

008-007578-W2-53188-CGA-2 of 2

Social Security No.:

XXX-XX-4863

a Employee's social security number XXX-XX-4863		d Control number 007156 WY/2S7		7 Social security tips		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903				8 Allocated tips		3 Social security wages		4 Social security tax withheld	
				9		5 Medicare wages and tips		6 Medicare tax withheld	
b Employer identification number (EIN) 22-2575929				10 Dependent care benefits		12a See instructions for box 12 W 7300.00		12b	
e Employee's first name and initial Last name Suff. GUPTA V KALLEPALLI 2535 EMSLIE DR WAUKESHA, WI 53188				11 Nonqualified plans		12c		12d	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		14 Other			
f Employee's address and ZIP code				15 State Employer's State ID No		16 State wages, tips, etc.		17 State income tax	
				18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Employee's Copy

Copy C - For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)
Department of the Treasury-Internal Revenue Service. 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.

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

State Filing Copy

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-4863		d Control number 007156 WY/2S7		7 Social security tips		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903				8 Allocated tips		3 Social security wages		4 Social security tax withheld	
				9		5 Medicare wages and tips		6 Medicare tax withheld	
b Employer identification number (EIN) 22-2575929				10 Dependent care benefits		12a See instructions for box 12 W 7300.00		12b	
e Employee's first name and initial Last name Suff. GUPTA V KALLEPALLI 2535 EMSLIE DR WAUKESHA, WI 53188				11 Nonqualified plans		12c		12d	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		14 Other			
f Employee's address and ZIP code				15 State Employer's State ID No		16 State wages, tips, etc.		17 State income tax	
				18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

2022 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Federal Filing Copy

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-4863		d Control number 007156 WY/2S7		7 Social security tips		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code Capgemini America, Inc. PO Box 17004 Augusta, GA 30903				8 Allocated tips		3 Social security wages		4 Social security tax withheld	
				9		5 Medicare wages and tips		6 Medicare tax withheld	
b Employer identification number (EIN) 22-2575929				10 Dependent care benefits		12a See instructions for box 12 W 7300.00		12b	
e Employee's first name and initial Last name Suff. GUPTA V KALLEPALLI 2535 EMSLIE DR WAUKESHA, WI 53188				11 Nonqualified plans		12c		12d	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		14 Other			
f Employee's address and ZIP code				15 State Employer's State ID No		16 State wages, tips, etc.		17 State income tax	
				18 Local wages, tips, etc.		19 Local income tax		20 Locality name	