Form W-2 Wage and Tax Statement 2023

| J | | | | | | Сору | C, for | employee's reco | rds | |
|--|-----------------------------------|-----------------|---|--------------|-------------------------------------|-------------------------|------------|---|-----------------|---|
| c Employer's name, address, and ZIP code VISAM TECHNOLOGIES INC 8950 GARY BURNS DR STE B FRISCO TX 75034-8596 | | | d Control number 0072-Y472D584 000000252 - 0STAFF b Employer identification number (EIN) a Employee's social security numb | | | | | Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 | | |
| | | | 20-8909882 | | | -67-0531 | | 1 Wages, tips, other compensation 7050.00 | | 2 Federal income tax withheld 185.61 |
| | | | 13 Statutory employee | | rement Third-party olan sick pay | | | 3 Social security wages | | 4 Social security tax withheld |
| e Employee's name, address, and ZIP code | | | 12 See instructions for be | ox 12 | 14 Other | | | 5 Medicare wages and | I tips | 6 Medicare tax withheld |
| MANOJ MACHA 9425 ROLATER RD | | | | | | | | 7 Social Security Tips | | 8 Allocated Tips |
| APT 335 FRISCO TX 75035 | | | | | | | | 10 Dependent care ber | nefits | 11 Nonqualified plans |
| | _ | | | | | | | | | |
| 15 State Employer's state ID number NC 600693742 | 16 State wages, tips, etc. 750.00 | 17 State inc | nome tax 11.00 | 18 Local wa | ges, tips, etc. | 19 Loc | cal income | e tax | 20 Locality nam | • |
| This information is being furnished to the Internal f | , , | ax return, a ne | egligence penalty or other | sanction may | pe imposed on yo | u if this income is tax | able and | you fail to report it. | · · · · · · | |

| Form | W-2 | Wage | and | Tax | Statement | 2023 |
|------|-----|------|-----|-----|-----------|------|
|------|-----|------|-----|-----|-----------|------|

| Form vv-2 vvage and Tax | Statement 2023 | | | | | Сору | y B, to b | e filed with empl | oyee's FEDE | ERAL tax return | |
|--|-----------------------------------|-------------|----------------------------|---|-----------------|----------------------|--------------|-------------------------|--|---|--|
| c Employer's name, address, and ZIP code VISAM TECHNOLOGIES INC 8950 GARY BURNS DR STE B FRISCO TX 75034-8596 | | | | 2-Y472D584 0000252 - 0 number (EIN) | STAFF | ocial security num | Void | | epartment of the Treasury - Internal Revenue Service MB No. 1545-0008 | | |
| | | | 20-8909882 053-67-0531 | | | 67-0531 | | 1 Wages, tips, other or | 7050.00 | 2 Federal income tax withheld 185.61 | |
| | | | 13 Statutory employee | 3 Statutory Retirement Third-p- employée plan sick p | | Third-pai sick pa | arty ay | 3 Social security wages | | 4 Social security tax withheld | |
| e Employee's name, address, and ZIP code | | | 12 See instructions for bo | ox 12 | 14 Other | | | 5 Medicare wages and | tips | 6 Medicare tax withheld | |
| MANOJ MACHA 9425 ROLATER RD | | | | | | | | 7 Social Security Tips | | 8 Allocated Tips | |
| APT 335 FRISCO TX 75035 | | | | | | | | 10 Dependent care ber | nefits | 11 Nonqualified plans | |
| | | | | | | | | | | | |
| 15 State Employer's state ID number NC 600693742 | 16 State wages, tips, etc. 750.00 | 17 State in | 11.00 | 18 Local wa | ges, tips, etc. | 19 L | Local income | e tax | 20 Locality name | 9 | |
| | | | | | | | | • | | | |

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.

Form W-2 Wage and Tax Statement 2023

| 1 Offit W-2 Wage and Tax Sta | terrierit 2023 | | | | | Сору | 2, to be | e filed with employee's tax | return for NC | | |
|--|------------------------|-------------|--|---|-----------------|--------|------------|--|--------------------------------|--|--|
| c Employer's name, address, and ZIP code VISAM TECHNOLOGIES INC 8950 GARY BURNS DR STE B FRISCO TX 75034-8596 | | | d Control number 0072-Y472D584 0000000252 - 0STAFF b Employer identification number (EIN) a Employee's social security number | | | | | Department of the Treasury - Internal Revenue Service OMB No. 1545-0008 | | | |
| | | | 20-8909882 053-67-0531 | | | 7-0531 | | 1 Wages, tips, other compensation 7050.00 2 Federal income tax withheld 185 3 Social security wages 4 Social security tax withheld | | | |
| | | | 13 Statutory employee | Retirement Third-party plan sick pay | | | ′ | 3 Social security wages | 4 Social security tax withheld | | |
| e Employee's name, address, and ZIP code | | | 12 See instructions for bo | ox 12 | 14 Other | | | 5 Medicare wages and tips | 6 Medicare tax withheld | | |
| MANOJ MACHA 9425 ROLATER RD | | | | | | | | 7 Social Security Tips | 8 Allocated Tips | | |
| APT 335 FRISCO TX 75035 | | | | | | | | 10 Dependent care benefits | 11 Nonqualified plans | | |
| | | | | | l | | | | | | |
| 1 | tate wages, tips, etc. | 17 State in | | 18 Local wa | ges, tips, etc. | 19 Lo | cal income | tax 20 Locality na | me | | |
| NC 600693742 | 750.00 | | 11.00 | | | | | | | | |

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| c Employer's name, address, and ZIP code | | | d Control number Vo | | | | | Department of t OMB No. 1545- | | pensation 2 Federal income tax withheld 4 Social security tax withheld 5 6 Medicare tax withheld 8 Allocated Tips | |
|--|----------------|----------------------------|--------------------------------|--|-------------|-----------------|---------------------|----------------------------------|------------------------|---|--------------------------------|
| | | | | b Employer identification number (EIN) a Employee's social security number | | | | | | | |
| | | | | | | | | | 1 Wages, tips, other o | ompensation | 2 Federal income tax withheld |
| | | | | 13 Statutory employee | Reti | rement olan | Third-pa sick pa | arty ay | 3 Social security wage | s | 4 Social security tax withheld |
| e Employee's name, address, and ZIP code | | | 12 See instructions for box 12 | | 14 Other | | | 5 Medicare wages and tips | | 6 Medicare tax withheld | |
| | | | | | | | | | 7 Social Security Tips | | , i |
| | | | | | | | | | 10 Dependent care ber | nefits | 11 Nonqualified plans |
| | | | | | | | | | | | |
| 15 State Employer's s | tate ID number | 16 State wages, tips, etc. | 17 State in | come tax | 18 Local wa | ges, tips, etc. | 19 | Local inco | ne tax | 20 Locality nam | e |
| | | | | | | | | | | | |