Txbl Benefits Txbl Benefit									Federal Box 1	Soc. Sec. Box 3 8	7 Medicare Box 5		
Adoption Deferred Comp (3446.60) Section 125 (814.20)									42 82270.	42 82270.42			
Section 125							Life	24.	42 24.	42 24.42			
Other Pretax/Wage Limit W-2 Wages 78034.04 81480.64 8148						Deferred Co							
W-2 Wages 78034.04 81480.64 81480.61 81480.62 81480.63 81480.63 81480.63 81480.63 81480.63 81480.63 81480.63 81480.63 81480.63 81480.63 81480.63 81480.64 81480.64 81480.63 81480.64 81480.63 81480.64 81480.64 81480.63 81480.64 81480.64 81480.64 81480.63 81480.64 81480.63 81480.64 81480.63 81480.64 81480.63 81480.64 81480.6							Section 125	i	(814.2	20) (814.2	0) (814.20)		
D. CONTROL NUMBER 000300273201 This Information is being furnished to the Internal Revenue Service 2021 OMB NO. 1545-0008 1. WAGES, TIPS, OTHER COMPENSATION 78034.04 2. FEDERAL INCOME TAX WITHHELD 10958.82 8. EMPLOYER IDENTIFICATION NUMBER 82-3701316 597-35-6697 3. SOCIAL SECURITY NUMBER 81480.64 5051.80 5051							Other Preta	x/Wage Limit					
00300273201 Institution to the internal Revenue Service 2021 OMB NO. 1545-0008 78034.04 10958.82							W-2 Wages		78034.	.04 81480.	64 81480.64		
82-3701316 597-35-6697 81480.64 5051.80		This information is being furnished OMP NO 1545-0009					· · ·						
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Veoneer US Inc 26360 American Drive Southfield MI 48034 E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME Srikantham Srikantham S. MEDICARE WAGES AND TIPS 81480.64 1.8 LALOCATED TIPS 8. ALLOCATED TIPS 1.0 DEPENDENT CARE BENEFITS 1.1 NONQUALIFIED PLANS D 3446 262 Woodside Ct. 14. OTHER D 5397	B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER						3. SOCIAL SE			4. SOCIAL SECURITY TO			
Veoneer US Inc 26360 American Drive Southfield MI 48034 7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS													
26360 American Drive Southfield MI 48034 7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS 9. 10. DEPENDENT CARE BENEFITS E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Karthikeya Srikantham 262 Woodside Ct. 11. NONQUALIFIED PLANS 12.a-d C 24 D 3446 D 3346	, , , ,									6. MEDICARE TAX WIT			
Southfield MI 48034 9. 10. DEPENDENT CARE BENEFITS		/e					7 COCIAL CEC		.04	9 ALLOCATED TIDE	1101.47		
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. 11. NONQUALIFIED PLANS 12.a-d C 24 Karthikeya Srikantham D 3446 262 Woodside Ct. 14. OTHER DD 5397							7. SOCIAL SEC	OKITI IIF3		8. ALLOCATED TIPS			
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262 Woodside Ct. 14. OTHER DD 5397							11. NONQUAL	IFIED PLANS		_	24.42		
ESE WOODSIGE CO										_	3446.60		
							14. OTHER			DD	5397.87		
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE 13. STATUTORY RETIREMENT THIRD PARTY SICK PAY	USA F. EMPLOYEE'S ADDRESS AND ZIP CODE									EMPLOYEE PLAN	SICK PAY		
15. STATE MI STATE LD. NO. 82-3701316 16. STATE WAGES, TIPS, ETC. 78034.04 17. STATE INCOME TAX 3315.41 18. LOCAL WAGES, TIPS, ETC. 19. LOCAL INCOME TAX 20. LOCALITY NAME			16. STATE WAGE			E INCOME T		18. LOCAL WAGES, T	IPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME		

D. CONTROL	LNUMBER	This Information is	formation is being furnished Internal Revenue Service 2021 OMB NO. 1545-0008		1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME T	2. FEDERAL INCOME TAX WITHHELD			
000300273	3201	to the Internal Rev			ОМВ	MB NO. 1545-0008	•	78034.04		10958.82	
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER							3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY	4. SOCIAL SECURITY TAX WITHHELD	
82-3701316 597-35-6697								81480.64		5051.80	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE								WAGES AND TIPS	6. MEDICARE TAX W	6. MEDICARE TAX WITHHELD	
Veoneer U								81480.64		1181.47	
	26360 American Drive Southfield MI 48034						7. SOCIAL SE	CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS	
							9.		10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.					SUFF.	11. NONQUAL	IFIED PLANS	12.a-d C	24.42		
Karthikeya Srikantham								D	3446.60		
262 Woodside Ct.							14. OTHER		DD	5397.87	
Apt. 226											
	HIIIs MI 48	307								IREMENT THIRD PARTY	
USA F. EMPLOYE	USA F. EMPLOYEE'S ADDRESS AND ZIP CODE								13. STATUTORY RET		
15. STATE	EMPLOYER'S	STATE I.D. NO.	16. STATE WAG	ES, TIPS, E	TC.	17. STATE INCOME	TAX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	
MI	82-37013	16		78034	1.04		3315.41				

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2021

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL N 0003002732		This Information is to the Internal Rev	is being furnished evenue Service 2021 OMB		OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 78034.04		2. FEDERAL INCOME TAX WITHHELD 10958.82				
B. EMPLOYER	IDENTIFICAT	ION NUMBER	A. EMPLOYEE'S	SOCIAL SECU	IRITY NUMBER	3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD			
82-3701316 597-35-6697							81480.64			5051.80		
C. EMPLOYER'S	'S NAME, AD	DRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD			
Veoneer US	Inc						81480.64		1181.47			
26360 American Drive Southfield MI 48034						7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS			
								10. DEPENDENT CARE BENEFITS				
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.						11. NONQUALIFIED PLANS			12.a-d C	24.42		
Karthikeya Srikantham								D	3446.60			
262 Woodside Ct.						14. OTHER			DD	5397.87		
Apt. 226 Rochester HIIIs MI 48307												
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE									13. STATUTORY RETII	REMENT X THIRD PARTY SICK PAY		
		STATE I.D. NO.	16. STATE WAG				18. LOCAL WAGES, TIPS, ETC	. 19.	LOCAL INCOME TAX	20. LOCALITY NAME		
MI	82-37013	16		78034.	04	3315.41						

Copy 2 To be filed with Employee's STATE, CITY, or LOCAL tax return

2021

Dept. of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

		and rax s									
D. CONTROL	NUMBER	This Information is	being furnished			1. WAGES, TIPS, OTHER COMPENSATION			2. FEDERAL INCOME TA	2. FEDERAL INCOME TAX WITHHELD	
000300273				2021	OMB NO. 1545-0008		78034.04			10958.82	
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER							3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD	
82-370131	6		597-35-6697			81480.64				5051.80	
C. EMPLOYER	R'S NAME, AI	DDRESS, AND ZIP C	ODE			5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WIT	THHELD	
Veoneer US						81480.64				1181.47	
26360 Ame		2				7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS		
Southfield MI 48034											
									10. DEPENDENT CARE I	10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.						11. NONQUALIFIED PLANS			12.a-d C	24.42	
Karthikeya Srikantham									D	3446.60	
262 Woodside Ct.									DD	5397.87	
Apt. 226											
Rochester HIlls MI 48307									13. STATUTORY RETIR	REMENT X THIRD PARTY	
USA F. EMPLOYEE'S ADDRESS AND ZIP CODE									EMPLOYEE PLAN		
15. STATE	EMPLOYER'S	STATE I.D. NO.	16. STATE WAG	ES, TIPS, ETC	C. 17. STATE INCOME 1	AX	18. LOCAL WAGES,	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	
MI	82-37013	16		78034.0	04	3315.41					