

1 Wages, tips, other compensation 1442.18		2 Federal Income tax withheld	
3 Social security wages 1442.18		4 Social security tax withheld 89.42	
5 Medicare wages and tips 1442.18		6 Medicare tax withheld 20.91	
a Employee's SSA number 684-23-7710		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01627153	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
REISSUED STATEMENT			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other CA SDI Tax 12.98		12c	
		12d	
e Employee's first name and initial Last name Suff. SIDDHANT AMOL SHAH 25200CARLOS BEE BLVD HAYWARD CA 94542			
f Employee's address and ZIP code			
15 State CA	Employer's state ID 410-6138-3	18 Local wages, tips, etc.	
16 State wages, tips, etc. 1442.18		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy C for Employee's records			

1 Wages, tips, other compensation 1442.18		2 Federal Income tax withheld	
3 Social security wages 1442.18		4 Social security tax withheld 89.42	
5 Medicare wages and tips 1442.18		6 Medicare tax withheld 20.91	
a Employee's SSA number 684-23-7710		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01627153	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
REISSUED STATEMENT			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other CA SDI Tax 12.98		12c	
		12d	
e Employee's first name and initial Last name Suff. SIDDHANT AMOL SHAH 25200CARLOS BEE BLVD HAYWARD CA 94542			
f Employee's address and ZIP code			
15 State CA	Employer's state ID 410-6138-3	18 Local wages, tips, etc.	
16 State wages, tips, etc. 1442.18		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation 1442.18		2 Federal Income tax withheld	
3 Social security wages 1442.18		4 Social security tax withheld 89.42	
5 Medicare wages and tips 1442.18		6 Medicare tax withheld 20.91	
a Employee's SSA number 684-23-7710		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01627153	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
REISSUED STATEMENT			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other CA SDI Tax 12.98		12c	
		12d	
e Employee's first name and initial Last name Suff. SIDDHANT AMOL SHAH 25200CARLOS BEE BLVD HAYWARD CA 94542			
f Employee's address and ZIP code			
15 State CA	Employer's state ID 410-6138-3	18 Local wages, tips, etc.	
16 State wages, tips, etc. 1442.18		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation 1442.18		2 Federal Income tax withheld	
3 Social security wages 1442.18		4 Social security tax withheld 89.42	
5 Medicare wages and tips 1442.18		6 Medicare tax withheld 20.91	
a Employee's SSA number 684-23-7710		Employer use only	
b Employer's FED ID number 56-1874931		d Control number 01627153	
c Employer's name, address, and ZIP code Compass Group USA, Inc. 2400 Yorkmont Rd Charlotte NC 28217			
REISSUED STATEMENT			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 Statutory Employee <input type="checkbox"/>	Retirement plan <input type="checkbox"/>	Third-Party Sick pay <input type="checkbox"/>	12b
14 Other CA SDI Tax 12.98		12c	
		12d	
e Employee's first name and initial Last name Suff. SIDDHANT AMOL SHAH 25200CARLOS BEE BLVD HAYWARD CA 94542			
f Employee's address and ZIP code			
15 State CA	Employer's state ID 410-6138-3	18 Local wages, tips, etc.	
16 State wages, tips, etc. 1442.18		19 Local income tax	
17 State income tax		20 Locality name	
Form W-2 Wage and Tax Statement 2023 OMB. No. 1545-0008 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			