<b>b Employer's Identification number</b> $20 - 4060273$	12a See Instructions for Box 12	1 Wades, tips, other compensation	2 Federal Income tax withheid
c Employer's name, address, and ZIP code	\$	144057.60	28280.01
MM INFOTECH INC	12b	3 Social security wages	4 Social security tax withheld
MA INFOLECII INC	\$	128400.00	7960.80
4819 EMPEROR BLVD	12c	5 Medicare wages and tips	6 Medicare tax withheld
	\$	144057.60	2088.84
SUITE 400	12d	7 Social security tips	8 Allocated tips
DURHAM NC 27703	IS		
e Employee's first name and initial Last name		9 Verification code	10 Dependent care benefits
907993	This information is being furnished to the Internal Revenue Service		
		11 Nongualified plans	13 Statutory Retirement Third-party
ANIL POTTEM	Copy B To Be Filed with		employee plan sick pay
3829 184 PL SE			
	1 <b>.</b>	14 Other	
	Tax Return		
BOTHELL WA 98012	a Employee's soc. sec. no		
	514-25-3977		
f Employee's address and ZIP code			00 Landitumente
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Form W-2 Wage and Tax Statement 2018 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	Vith Employee's FEDERAL Tax Return
2020			

b Employer's Identification number		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld	
c Employer's name, address, and ZIP code	20-4000275		\$	144057.60	28280.01
MM INFOTECH INC			12b	3 Social security wages	4 Social security tax withheld
MM INFOILEII INC			\$	128400.00	7960.80
			12c	5 Medicare wages and tips	6 Medicare tax withheld
4819 EMPEROR BLVD			\$	144057.60	2088.84
SUITE 400			12d	7 Social security tips	8 Allocated tips
DURHAM NC 27703			\$		
e Employee's first name and initial	Last name		-	9 Verification code	10 Dependent care benefits
	907993				
ANIL POTTEM			Copy 2 for State, City, or	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
			Local Tax Departments		
3829 184 PL SE			Loour rux Dopartinonto	14 Other	
BOTHELL WA 98012			a Employee's soc. sec. no	-	
				-	
f Employee's address and ZIP code			514-25-3977		
15 State Employer's state I.D. No. 16 S	tate wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
++-					
E	Demonstrated the Terror	la fan al Davience Ormiter			
Form W-2 Wage and Tax Statement 2018	bepartment of the Treasu	ry-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's ST	ALE, GITT, OF LOCAL TAX Departments

REV 01/15/19 OSP

b Employer's Identification number	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code 20-4060273	\$	144057.60	28280.01
MM INFOTECH INC	12b	3 Social security wages	4 Social security tax withheld
	ls	128400.00	7960.80
4010 EMPEROR DIVE	12c	5 Medicare wages and tips	6 Medicare tax withheld
4819 EMPEROR BLVD	\$	144057.60	2088.84
SUITE 400	12d	7 Social security tips	8 Allocated tips
DURHAM NC 27703	1\$		
e Employee's first name and initial Last name		9 Verification code	10 Dependent care benefits
907993			
ANIL POTTEM	Copy 2 for State, City, or	11 Nonqualified plans	13 Statutory Retirement Third-party plan sick pay
	Local Tax Departments		
3829 184 PL SE	Local lax Departments	14 Other	
BOTHELL WA 98012		_	
	a Employee's soc. sec. no	4	
f Employee's address and ZIP code	514-25-3977		
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Form W-2 Wage and Tax Statement 2018 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments			

b Employer's Identification number	20-4060273		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	20 1000275		\$	144057.60	28280.01
MM INFOTECH INC	•		12b	3 Social security wages	4 Social security tax withheld
MA INFOILCH INC			\$	128400.00	
1010 ENDEDOD DITE			12c	5 Medicare wages and tips	6 Medicare tax withheld
4819 EMPEROR BLVD			\$	144057.60	2088.84
SUITE 400			12d	7 Social security tips	8 Allocated tips
DURHAM NC 27703			\$		
e Employee's first name and initial	Last name		This information is being furnished to the	9 Verification code	10 Dependent care benefits
	907993		Internal Revenue Service. If you are required to file a tax return, a negligence		
ANIL POTTEM			on you if this income is taxable and you	11 Nongualified plans	13 Statutory Retirement Third-party plan sick pay
3829 184 PL SE			fail to report it.	-	
JOZJ IOH FI JE			Copy C for Employee's	14 Other	
			Records (see notice to		
BOTHELL WA 98012			Employee on back.)		
Dollinger wir boots			a Employee's soc. sec. no		
f Employee's address and ZIP code			514-25-3977		
15 State Employer's state I.D. No. 16 S	tate wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
			1		

Form W-2 Wage and Tax Statement 2018 Department of the Treasury-Internal Revenue Service

Copy C For Employee's Records