Copy B-To Be Filed With Federal Tax Return.	Employee's	41-0852411 OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 44305.80	2 Federal income tax withheld 5367.78
054-27-2113	3 Social security wages	4 Social security tax withheld
b Employer ID number (EIN)		
27-4285643	5 Medicare wages and tips	6 Medicare tax withheld
c Employer's name, address, a	nd ZIP code	
SERVER MANAGEI 5525 N MACARTHU	MENT SERVICES LLC JR BLVD STE 655	:
IRVING	TX	75038
d Control number		
e Employee's name, address, a	and ZIP code	Suff.
RAGHUNATH 1600 PHYLLIS ST A		
BENTONVILLE	AR	72712
7 Social security tips	8 Allocated tips	9 Verification code
10 Dependent care benefits	11 Nonqualified plans	12a Code
13 Statutory employee 14 Othe	PT	12b Code
Retirement plan		12c Code
Third-party sick pay		12d Code
AR 70863512-WHW	44305.80	2245.25
15 State Employer's state ID nu	mber 16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name
Form W-2 Wage and Tax State	 ement <b>2017</b>	Dept. of the Treasury IRS

This information is being furnished to the Internal Revenue Service. DAA

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Copy C-For EMPLOYEI Notice to Employeeon th	e bac	CORDS (See k of Copy B.)		41-0852411 OMB No. 1545-0008
a Employee's soc. sec. no.	1 W	ages, tips, other comp. 44305.80	2 F	Federal income tax withheld 5367.78
054-27-2113 b Employer ID number (EIN)	3 Sc	cial security wages	4 5	Social security tax withheld
27-4285643	5 M	edicare wages and tips	6 N	Medicare tax withheld
c Employer's name, address,	and ZI	P code		
SERVER MANAG 5525 N MACARTH		NT SERVICES LLC BLVD STE 655	;	
IRVING		TX		75038
d Control number				
e Employee's name, address	, and Z	P code		Suff.
RAGHUNATH 1600 PHYLLIS ST		KUNCHAKURI 801		
BENTONVILLE		AR		72712
7 Social security tips	8 A	located tips	9	Verification code
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13 Statutory employee 14 Ot	her		12	b Code
Retirement plan			12	c Code
Third-party sick pay			12	d Code
AR 70863512-WHV	/	44305.80		2245.25
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Copy 2-To Be Filed Wit City, or Local Income 1	h Employee's State, ax Return.	41-0852411 OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 44305.80	2 Federal income tax withheld 5367.78
054-27-2113	3 Social security wages	4 Social security tax withheld
b Employer ID number (EIN)		
27-4285643	5 Medicare wages and tips	6 Medicare tax withheld
c Employer's name, address,	and ZIP code	
	EMENT SERVICES LLO HUR BLVD STE 655	С
IRVING	ΤX	75038
d Control number		
	, and ZIP code	Sut
e Employee's name, address		
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RAGHUNATH 1600 PHYLLIS ST BENTONVILLE 7 Social security tips 10 Dependent care benefits 13 Statutory employee Retirement plan Third-party sick pay  AR 70863512-WHV	KUNCHAKURI APT 801  AF  8 Allocated tips  11 Nonqualified plans  ther	9 Verification code  12a Code  12b Code  12c Code  12d Code  12d Code

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return. 41-0852411 OMB No. 1545-0008 2 Federal income tax withheld 5367.78 a Employee's soc. sec. no. 1 Wages, tips, 054-27-2113 3 Social security wages 4 Social security tax withheld b Employer ID number (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 27-4285643 c Employer's name, address, and ZIP code SERVER MANAGEMENT SERVICES LLC 5525 N MACARTHUR BLVD STE 655 **IRVING** TX 75038 d Control number 37 e Employee's name, address, and ZIP code Suff. RAGHUNATH **KUNCHAKURI** 1600 PHYLLIS ST APT 801 **BENTONVILLE** AR 72712 7 Social security tips 8 Allocated tips 9 Verification code 10 Dependent care benefits 11 Nonqualified plans 12a Code 12b Code 13 Statutory employee 14 Other Retirement plan 12c Code Third-party sick pay 12d Code AR |70863512-WHW 44305.80 2245.25 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

Form W-2 Wage and Tax Statement

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2017

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