.00	0.00	22,647.12

2. Employee Name and Address.

NIKHITHA KODIMYALA 6850 PEACHTREE DUNWOODY RD APT#1007 SANDY SPRINGS,GA 30328

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1 Wages, tips, other c	2 Federal income tax withheld 3426.76			
3 Social security wage	4 Social security tax withheld			
5 Medicare wages and tips		6 Medica	re tax withh	ield
d Control number	Dept.	Corp.	Employer	use only
109412 CHIC/PXC		T	2031	
c Employer's name, address, and ZIP code				

CAPGEMINI AMERICA INC 6640 SHAFER CT STE#500 ROSEMONT IL 60018

b	Employer's FED ID number 22-2575929	a Employee's SSA number XXX-XX-8903				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a C   13.89				
14	Other	<sup>12b</sup> DD   1319.84				
		12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pay				

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

NIKHITHA KODIMYALA 6850 PEACHTREE DUNWOODY RD APT#1007 SANDY SPRINGS,GA 30328

15 State Employer's	s state ID no.	16 5	State	wages,	tips, etc.
GA 2061024	-CX				22647.12
17 State income tax	,	18 <b>L</b>	Local	wages,	tips, etc.
	1166.89				
19 Local income ta	x 2	20 <b>I</b>	Locali	ty nam	е

GA.State Reference Copy
Wage and Tax
Statement
Copy2 to be filed with employee's State Income Tax
Return. 1545-000

1	Wages, tips, other comp. 22647.12			Federal	income tax	withheld 426.76		
3	Social security wages			4 Social security tax withheld				
5	Medicare wages and tips			Medica	re tax withhe	eld		
d	Control number	Dept.		Corp.	Employer	use only		
10	9412 CHIC/PXC				T	2031		
c	Employer's name address and ZIP code							

CAPGEMINI AMERICA INC 6640 SHAFER CT STE#500 ROSEMONT IL 60018

b	Employer's FED ID number	a Employee's SSA number
	22-2575929	XXX-XX-8903
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a
		C   13.89
14	Other	<sup>12b</sup> DD   1319.84
		12c
		12d
		13 Stat emp. Ret. plan 3rd party sick pay

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

NIKHITHA KODIMYALA 6850 PEACHTREE DUNWOODY RD APT#1007 SANDY SPRINGS,GA 30328

15 State	Employer's state ID no.	16	State wages, tips, etc.
GA	2061024-CX		22647.12
17 State	income tax	18	Local wages, tips, etc.
	1166.89		
19 Local	income tax	20	Locality name
		ı	

GA.State Filling Copy

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