						F	ederal Box I	Soc. Sec. Box 3 8	7 Medica	are Box 5		
to the right is all explanation of your trial ranges.						Gross Wage		146798 300			46798.62 300.00	
required to file a tax return, a negligence penalty or other sanction may be					Group Term Adoption	Life	54	.12 54.	12	54.12		
Form W-2 Wage and Tax Statement 2022						Deferred Co Section 125	5	(8740. (6804.	,	0) (6804.00)	
					Other Preta W-2 Wages	x/Wage Limit	131607	7.94 140348.	74 1·	40348.74		
D. CONTROL N 0024476289			2022 OMB NO. 1545-0008			O. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 131607.94			2. FEDERAL INCOME TAX WITHHELD 16139.31		
B. EMPLOYER 72-0542904		ION NUMBER (EIN)	A. EMPLOYEE'S : 800-97-4709	SOCIAL SECU	URITY NUI	MBER	140348.74			4. SOCIAL SECURITY T	AX WITHHELD 8701.6	2
Accenture L	LP.	DRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS 140348.7	74	6. MEDICARE TAX WIT	HHELD 2035.0	6
500 W. Mad 20th Floor Chicago IL 6							7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS		
							9.			10. DEPENDENT CARE	BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Bhanucharantej Chippada				11. NONQUAL	IFIED PLANS		12.a-d See instructions for C	r box 12	54.12 8740.80			
1000 Moore Ridge Road Apt 1113 Morrisville NC 27560				14. OTHER			v w		1118.54 4999.84			
USA F. EMPLOYEE		AND ZIP CODE								13. STATUTORY RETI		RD-PARTY C
	EMPLOYER'S 060054562		16. STATE WAGE			IER 16. STATE WAGES, TIPS, ETC. 17. STATE INCOME TA			S, ETC. 1	9. LOCAL INCOME TAX	20. LOCALITY	NAME

D. CONTROL NU 00244762890		2022	2 OMB	NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSA 131607		2. FEDERAL INCOME TA	X WITHHELD 16139.31	
B. EMPLOYER ID 72-0542904	EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER 800-97-4709		3. SOCIAL SECURITY WAGES 140348.74		.74	4. SOCIAL SECURITY TAX WITHHELD 8701.62				
Accenture LLF		ODE			5. MEDICARE	WAGES AND TIPS 140348	.74	6. MEDICARE TAX WIT	HHELD 2035.06	
500 W. Madison Street 20th Floor Chicago IL 60661					7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS		
, , , , , , , , , , , , , , , , , , ,					9.			10. DEPENDENT CARE E	BENEFITS	
Bhanucharant	FIRST NAME AND INITIAL itej	LAST NAME Chippada		SUFF.	11. NONQUALIFIED PLANS			12.a-d C	54.12 8740.80	
1000 Moore Ridge Road Apt 1113				14. OTHER			V 1118.5 W 4999.8			
Morrisville NC 27560 USA LSA E EMPLOYEE'S ADDRESS AND ZIP CODE									EMENT X THIRD-PARTY	
	MPLOYER'S STATE ID NUMBER 60054562	50	5, ETC. 507.94	17. STATE INCOME	6057.47	18. LOCAL WAGES, TI	IPS, 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 002447628901	2022	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION 131607.94	2. FEDERAL INCOME T	AX WITHHELD 16139.31		
B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SOCIAL SECURITY NUMBER 72-0542904 800-97-4709				CURITY WAGES 140348.74	4. SOCIAL SECURITY	4. SOCIAL SECURITY TAX WITHHELD 8701.62		
C. EMPLOYER'S NAME, ADDRESS, AND ZIF Accenture LLP	CODE		5. MEDICARE	WAGES AND TIPS 140348.74	6. MEDICARE TAX WI	THHELD 2035.06		
500 W. Madison Street 20th F l oor Chicago IL 60661			7. SOCIAL SE	CURITY TIPS	8. ALLOCATED TIPS			
Cilicago IL 00001			9.		10. DEPENDENT CARE	BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d			
Bhanucharantej	Chippada		111000000000000000000000000000000000000		C	54.12		
1000 Moore Ridge Road Apt 1113			14. OTHER		D V	8740.80 1118.54		
Morrisville NC 27560					w	4999.84		
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE					13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY		
15. STATE EMPLOYER'S STATE ID NUME NC 060054562	ER 16. STATE WAGES, TIPS, E 131607	- I TO THE TAX AND	TAX 6057.47	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. CONTRO	DL NUMBER		ONAR N	O. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATIO	N	2. FEDERAL INCOME TA	X WITHHELD	
00244762	28901	202	2 UNB N	0. 1545-0008		131607.94			16139.31	
B. EMPLOY	ER IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL	SECURITY NUM	MBER	3. SOCIAL SE	CURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD		
72-0542904 800-97-4709						140348.74			8701.62	
C. EMPLOY	ER'S NAME, ADDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	HHELD	
Accenture	e LLP					140348.74			2035.06	
500 W. Ma 20th Floor Chicago I					7. SOCIAL SE	CURITY TIPS		8. ALLOCATED TIPS		
Cilicago I	.c 00001				9.			10. DEPENDENT CARE I	BENEFITS	
E. EMPLOY	EE'S FIRST NAME AND INITIAL	LAST NAME		SUFF.	11. NONQUAI	IFIED PLANS		12.a-d See instructions fo		
Bhanucha	arantej	Chippada						С	54.12	
1000 Mac	ore Ridge Road				14. OTHER			D	8740.80	
Apt 1113					-11.30.11.011			V	1118.54	
	e NC 27560							W	4999.84	
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE								13. STATUTORY RETIR	REMENT X THIRD-PARTY SICK PAY	
15. STATE	EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS	S, ETC. 1	7. STATE INCOME T	AX	18. LOCAL WAGES, TIPS,	ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	
NC	060054562	1310	607.94		6057.47					

								Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5	
							Gross Wages				
Please note that	the Gross amour	nt may include	adjustn	nents.		Txbl Benefit	ts				
This information	is beina furnishe	d to the Inter	nal Reve	nue Serv	ice. If you are	Group Term	Life				
required to file a	tax return, a ne	gligence penal	ty or oth	ner sanct	ion may be	Adoption					
imposed on you i	t this income is	taxable and yo	ou fail to	report it		Deferred Co	omp				
Form W-2 Wage a						Section 125	5				
Copy C—For EMP	LOYEE'S RECOR	DS				Other Preta	x/Wage Limit				
						W-2 Wages					
D. CONTROL NUMBER				OMP N	O. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION			2. FEDERAL INCOME TAX WITHHELD		
002447628902			2022								
B. EMPLOYER IDENTIFICA	TION NUMBER (EIN)	A. EMPLOYEE'S	SOCIAL SEC	URITY NUN	ИBER	3. SOCIAL SECURITY WAGES 4. SOCIAL SECURITY TAX WITHHELD					
72-0542904		800-97-4709									
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	TIDITY TIDS		8. ALLOCATED TIPS		
20th Floor						7. SOCIAL SEC	.51.117 1115		O. ALLOCATED TH'S		
Chicago IL 60661						9. 10. DEPENDENT CARE BENEFITS			ENEFITS		
E. EMPLOYEE'S FIRST NAM	ME AND INITIAL	LAST NA			SUFF.	11. NONQUALIFIED PLANS 12.a-d See instructions for box 12			box 12 12422.28		
,	Bhanucharantej Chippada				DD 124				12422.28		
1000 Moore Ridge Ro Apt 1113	oad					14. OTHER					
Morrisville NC 27560											
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE							13. STATUTORY RETIR	EMENT X THIRD-PARTY SICK PAY			
15. STATE EMPLOYER'	S STATE ID NUMBER	16. STATE WAG	ES, TIPS, E	TC. 1	7. STATE INCOME T	AX	18. LOCAL WAGES,	TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME	
										l l	

D. CONTROL NUMBER 002447628902	2022	OMB NO. 1545-0008	1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD
B. EMPLOYER IDENTIFICATION NUMBER (EIN 72-0542904	CURITY NUMBER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY 1	AX WITHHELD	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP Accenture LLP	CODE		5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WI	THHELD
500 W. Madison Street 20th Floor Chicago IL 60661			7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS	
Cilicago IL 60661			9.		10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE'S FIRST NAME AND INITIAL Bhanucharantej	LAST NAME Chippada	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d DD	12422.28
1000 Moore Ridge Road Apt 1113 Morrisville NC 27560 USA USA			14. OTHER		13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY
15. STATE EMPLOYER'S STATE ID NUMBI	R 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 002447628902	2022	OMB NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSATION	2. FEDERAL INCOME TA	X WITHHELD	
B. EMPLOYER IDENTIFICATION NUMBER (EIN) 72-0542904			3. SOCIAL SECURITY WAGES		4. SOCIAL SECURITY TA	4. SOCIAL SECURITY TAX WITHHELD	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CO Accenture LLP	ODE		5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX WIT	HHELD	
500 W. Madison Street 20th F l oor Chicago IL 60661			7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIPS		
cincago 12 00001			9.		10. DEPENDENT CARE I	BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d		
Bhanucharantej	Chippada				DD	12422.28	
1000 Moore Ridge Road Apt 1113 Morrisville NC 27560			14. OTHER				
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE					13. STATUTORY RETIF	REMENT X THIRD-PARTY SICK PAY	
15. STATE EMPLOYER'S STATE ID NUMBER	16. STATE WAGES, TIPS, E	TC. 17. STATE INCOME 1	AX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

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FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER 002447628902		2022	MB NO. 1545-0008	1. WAGES, T	TIPS, OTHER COMPENSATION	2. FEDERAL INCOME	FAX WITHHELD
B. EMPLOYER IDENTIFICATION NUI 72-0542904	MBER (EIN) A. EMPLOYEE'S 800-97-4709		ITY NUMBER	3. SOCIAL SI	CURITY WAGES	4. SOCIAL SECURITY	TAX WITHHELD
C. EMPLOYER'S NAME, ADDRESS,	AND ZIP CODE			5. MEDICARI	WAGES AND TIPS	6. MEDICARE TAX W	ITHHELD
Accenture LLP 500 W. Madison Street 20th Floor Chicago IL 60661				7. SOCIAL SE	CURITY TIPS	8. ALLOCATED TIPS	
Cilicago IL 60661				9.		10. DEPENDENT CARE	BENEFITS
E. EMPLOYEE'S FIRST NAME AND II Bhanucharantej	NITIAL LAST N Chipp		SUFF.	11. NONQUA	LIFIED PLANS	12.a-d See instructions DD	for box 12 12422.28
1000 Moore Ridge Road Apt 1113 Morrisville NC 27560 USA I. EMPLOYEE'S ADDRESS AND ZIP	CODE			14. OTHER		13. STATUTORY RE	TIREMENT X THIRD-PARTY SICK PAY
	D NUMBER 16. STATE WAG	GES, TIPS, ETC	17. STATE INCOME T	ГАХ	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME