								Federal B	ox 1	Soc. Sec. Box 3 &	7 Medicare Box 5
To the right is an Please note that				ents.		Gross Wage			326.10 .00.00		
This information required to file a imposed on you i	tax return, a ne	gligence penal	lty or oth	er sanction may		Group Term Adoption		2	82.72	282.7	72 282.72
Form W-2 Wage Copy C—For EMP	and Tax Stateme	nt 2022	, a rail to	report iti		Deferred Co Section 125 Other Preta		(40:	13.52)	(4013.5 (135195.3	, , ,
						W-2 Wages		2821	.95.30	147000.0	00 282195.30
D. CONTROL NUMBER 002438555801			2022	OMB NO. 154	15-0008	1. WAGES, T	PS, OTHER COMP 28	PENSATION 2195.30	2	. FEDERAL INCOME TA	X WITHHELD 45120.88
B. EMPLOYER IDENTIFICA	TION NUMBER (EIN)	A. EMPLOYEE'S	SOCIAL SEC	JRITY NUMBER		3. SOCIAL SE	CURITY WAGES		4	I. SOCIAL SECURITY TA	
72-0542904		643-23-4924						7000.00			9114.00
C. EMPLOYER'S NAME, A Accenture LLP	DDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TH	PS 2195.30	6	MEDICARE TAX WITH	HHELD 4831.59
500 W. Madison Stree 20th Floor Chicago IL 60661	et					7. SOCIAL SEC		2193.30	8	3. ALLOCATED TIPS	4631.39
Cincago IL 00001						9.			10	D. DEPENDENT CARE B	ENEFITS
E. EMPLOYEE'S FIRST NAI Aseem	ME AND INITIAL	LAST NA Girdha			SUFF.	11. NONQUAL	IFIED PLANS		17	2.a-d See instructions for C	box 12 282.72
333 Andover Dr. Apt 137 Burbank CA 91504		Sirano				14. OTHER CA	SDI	1601.		V W AA	2647.05 1000.00 16990.74
USA F. EMPLOYEE'S ADDRESS	AND ZIP CODE								1	3. STATUTORY RETIR PLAN	EMENT X THIRD-PARTY SICK PAY
15. STATE EMPLOYER 365-6562	S STATE ID NUMBER 2-0	16. STATE WAGE	ES, TIPS, E 283195		INCOME T	AX 20814.15	18. LOCAL WAG	SES, TIPS, ETC.	19. LO	OCAL INCOME TAX	20. LOCALITY NAME

D. CONTROL NUMBE	R			ORGANIST MANAGEMENT	1. WAGES, T	PS, OTHER COMPENSAT	ION	2. FEDERAL INCOME TA	X WITHHELD
002438555801		:	2022	OMB NO. 1545-0008	101	282195	30		45120.88
B. EMPLOYER IDENT	IFICATION NUMBER (EIN)	A. EMPLOYEE'S SO	CIAL SECU	RITY NUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
72-0542904		643-23-4924				147000.	00		9114.00
C. EMPLOYER'S NAM	IE, ADDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	HHELD
Accenture LLP						282195.	30		4831.59
500 W. Madison S 20th Floor Chicago IL 60661					7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS	
Cilicago IL 00001					9.			10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE'S FIRST	NAME AND INITIAL	LAST NAM	E	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d	
Aseem		Girdhar			1 - 1			С	282.72
333 Andover Dr.					14. OTHER CA	CDI	1601.6	V	2647.05
Apt 137					C,	(JDI	1001.0	- W	1000.00
Burbank CA 9150)4							AA	16990.74
USA F. EMPLOYEE'S ADD	RESS AND ZIP CODE							13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY
15. STATE EMPLO	YER'S STATE ID NUMBER	16. STATE WAGES,	TIPS, ETC	C. 17. STATE INCOME T	AX	18. LOCAL WAGES, TII	PS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME
CA 365-6	5562-0	2	283195.	30	20814.15				

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 002438555801	2022	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPEN 2821	ISATION 95.30	2. FEDERAL INCOME T	AX WITHHELD 45120.88
B. EMPLOYER IDENTIFICATION NUMBER (EIR		URITY NUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	
72-0542904	643-23-4924			1470	00.00		9114.00
C. EMPLOYER'S NAME, ADDRESS, AND ZIP	CODE		5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WI	THHELD
Accenture LLP				2821	95.30		4831.59
500 W. Madison Street 20th Floor Chicago IL 60661			7. SOCIAL SE	CURITY TIPS		8. ALLOCATED TIPS	
Cincago IL 00001			9.			10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d	
Aseem	Girdhar		**************************************			C	282.72
333 Andover Dr. Apt 137			14. OTHER CA	A SDI	1601.60	o w	2647.05 1000.00
Burbank CA 91504						AA	16990.74
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE						13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY
15. STATE EMPLOYER'S STATE ID NUMB	ER 16. STATE WAGES, TIPS, E	TC. 17. STATE INCOME	TAX	18. LOCAL WAGES,	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME

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Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL	NUMBER				1. WAGES, T	PS, OTHER COMPENSA	TION	2. FEDERAL INCOME TA	AX WITHHELD
00243855		2022	2 OMB	NO. 1545-0008	200000	282195			45120.88
B. EMPLOYE	R IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL	SECURITY N	JMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY T	AX WITHHELD
72-054290	04	643-23-4924				147000	.00	100	9114.00
C. EMPLOYE	R'S NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	THHELD
Accenture	LLP					282195	.30		4831.59
20th Floor					7. SOCIAL SEC	URITY TIPS		8. ALLOCATED TIPS	
Chicago IL	. 60061				9.			10. DEPENDENT CARE	BENEFITS
E. EMPLOYE	E'S FIRST NAME AND INITIAL	LAST NAME		SUFF.	11. NONQUAL	FIED PLANS		12.a-d See instructions fo	r box 12
Aseem		Girdhar						С	282.72
333 Andov	ver Dr				14. OTHER CA	CDI	1601.6	v	2647.05
Apt 137	vei Di.					. 301	1001.0	- W	1000.00
Burbank C	CA 91504							AA	16990.74
USA	E'S ADDRESS AND ZIP CODE							13. STATUTORY RETI	REMENT X THIRD-PARTY SICK PAY
15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS	S, ETC.	17. STATE INCOME	ΓAX	18. LOCAL WAGES, T	IPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME
CA	365-6562-0	2831	195.30		20814.15				

								Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5
To the right is an						Gross Wage	!S			
Please note that	the Gross amour	nt may include	adjustn	nents.		Txbl Benefit	:s			
This information	is beina furnishe	d to the Inter	nal Reve	nue Servi	ce. If you are	Group Term	Life			
required to file a						Adoption				
imposed on you i	f this income is	taxable and yo	ou fail to	report it.		Deferred Co	mp			
Form W-2 Wage	and Tax Stateme	nt 2022				Section 125	i			
Copy C—For EMP	LOYEE'S RECOR	DS				Other Preta	x/Wage Limit			
						W-2 Wages				
D. CONTROL NUMBER				ONAR NIC	0. 1545-0008	1. WAGES, TI	PS, OTHER COMPENSA	ATION	2. FEDERAL INCOME TA	X WITHHELD
002438555802			2022							
B. EMPLOYER IDENTIFICA	TION NUMBER (EIN)	A. EMPLOYEE'S	SOCIAL SEC	URITY NUMI	BER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY TA	X WITHHELD
72-0542904		643-23-4924								
C. EMPLOYER'S NAME, A Accenture LLP	DDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WITH	HHELD
500 W. Madison Stree	et .					7. SOCIAL SEC	LIDITY TIDE		8. ALLOCATED TIPS	
20th Floor						7. SOCIAL SEC	OKITI IIPS		8. ALLOCATED TIPS	
Chicago IL 60661						9.			10. DEPENDENT CARE B	ENEFITS
										100
E. EMPLOYEE'S FIRST NAI	ME AND INITIAL	LAST NA			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d See instructions for	
Aseem		Girdha	ır						DD	15876.24
333 Andover Dr.						14. OTHER				
Apt 137 Burbank CA 91504										
USA F. EMPLOYEE'S ADDRESS	AND ZIP CODE								13. STATUTORY RETIREMENT PLAN	EMENT X THIRD-PARTY SICK PAY
	S STATE ID NUMBER	16. STATE WAGE	ES, TIPS, E	TC. 17.	STATE INCOME T	AX	18. LOCAL WAGES, 7	TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME

D. CONTROL NUMBER 002438555802		2022	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION		2. FEDERAL INCOME TA	X WITHHELD
B. EMPLOYER IDENTIFICATION NUMBER	EIN) A. EMPLOYEE'S S	OCIAL SECU	JRITY NUMBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY TA	XX WITHHELD
72-0542904	643-23-4924							
C. EMPLOYER'S NAME, ADDRESS, AND	IP CODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	HHELD
Accenture LLP								
500 W. Madison Street				7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS	
20th Floor Chicago IL 60661								
Cincago IE 00001				9.			10. DEPENDENT CARE E	BENEFITS
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NA	ME	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d	
Aseem	Girdha	r					DD	15876.24
333 Andover Dr.				14. OTHER				
Apt 137								
Burbank CA 91504								
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE							13. STATUTORY RETIR	EMENT X THIRD-PARTY SICK PAY
15. STATE EMPLOYER'S STATE ID NUI	MBER 16. STATE WAGE	S, TIPS, ET	C. 17. STATE INCOME T	AX	18. LOCAL WAGES, TIPS, ETC	. 19.	LOCAL INCOME TAX	20. LOCALITY NAME

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2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 002438555802	2022	OMB NO. 1545-0008	1. WAGES, TI	IPS, OTHER COMPENSATION	2. FEDERAL INCOME	TAX WITHHELD
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 72-0542904	A. EMPLOYEE'S SOCIAL SEC 643-23-4924	URITY NUMBER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY	TAX WITHHELD
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CO Accenture LLP	DDE		5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX V	/ITHHELD
500 W. Madison Street 20th Floor Chicago IL 60661			7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS	
-			9.		10. DEPENDENT CAR	E BENEFITS
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d	
Aseem	Girdhar				DD	15876.24
333 Andover Dr. Apt 137 Burbank CA 91504			14. OTHER			
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE						TIREMENT X THIRD-PARTY SICK PAY
15. STATE EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS, E	TC. 17. STATE INCOME T	AX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME

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Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 002438555802		2022 OMB N	O. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD
B. EMPLOYER IDENTIFICATION NUMBER 72-0542904	A. EMPLOYEE'S SO 643-23-4924	CIAL SECURITY NUM	//BER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY	TAX WITHHELD
C. EMPLOYER'S NAME, ADDRESS, AI	ID ZIP CODE			5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX W	THHELD
Accenture LLP 500 W. Madison Street 20th Floor Chicago IL 60661				7. SOCIAL SE	CURITY TIPS	8. ALLOCATED TIPS	
Chicago IL 60001				9.		10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE'S FIRST NAME AND INITASeem	TAL LAST NAM Girdhar	E	SUFF.	11. NONQUA	LIFIED PLANS	12.a-d See instructions f	or box 12 15876.24
333 Andover Dr. Apt 137 Burbank CA 91504				14. OTHER			
USA F. EMPLOYEE'S ADDRESS AND ZIP CO	DE					13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY
15. STATE EMPLOYER'S STATE ID	NUMBER 16. STATE WAGES,	TIPS, ETC. 1	7. STATE INCOME T	AX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME

2022