

D. CONTROL NUMBER 000018262501		This information is being furnished to the Internal Revenue Service		OMB NO. 1545 - 0008		1. WAGES, TIPS, OTHER, COMPENSATION 52753.88		2. FEDERAL INCOME TAX WITHHELD 8836.50	
B. EMPLOYER IDENTIFICATION NUMBER 26-3694085			A. EMPLOYEE'S SOCIAL SECURITY NUMBER 770-69-9129			3. SOCIAL SECURITY WAGES 54907.50		4. SOCIAL SECURITY TAX WITHHELD 3404.27	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Altair ProductDesign Inc. 1820 E Big Beaver Rd Troy MI 48083						5. MEDICARE WAGES AND TIPS 54907.50		6. MEDICARE TAX WITHHELD 796.16	
						7. SOCIAL SECURITY TIPS		8. ALLOCATED TIPS	
						9.		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL Kumaraswamy			LAST NAME Mummidi			11. NONQUALIFIED PLANS		12. a-d D 2153.62	
						14. OTHER			
F. EMPLOYEE'S ADDRESS AND ZIP CODE 1368 Glenview Drive Waterford Township MI 48327 USA						13. Statutory Employee <input type="checkbox"/>		Retirement Plan <input type="checkbox"/>	
13. Statutory Employee <input type="checkbox"/>		Retirement Plan <input checked="" type="checkbox"/>		Third-Party Sick Pay <input type="checkbox"/>		15. STATE MI		EMPLOYER'S STATE I.D. NO. 26-3694085	
16. STATE WAGES, TIPS, ETC. 52753.88		17. STATE INCOME TAX 2242.05		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX		20. LOCALITY NAME	

Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return  
FORM **W-2 Wage and Tax Statement** **2021** Dept. of the Treasury - Internal Revenue Service

FOLD AND TEAR ALONG PERFORATION

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# W-2 AND WAGE SUMMARY

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