,				Federal B	ox 1 Soc	Sec. Box 3 & 7	Medicare Box 5	
To the right is information which shows your total wages by W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total wages to arrive at your W-2 wages.			Gross Wages	9797:	2 33	97972.33	97972.33	
			Txbl Benefits Group Term Life		3.04	68.04	68.04	
General instructions for these forms, including an explanation		Adoption						
of the letter codes used in separate document.	box 12, are available on a		Deferred Comp Section 125	(7037 (123		(123.00)	(123.00)	
			Other Pretax/Wa W-2 Wages	ge Limit 9087	9.88	97917.37	97917.37	
a Employee's social security number	b Employer identification number (EIM	N)	d Control number					
743-82-6694	72-0542904		007430948501	4 18/ 4141		2 Federal income t		No. 1545-0008
c Employer's name, address, and ZIP co	de			1 Wages, tips, other comp	90879.88	2 Federal Income t	ax withheid	14277.12
Accenture LLP 500 W. Madison Street 20th Floor				3 Social security wages	97917.37	4 Social security ta	ax withheld	6070.88
Chicago IL 60661				5 Medicare wages and tip		6 Medicare tax with	hheld	6070.66
e Employee's first name and initial	Last name	Su	ff		97917.37			1419.69
Harshitha	Melur Narendra	ou		7 Social security tips		8 Allocated tips		
85 Rio Robles E Unit 1119 San Jose CA 95134 USA				9		10 Dependent care	benefits	
				11 Nonqualified plans		12a See instruction	ons for box 12	
f Employee's address and ZIP code	I.o.o.			13 Statutory Retireme	ent Third-party	Code C		68.04
15 State Employer's state ID Number CA 365-6562-0	16 State wages, tips, etc. 90879.88	17 State i	ncome tax 5699.31	employee plan	sick Pay	Code D		7037.49
401 1	401	00.1		×		Code V	1	1948.80
18 Local wages, tips, etc.	19 Local income tax	20 Localit	ty name	14 Other CA SDI	880.63	12d Code DD	1	522.29
Form W-2 Wage and Tax Statemen Copy C—For EMPLOYEE'S RECORDS	nt		2023		n is being furnished	partment of the Trea to the Internal Revenue Ser may be imposed on you if th	vice. If you are requir	red to file a tax return
a Employee's social security number	b Employer identification number (EIN	N)	d Control number				12002	
743-82-6694 c Employer's name, address, and ZIP co	72 - 0542904		007430948501	1 Wages, tips, other comp	ensation	2 Federal income t		No. 1545-0008
Accenture LLP				- magos, apo, caro com	90879.88			14277.12
500 W. Madison Street 20th Floor				3 Social security wages	97917.37	4 Social security to	ax withheld	6070.88
Chicago IL 60661				5 Medicare wages and tip		6 Medicare tax with	hheld	
e Employee's first name and initial	Last name	Su	ff.	7.6	97917.37	8 Allocated tips		1419.69
Harshitha 85 Rio Robles E Unit 1119	Melur Narendra			7 Social security tips		6 Allocated tips		
San Jose CA 95134 USA				9		10 Dependent care	benefits	
33.1				11 Nonqualified plans		12a See instruction	ons for box 12	
f Employee's address and ZIP code						Code C		68.04
15 State	16 State wages, tips, etc. 90879.88	17 State i	ncome tax 5699.31	13 Statutory Retireme employee plan	ent Third-party sick Pay	12b Code D	1	7037.49
303-0302-0	90079.00	·	3099.31			12c Code V		1948.80
18 Local wages, tips, etc.	19 Local income tax	20 Localit	ty name	14 Other CA SDI	880.63	12d		
		†		- CA 3DI	880.00	Code DD		522.29
Form W-2 Wage and Tax Statemen			2022		De	epartment of the Trea	asury - Internal	Revenue Servi
Copy B—To Be Filed With Employee's FE	EDERAL Tax Return.		2023					
a Employee's social security number	b Employer identification number (EIN	N)	d Control number	1				
743-82-6694 c Employer's name, address, and ZIP co	72 - 0542904		007430948501	1 Wages, tips, other comp	ensation	2 Federal income t		No. 1545-000
Accenture LLP	de			T wages, ups, other comp	90879.88	2 i ederai income i	ax withheid	14277.12
500 W. Madison Street 20th Floor				3 Social security wages	07017 27	4 Social security to	ax withheld	6070.00
Chicago IL 60661				5 Medicare wages and tip	97917.37	6 Medicare tax with	hheld	6070.88
e Employee's first name and initial	Last name	Su	4		97917.37			1419.69
Harshitha	Melur Narendra	ou		7 Social security tips		8 Allocated tips		
85 Rio Robles E Unit 1119 San Jose CA 95134				GI .		10 Dependent care	benefits	
USA				9		To Dependent care		
							50 VO 000	
f Employee's address and ZIP code				11 Nonqualified plans		12a See instruction	50 VO 000	68.04
15 State Employer's state ID Number	7 6 9 6	17 State i	ncome tax		ent Third-party sick Pay	12a See instruction Code C	50 VO 000	
(50.05)	16 State wages, tips, etc. 90879.88	17 State i	ncome tax 5699.31	11 Nonqualified plans 12 Statutory Retireme	ent Third-party sick Pay	12a See instruction Code C 12b Code D 12c	50 VO 000	7037.49
15 State Employer's state ID Number	7 6 9 6	17 State i	5699.31	11 Nonqualified plans Statutory Retireme employee plan	ent Third-party sick Pay	12a See instruction Code C 12b Code D 12c Code V 12d	50 VO 000	