

Year To Date Earnings

Regular - Semi Mo. 135132.58
Group Term Life > \$50000 115.50

Year To Date Deductions

Pretax Medical Deduction 2445.40
Vision Plan 156.40
Pretax Dental Plan 321.54
Health Care Spending Account 136.36
Group Term Life-\$50000 Offset 115.50

006-009557-W2-75454-CGA

Social Security No.:
XXX-XX-5650

a Employee's social security number XXX-XX-5650		d Control number 030923 WY/2S7		7 Social security tips	1 Wages, tips, other compensation 132188.38	2 Federal income tax withheld 22638.37
c Employer's name, address, and ZIP code Cappgemini America, Inc. PO BOX 17004 AUGUSTA, GA 30903				8 Allocated tips	3 Social security wages 132188.38	4 Social security tax withheld 8195.68
				9	5 Medicare wages and tips 132188.38	6 Medicare tax withheld 1916.73
				10 Dependent care benefits	12a See instructions for box 12 C 115.50	12b DD 15184.82
b Employer identification number (EIN) 22-2575929		e Employee's first name and initial Last name Suff. SARASWATHI SEEMAKURTHI 1911 CANYON LN MELISSA, TX 75454		11 Nonqualified plans	12c	12d
f Employee's address and ZIP code				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	14 Other	
15 State Employer's State ID No	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

2023 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Employee's Copy

Copy C - For EMPLOYEE'S RECORDS. (See Notice to Employee on back.)
Department of the Treasury-Internal Revenue Service. This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

2023 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

State Filing Copy

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-5650		d Control number 030923 WY/2S7		7 Social security tips	1 Wages, tips, other compensation 132188.38	2 Federal income tax withheld 22638.37
c Employer's name, address, and ZIP code Cappgemini America, Inc. PO BOX 17004 AUGUSTA, GA 30903				8 Allocated tips	3 Social security wages 132188.38	4 Social security tax withheld 8195.68
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f Employee's address and ZIP code				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	14 Other	
15 State Employer's State ID No	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

2023 Form W-2 Wage and Tax Statement
OMB No. 1545-0008

Federal Filing Copy

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
Department of the Treasury-Internal Revenue Service.

a Employee's social security number XXX-XX-5650		d Control number 030923 WY/2S7		7 Social security tips	1 Wages, tips, other compensation 132188.38	2 Federal income tax withheld 22638.37
c Employer's name, address, and ZIP code Cappgemini America, Inc. PO BOX 17004 AUGUSTA, GA 30903				8 Allocated tips	3 Social security wages 132188.38	4 Social security tax withheld 8195.68
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15 State Employer's State ID No	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	