

FORM W-2 Wage and Tax Statement
Copy C for EMPLOYEE'S RECORDS (See notice on back of Copy 2)

Dept. of the Treasury • Internal Revenue Service

These substitute W-2 Wage and Tax Statements are acceptable for filing with your Federal, State and Local Income Tax Returns. If you worked in multiple locations, or had several forms of special compensation, you may receive more than one of these documents.

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

The white copies of the W-2 forms are for your tax returns. The blue copy is for your records. General instructions, including an explanation of the letter codes in box 12, are on the other side of the page.

To the right is an explanation of your W-2 wages. Please note that the Gross amount may include adjustments.

	Federal Box 1	Soc. Sec. Box 3 and 7	Medicare Box 5
Gross Wages	44277.33	44277.33	44277.33
Taxi Benefits			
Group Term Life			
Adoption	9.12	9.12	9.12
Deferred Comp	(1430.00)		
Section 125	(203.70)	(203.70)	(203.70)
Other Pretax/Wage Limit			
W-2 Wages	42652.75	44082.75	44082.75

D. CONTROL NUMBER 000353848501		This information is being furnished to the Internal Revenue Service		OMB NO. 1545-0008		1. WAGES, TIPS, OTHER COMPENSATION 42652.75		2. FEDERAL INCOME TAX WITHHELD 6185.36	
B. EMPLOYER IDENTIFICATION NUMBER 26-1668808		A. EMPLOYEE'S SOCIAL SECURITY NUMBER 474-67-1898		3. SOCIAL SECURITY WAGES 44082.75		4. SOCIAL SECURITY TAX WITHHELD 2733.13		5. MEDICARE TAX WITHHELD 639.20	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE Nexteer Automotive Corporation 3900 E. Holland Road Saginaw MI 48601		13. Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-Party Sick Pay <input type="checkbox"/>		7. SOCIAL SECURITY TIPS 44082.75		8. ALLOCATED TIPS		10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL Sindhujia		LAST NAME Posamvaripalli		SUFF		11. NONQUALIFIED PLANS		12. a-d C 9.12 D 1430.00 W 100.00 DD 2165.30	
F. EMPLOYEE'S ADDRESS AND ZIP CODE		15. STATE MI		16. STATE WAGES, TIPS, ETC 42652.75		17. STATE INCOME TAX 1812.35		18. LOCAL WAGES, TIPS, ETC	
		19. EMPLOYER'S STATE ID NO 26-1668808				19. LOCAL INCOME TAX		20. LOCALITY NAME	

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W-2 AND WAGE SUMMARY