7						Federal Box 1	Soc. Sec. E	3ox 3 & 7 M	1edicare Box 5	5
l				Cross Wasses		111140 26	11114	10.26	111140 36	
		n which shows your total wa of any deferred compensat		Gross Wages or Txbl Benefits		111140.36 420.00	11114	10.36 I	111140.36 420.00	
other		hat were subtracted from to	Group Term Life		55.20		55.20	55.20		
-	•	-								
of the	e letter codes used ir	nese forms, including an ex n box 12, are available on a	Deferred Comp Section 125		(1838.50) (2470.26)	(2470	0.26)	(2470.26)		
sepa	rate document.		Other Pretax/W	age Limit	(2170.20)	(217)	,,,,,	(2170120)		
				W-2 Wages		107306.80	10914	15.30 1	109145.30	
	e's social security number	b Employer identification number (EIN	1)	d Control number						
	75-7878	72-0542904		007424822001	1 Wages tips	, other compensation	. 125	ederal income tax		3 No. 1545-0008
	's name, address, and ZIP co	ue			i wages, ups	10730		ederal income tax	Withheld	15867.94
500 V	iture LLP W. Madison Street			3 Social secu			ocial security tax	withheld		
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					5 Medicare W	ages and tips 10914		ledicare tax within	eia	1582.61
1	e's first name and initial	Last name Pra bhu	ff.	7 Social secu	rity tips	8 A	Illocated tips			
Sumanth Prabhu 4209 Dunwoody Gables Dr Apt - 4209					9		10	10 Dependent care benefits		
	NTA GA 30338				9		100	To Dependent care benefits		
					11 Nonqualifi	ed plans		See instructions	s for box 12	
. ,	s's address and ZIP code	•			Statute	ory Retirement Third-		de C		55.20
15 State GA	Employer's state ID Number 0686151-KV	16 State wages, tips, etc. 107306.80	17 State in	5503.77		yee plan sick P	Pay Cox	de D		1838.50
) X	120 Cox	c de V		356.48
18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other		120		$\overline{}$	1000.00
			<u> </u>				Co	ie vv		1000.00
Form W-2	Wage and Tax Statemen	t	· · · · ·	2022				ent of the Treasu		
Copy C—Fo	r EMPLOYEE'S RECORDS			2023		This information is being f egligence penalty or other:				
	e's social security number 75-7878	b Employer identification number (EIN 72-0542904	1)	d Control number 007424822001					0.15	
	's name, address, and ZIP co			007424822001	1 Wages, tips	, other compensation	2 F	ederal income tax		3 No. 1545-0008
	nture LLP				· rrages, aps	10730				15867.94
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Suma	e's first name and initial anth	Last name Pra bhu	Suf	π.	7 Social secu	rity tips	8 A	Illocated tips		
4209	Dunwoody Gables Dr 4209	•			9		10 Dependent care benefits			
	NTA GA 30338				To Separation Care Station					
					11 Nonqualifi	ed plans		See instructions	s for box 12	55.20
. ,	's address and ZIP code	40 04-4	17 State in		40 Statuto	ry Retirement Third-		_{de} C		33.20
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18 Local wa	ages, tips, etc.	19 Local income tax	20 Localit	y name	14 Other		120 Cox	d de W	$\overline{}$	1000.00
			[
	Wage and Tax Statemen			2023	2		Departm	ent of the Treas	ury - Internal	Revenue Servi
Copy B—10	Be Filed With Employee's FE	DENAL TAX RETURN.		2023						
	e's social security number 75-7878	b Employer identification number (EIN 72-0542904	1)	d Control number 007424822001	f —.				OME	3 No. 1545-0008
	's name, address, and ZIP co			007 12 1022001	1 Wages, tips	, other compensation	n 2 F	ederal income tax		3 NO. 1343-0000
Accen	nture LLP					10730				15867.94
500 V	W. Madison Street Floor				3 Social secu	rity wages 10914	- 1	ocial security tax	withheld	6767.01
	go IL 60661				5 Medicare w			ledicare tax withh	eld	0,0,101
o Employed	e's first name and initial	Last name	Suf	f		10914				1582.61
Suma	enth		7 Social secu	rity tips	8 A	Illocated tips				
Apt -	Dunwoody Gables Dr 4209	-		9 10 Dependent care benefits						
ATLANTA GA 30338 USA										
f Employee	's address and ZIP code				11 Nonqualifi	ed plans		See instructions de C	s for box 12	55.20
15 State	Employer's state ID Number	16 State wages, tips, etc.	17 State in	ncome tax		ory Retirement Third-	-party 12i	b		
GA	0686151-KV	107306.80	 -	5503.77	employ	vee plan sick P	2ay Cox	de D		1838.50
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			ļ		Gurei		120 Cox	d de W		1000.00
	Wage and Tax Statement	t te. City. or local Income Tax Return		2023			Departm	ent of the Treas	ury - Internal	Revenue Servi

To the right is information which shows your total w W-2 box and the amount of any deferred compense other pretax deductions that were subtracted from wages to arrive at your W-2 wages. General instructions for these forms, including an e of the letter codes used in box 12, are available on separate document. a Employee's social security number 447-75-7878 b Employer identification number (E 72-0542904 c Employer's name, address, and ZIP code	ation and total explanation	Group Term Life Adoption In Deferred Comp Section 125	efits orm Life Comp .25 etax/Wage Limit ges							
Accenture LLP 500 W. Madison Street 20th Floor Chicago IL 60661			3 Social security wages 5 Medicare wages and tips	4 Social security tax withheld 6 Medicare tax withheld						
e Employee's first name and initial Last name Surnanth Prabhu 4209 Dunwoody Gables Dr Apt - 4209 ATLANTA GA 30338 USA	Su	ff.	7 Social security tips 9 11 Nonqualified plans	8 Allocated tips 10 Dependent care benefits 12a See instructions for box 12						
f Employee's address and ZIP code			Statuten, Betirement Third next,	Code DD 10983.72						
15 State Employer's state ID Number 16 State wages, tips, etc.	17 State i	ncome tax	13 Statutory Retirement Third-party employee plan sick Pay	Code 12c						
18 Local wages, tips, etc. 19 Local income tax	20 Locali	ty name	14 Other	Code 12d Code						
Form W-2 Wage and Tax Statement Copy C—For EMPLOYEE'S RECORDS	1	2023	This information is being furnished to	artment of the Treasury—Internal Revenue Service the Internal Revenue Service. If you are required to file a tax return, a by be imposed on you if this income is taxable and you fail to report it						
a Employee's social security number 447-75-7878 b Employer identification number (E	EIN)	d Control number 007424822002		OMB No. 1545-0008						
c Employer's name, address, and ZIP code			1 Wages, tips, other compensation	2 Federal income tax withheld						
Accenture LLP 500 W. Madison Street 20th Floor		3 Social security wages	4 Social security tax withheld							
Chicago IL 60661			5 Medicare wages and tips	6 Medicare tax withheld						
e Employee's first name and initial Last name Sumanth Prabhu 4209 Dunwoody Gables Dr	Su	ff.	7 Social security tips	8 Allocated tips						
Apt - 4209 ATLANTA GA 30338 USA		9 11 Nonqualified plans	10 Dependent care benefits 12a See instructions for box 12							
f Employee's address and ZIP code				Code DD 10983.72						
15 State Employer's state ID Number 16 State wages, tips, etc.	17 State i	ncome tax	13 Statutory Retirement Third-party employee plan sick Pay	12b Code						
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10 Local Wages, ups, etc.			14 Other	12d Code						
			De	continuent of the Traceure, Internal Devenue Consider						
Form W-2 Wage and Tax Statement Copy B—To Be Filed With Employee's FEDERAL Tax Return.		2023	Del	partment of the Treasury - Internal Revenue Service						
a Employee's social security number 447-75-7878 b Employer identification number (E	:IN)	d Control number 007424822002	[OMB No. 1545-0008						
c Employer's name, address, and ZIP code Accenture LLP			1 Wages, tips, other compensation	2 Federal income tax withheld						
500 W. Madison Street 20th Floor Chicago IL 60661			3 Social security wages	4 Social security tax withheld						
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f Employee's address and ZIP code			11 Nonquaimed plans	Code DD 10983.72						
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				12c Code						
18 Local wages, tips, etc. 19 Local income tax	20 Locali	ty name	14 Other	Code 12d						
18 Local wages, tips, etc. 19 Local income tax Form W-2 Wage and Tax Statement	20 Locali	ty name	14 Other	Code						

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