OMB No. 1545-0008		a Employee's social security number $328-57-2739$		b Employer identification number (EIN) 26-1181940	
c Employer's name, address, and ZIP code APPLET SYSTEMS LLC 20915 Ashburn Road, Suite#215 Ashburn VA 20147				3 Social security wages	Form W-2
		41440.00 4 Social security tax withheld	4030.23 5 Medicare wages and tips	3584.00 6 Medicare tax withheld	1 01111 44-2
		222.21	3584.00	51.97	Wage and
		7 Social security tips		9 Verification code	Tax Statement
d Control number					
e Employee's first name and initial Last name Suff.		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12	2017
Sandeep Kumar Poddutturi		13	14 Other	12b	Copy 2
f Employee's address and ZIP code		Statutory employee		12c	To Be Filed with
		Retirement plan		120	Employee's State, City, or Local Income
		Third-party sick pay		12d	Tax Return
15 State	16 State wages, tips, etc. 41440.00	17 State income tax 1481.17	18 Local wages, tips, etc. 3584.00	19 Local income tax 44.80	0 Locality name WILM
				Department of the 1	Freasury—Internal Revenue Servic
		I. Fandan da a dalam da a and	h	I Food with effective and a	(FIN)
OMB No. 1545-0008		a Employee's social security num $328-5$	57-2739	b Employer identification number $26-118$	
c Employer's name, address, and ZIP code APPLET SYSTEMS LLC 20915 Ashburn Road, Suite#215 Ashburn VA 20147		1 Wages, tips, other comp	2 Federal income tax withheld	3 Social security wages	
		41440.00			Form W-2
		4 Social security tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	Wage and
		222.21	3584.00		Tax Statement
		7 Social security tips	8 Allocated tips	9 Verification code	Tax Statement
d Control number					0047
e Employee's first name and initial Last name Suff. Sandeep Kumar Poddutturi 2903 stonebridge blvd New Castle De New castle DE 19720		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12	2017
					Copy 2
		13	14 Other	12b	Сору 2
		Statutory employee		12c	To Be Filed with
		Retirement plan			Employee's State, City, or Local
		Third-party sick pay		12d	Income Tax Return
f Employee's address and ZIP code					
15 State Employer's state ID number DE 1 - 261181940 - 001	16 State wages, tips, etc. 41440.00	17 State income tax 1481.17	18 Local wages, tips, etc. 3584.00	19 Local income tax 44.80	20 Locality name WILM
			•	Department of the 1	reasury—Internal Revenue Service
OMB No. 1545-0008		a Employee's social security num	her	b Employer identification number	(FIN)
OWE 140: 1040 0000			7-2739	26-118	
e Employer's name, address, and ZIP code APPLET SYSTEMS LLC 20915 Ashburn Road, Suite#215 Ashburn VA 20147		1 Wages, tips, other comp	2 Federal income tax withheld	3 Social security wages	F 14/ 0
		41440.00			Form W-2
		4 Social security tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	Wage and
		222.21 7 Social security tips	3584.00	51.97 9 Verification code	Tax Statement
		7 Social security tips	• Allocated tips	y verification code	Tax otatomone
d Control number	40 December 1 and home 5th	Ad November de la lace	40	2017	
e Employee's first name and initial Last name Suff.		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12	2017
Sandeep Kumar Poddutturi					Copy C
2903 stonebridge blvd New Castle De		13	14 Other	12b	335, 3
New castle DE 19720		Statutory employee		12c	For EMPLOYEE'S
		Retirement plan			RECORDS (See Notice to
		Third-party sick pay		12d	Employee)
f Employee's address and ZIP code 15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
DE 1-261181940-001	41440.00	17 State Income tax 1481.17	3584.00		WILM

19 Local income tax 44.80