Copy B To Be Filed Wi FEDERAL Tax Return	th Employee's	2023 OMB No. 1545-0008
a Employee's social	1 Wages, tips, other comp.	2 Federal income tax withheld
security number	119683.44	10851.36
832-39-8258	3 Social security wages	4 Social security tax withheld
<b>b</b> Employer ID number		
45-4023875	5 Medicare wages and tips	6 Medicare tax withheld
c Employer's name, address	s, and ZIP code	
Coforge BPM	Inc	
1550 S Tech	Lane Ste 210	
Meridian, ID	83642	
d Control Number GA7030 101	04091 Bhagat Govind	10104
e Employee's first name and	d initial Last name	
Govind Bh	agat	
233 Summer D	r	
Atlanta, GA	30328	
f Employee's address, and		
7 Social security tips	8 Allocated tips	9 Verification Code
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
		W 499.92
	4 Other 25 316.56	12b Code
Retirement plan		12c Code
Third-party sick pay		12d Code
GA 3401447-	PQ 119683.44	6347.52
15 State Emplr.'s state I.D.		17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name
Form W-2 Wage and Tax Sta This information is being furni	tement shed to the Internal Revenue Service	Dept. of the Treasury - IRS

**b** Employer ID number 45-4023875 5 Medicare wages and tips 6 Medicare tax withheld c Employer's name, address, and ZIP code Coforge BPM Inc 1550 S Tech Lane Ste 210 Meridian, ID 83642 d Control Number 10104091 Bhagat Govind 10104 GA7030 e Employee's first name and initial Last name Govind Bhagat 233 Summer Dr Atlanta, GA 30328 f Employee's address, and ZIP code 8 Allocated tips 7 Social security tips 9 Verification Code 10 Dependent care benefits 11 Nonqualified plans 12a Code See inst. for box 12 499.92 W 13 Statutory employee 14 Other 12b Code S125 316.56 Retirement plan 12c Code Third-party sick pay 12d Code 3401447-PQ 119683.44 6347.52 GA 15 State Emplr.'s state I.D. # 18 Local wages, tips, etc. 17 State income tax 16 State wages, tips, etc. 19 Local income tax 20 Locality name Form W-2 Wage and Tax Statement

Dept. of the Treasi
This information is being furnished to the IRS. If you are required to file a tax return, a negligence Dept. of the Treasury - IRS penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

OMB No. 1545-0008

2 Federal income tax withheld

4 Social security tax withheld

10851.36

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)

1 Wages, tips, other comp.

3 Social security wages

119683.44

a Employee's social

security number

832-39-8258

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 2023 1545-0008 a Employee's social 1 Wages, tips, other comp. 2 Federal income tax withheld security number 119683.44 10851.36 832-39-8258 3 Social security wages 4 Social security tax withheld **b** Employer ID number 45-4023875 5 Medicare wages and tips 6 Medicare tax withheld c Employer's name, address, and ZIP code Coforge BPM Inc 1550 S Tech Lane Ste 210 Meridian, ID 83642 d Control Number GA7030 10104091 Bhagat Govind 10104 e Employee's first name and initial Last name Govind Bhagat 233 Summer Dr Atlanta, GA 30328 f Employee's address, and ZIP code 7 Social security tips 8 Allocated tips 9 Verification Code 11 Nonqualified plans See inst. for box 12 10 Dependent care benefits 12a Code 499.92 W 13 Statutory employee 14 Other 12b Code s125 316.56 12c Code Retirement plan Third-party sick pay 12d Code 119683.44 6347.52 3401447-PQ GΑ 15 State Emplr.'s state I.D. # 16 State wages, tips, etc.
19 Local income tax 17 State income tax 20 Locality name 18 Local wages, tips, etc.

Extra Employee Copy		<b>2023</b> OMB No. 1545-00	
a Employee's social	1 Wages, tips, other comp.		
security number	119683.44	10851.36	
832-39-8258	3 Social security wages	4 Social security tax withheld	_
<b>b</b> Employer ID number			
45-4023875	5 Medicare wages and tips	6 Medicare tax withheld	
c Employer's name, address	s, and ZIP code	I	
Coforge BPM	Ina		
1550 S Tech			
Meridian, ID			
Meridian, id	03042		
d Control Number	0.4001 Phases G		_
	04091 Bhagat Go	ovind 10104	
e Employee's first name and	I initial Last name		
Govind Bh	agat		
233 Summer D	_		
Atlanta, GA			
f Employee's address, and			
7 Social security tips	8 Allocated tips	9 Verification Code	_
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	2
		W 499.92	
	Other 316.56	12b Code	
	25 310.50		
Retirement plan		12c Code	
Third-party sick pay		12d Code	
Tima party diok pay		124 0000	
GA 3401447-	PQ 11968	3.44 6347.52	
15 State Emplr.'s state I.D.			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
Form W-2 Wage and Tax Sta	tomont	Dept. of the Treasury - I	DC
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