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|--|--|--|--|--|--|---|
| 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 | | MM INFOTECH INC 4819 EMPEROR BLVD SUITE 400 DURHAM NC 27703 | | \$ | 144057.60 | 28280.01 |
| e Employee's first name and initial | | ANIL POTTEM 3829 184 PL SE BOTHHELL WA 98012 | | 12b | 3 Social security wages | 4 Social security tax withheld |
| Last name | | 907993 | | \$ | 128400.00 | 7960.80 |
| f Employee's address and ZIP code | | 4819 EMPEROR BLVD SUITE 400 DURHAM NC 27703 | | 12c | 5 Medicare wages and tips | 6 Medicare tax withheld |
| 15 State | | Employer's state I.D. No. | | \$ | 144057.60 | 2088.84 |
| 16 State wages, tips, etc. | | 17 State income tax | | 12d | 7 Social security tips | 8 Allocated tips |
| ----- | | ----- | | \$ | | |
| Form W-2 Wage and Tax Statement 2018 Department of the Treasury-Internal Revenue Service | | | | OMB # 1545-0008 | | Copy B To Be Filed With Employee's FEDERAL Tax Return |

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