Form W-2 Wage and Tax Statement 2021	7 Social security tips	1 Wages, tips, other comp. 3380.0	2 Federal income tax withheld	
c Employer's name, address, and ZIP code UNIVERSITY OF MICHIGAN	8 Allocated tips	3 Social security wages	4 Social security tax withheld	
PAYROLL OFFICE	9	5 Medicare wages and tips	6 Medicare tax withheld	
3003 S. STATE STREET ANN ARBOR MI 48109-1279	10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12	
e Employee's name, address, and ZIP code	13 Statutory Retirement Third-party plan sick pay	14 Other	<b>12b</b>	
C LEELA SAIRAM SANTOSH KUMAR	<b>b</b> Employer identification number (EIN	ND.		
518 THOMSON ST	38-6006309	v)	ç <sub>q</sub>	
FLINT MI 48503-6116	a Employee's social security no.			
	180-88-4401		d e	
15 State Employer's state I.D. no. 16 State wages, tips, etc.	17 State income tax 18 Lo	ocal wages, tips, etc. <b>19</b> Local i	ncome tax 20 Locality name	
MI 38-6006309 3380	.00 143.67	3380.00	16.90 MIFLT	

Copy B To Be Filed With Employee's FEDERAL Tax Return

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

			riegilgence penalty of other salicitor may be impos	sed on you it this income is taxable and you fail to repo	
Form W-2 Wage and Tax Statem	ent 2021	7 Social security tips	1 Wages, tips, other comp. 3380.00	2 Federal income tax withheld	
c Employer's name, address, and ZIP code UNIVERSITY OF MICHIGAN PAYROLL OFFICE 3003 S. STATE STREET ANN ARBOR MI 48109-1279 e Employee's name, address, and ZIP code C LEELA SAIRAM SANTOSH KUMAR 518 THOMSON ST FLINT MI 48503-6116		8 Allocated tips	3 Social security wages	<ul> <li>4 Social security tax withheld</li> <li>6 Medicare tax withheld</li> <li>12a See instructions for box 12</li> </ul>	
		9	5 Medicare wages and tips		
		10 Dependent care benefits	11 Nonqualified plans		
		13         Statutory employee         Retirement plan         Third-party sick pay           b         Employee identification number (EIN 38-6006309         Third-party	14 Other	12b 12c 03 04 05 05 05 05 05 05 05 05 05 05	
		a Employee's social security no. 180-88-4401	_	<b>12d</b>	
15 State Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax 18 Lo	ocal wages, tips, etc. 19 Local in	come tax 20 Locality name	
MI 38-6006309	3380	.00 143.67	3380.00	16.90 MIFLT	
Copy C For EMPLOYEE'S RECORDS (See No	tice to Employee on back	of Copy B) o	MB No. 1545-0008	Dept. of the Treasury - IRS	

Form W-2 Wage and Tax Statement	t 2021	7 Social security tips	1 Wages, tips, other com	p. <b>2</b> Federal incon 3380.00	ne tax withheld
c Employer's name, address, and ZIP code UNIVERSITY OF MICHIGAN PAYROLL OFFICE		8 Allocated tips	3 Social security wages	4 Social securit	y tax withheld
		9	5 Medicare wages and ti	ps 6 Medicare tax	withheld
3003 S. STATE STREET ANN ARBOR MI 48109-1279		10 Dependent care benefits	11 Nonqualified plans	<b>12a</b>	
e Employee's name, address, and ZIP code C LEELA SAIRAM SANTOSH KUMAR 518 THOMSON ST FLINT MI 48503-6116		13 Statutory Retirement Third- plan sick p	av 14 Other	<b>12b</b>	
		<b>b</b> Employer identification numb 38-6006309	er (EIN)	12c	
		a Employee's social security no 180-88-4401		<b>12d</b>	
15 State Employer's state I.D. no.	16 State wages, tips, etc.		18 Local wages, tips, etc.	19 Local income tax	20 Locality name
MI 38-6006309	3380.0	143.67	3380.00	16.90	) MIFLT
Copy 2 To Be Filed With Employee's State, City,	urn	OMB No. 1545-0008	Dept. of	the Treasury - IRS	

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

Dept. of the Treasury - IRS

Form W-2 Wage and Tax Statemen	t 2021	7 Social security tips	1 Wages, tips, other com	np. 3380.00	2 Federal income tax withheld	
c Employer's name, address, and ZIP code UNIVERSITY OF MICHIGAN PAYROLL OFFICE 3003 S. STATE STREET ANN ARBOR MI 48109-1279		8 Allocated tips	3 Social security wages		4 Social security tax withheld	
		9	5 Medicare wages and ti	5 Medicare wages and tips 6 Medicare tax withheld		
		10 Dependent care benefits	11 Nonqualified plans		12a	
e Employee's name, address, and ZIP code C LEELA SAIRAM SANTOSH KUMAR 518 THOMSON ST FLINT MI 48503-6116		13 Statutory Retirement Third employee plan sick p	-party bay 14 Other		12b	
					Vod e	
		<b>b</b> Employer identification number (EIN) 38-6006309			12c	
		a Employee's social security no 180-88-4401	).			
15         State         Employer's state I.D. no.           MI         38-6006309         38-6006309	<b>16</b> State wages, tips, etc. 3380.00	17 State income tax 143.67	<b>18</b> Local wages, tips, etc. 3380.00	19 Local inc	ome tax 20 Locality name 16.90 MIFLT	
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