									Federal Box 1	Soc. Sec. Box 3 &	7 Medicare Box 5
To the rig Please no	ght is an e ote that tl	explanation of y he Gross amour	our W-2 wage nt may include	es. adjustn	nents.		_	Gross Wages 136521.38 136521.38 Txbl Benefits 34.32 34.32			
required imposed Form W-2	to file a t on you if 2 Wage a	s being furnishe ax return, a ne this income is t nd Tax Stateme OYEE'S RECORI	gligence penal taxable and yo ent 2022	Ity or oth	ner san			omp	(3199.8- (5196.59	9) (5196.5	, , ,
D. CONTROL N	HIMADED						W-2 Wages	DC OTHER COMMENS	128159.2	27 131359.	
0000360641	101			2022		NO. 1545-0008	· ·	PS, OTHER COMPENS. 12815			21773.04
B. EMPLOYER I 26-3694085		TON NUMBER (EIN)	A. EMPLOYEE'S : 738-71-5178	SOCIAL SEC	URITY N	UMBER	3. SOCIAL SE	CURITY WAGES 13135	9.11	4. SOCIAL SECURITY TA	X WITHHELD 8144.26
Altair Produc	ctDesign I	DDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS 13135	9.11	6. MEDICARE TAX WIT	HHELD 1904.71
1820 E Big E Troy MI 4808							7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS	
							9.			10. DEPENDENT CARE E	ENEFITS
E. EMPLOYEE'S Sabarish Red		IE AND INITIAL	LAST NA Duvvu			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d See instructions for C	box 12 34.32
	HOLLOW I	DRIVE, APT 10					14. OTHER			D DD	3199.84 5963.88
F. EMPLOYEE'S	S ADDRESS A	AND ZIP CODE								13. STATUTORY RETIRE PLAN	EMENT X THIRD-PARTY SICK PAY
	EMPLOYER'S 26-36940	STATE ID NUMBER 85	16. STATE WAGE	ES, TIPS, E 128159		17. STATE INCOME TO	^{AX} 5446.77	18. LOCAL WAGES,	TIPS, ETC. 19.	LOCAL INCOME TAX	20. LOCALITY NAME
D. CONTROL N	HINADED						1 WACES T	PS, OTHER COMPENS	ATION	2. FEDERAL INCOME TA	VANITHIELD
0000360641	101			2022		NO. 1545-0008	101	12815			21773.04
B. EMPLOYER I 26-3694085		TION NUMBER (EIN)	A. EMPLOYEE'S : 738-71-5178	SOCIAL SEC	URITY N	UMBER	3. SOCIAL SE	CURITY WAGES 13135	9.11	4. SOCIAL SECURITY TA	X WITHHELD 8144.26
C. EMPLOYER'S		DDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIPS 13135	9.11	6. MEDICARE TAX WIT	HHELD 1904.71
1820 E Big E Troy MI 4808	Beaver Rd						7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS	
							9.			10. DEPENDENT CARE E	ENEFITS
E. EMPLOYEE'S Sabarish Red		E AND INITIAL	LAST NA Duvvu			SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	34.32
	HOLLOW I	DRIVE, APT 10					14. OTHER			D DD	3199.84 5963.88
F. EMPLOYEE'S										EMPLOYEE PLAN	EMENT X THIRD-PARTY SICK PAY
	EMPLOYER'S 26-36940	STATE ID NUMBER 85	16. STATE WAGE	ES, TIPS, E 128159		17. STATE INCOME TO	AX 5446.77	18. LOCAL WAGES,	TIPS, ETC. 19.	LOCAL INCOME TAX	20. LOCALITY NAME
		th Employee's S		ocal Inc	ome T	ax Return	2022	Depar	tment of th	ne Treasury - Interi	nal Revenue Service
D. CONTROL N 0000360641				2022	ОМВ	NO. 1545-0008	1. WAGES, TI	PS, OTHER COMPENS		2. FEDERAL INCOME TA	X WITHHELD 21773.04
	IDENTIFICAT	TION NUMBER (EIN)	A. EMPLOYEE'S : 738-71-5178	SOCIAL SEC	URITY N	UMBER	3. SOCIAL SE	CURITY WAGES	9.11	4. SOCIAL SECURITY TA	
		DDRESS, AND ZIP C					5. MEDICARE	WAGES AND TIPS		6. MEDICARE TAX WIT	

D. CONTROL 000036064		2022	OMB NO. 1545-0008	1. WAGES, T	PS, OTHER COMPENSATION 128159.27	2. FEDERAL INCOME T	AX WITHHELD 21773.04		
B. EMPLOYER 26-369408	R IDENTIFICATION NUMBER (EIN)	A. EMPLOYEE'S SOCIAL SEC 738-71-5178	CURITY NUMBER	3. SOCIAL SE	CURITY WAGES 131359.11	4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD 8144.26		
Altair Produ	R'S NAME, ADDRESS, AND ZIP C uctDesign Inc.	ODE		5. MEDICARE	WAGES AND TIPS 131359.11	6. MEDICARE TAX WI	THHELD 1904.71		
1820 E Big Beaver Rd Troy MI 48083					CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
						10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS		
E. EMPLOYEE Sabarish Re	e's FIRST NAME AND INITIAL Reddy	LAST NAME Duvvuru	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d C	34.32		
5885 PLUM HOLLOW DRIVE, APT 10 YPSILANTI MI 48197 USA				14. OTHER		D DD	3199.84 5963.88		
	E'S ADDRESS AND ZIP CODE					13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY		
15. STATE MI	EMPLOYER'S STATE ID NUMBER 26-3694085	16. STATE WAGES, TIPS, E 128159		TAX 5446.77	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME		

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

2022

Department of the Treasury - Internal Revenue Service

FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER			ON AR NI	0 1545 0000	1. WAGES, T	IPS, OTHER COMPENSATION	2. FEDERAL INCOME 1	AX WITHHELD	
000036064101		2022	OMB NO.	0. 1545-0008		128159.27		21773.04	
B. EMPLOYER IDENTIFICATION NUMBER (EIN) A. EMPLOYEE'S SO			CURITY NUM	/BER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURITY	4. SOCIAL SECURITY TAX WITHHELD	
26-3694085 738-71-5178					131359.11			8144.26	
C. EMPLOYER'S NAME,	ADDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX W	6. MEDICARE TAX WITHHELD	
Altair ProductDesign Inc.						131359.11		1904.71	
1820 E Big Beaver Rd Troy MI 48083						CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS	
							10. DEPENDENT CARE	10. DEPENDENT CARE BENEFITS	
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME				SUFF.	11. NONQUAL	IFIED PLANS	12.a-d See instructions	12.a-d See instructions for box 12	
Sabarish Reddy Duvvu							C	34.32	
5885 PLUM HOLLOW DRIVE, APT 10 YPSILANTI MI 48197 USA					14. OTHER		DD	3199.84 5963.88	
F. EMPLOYEE'S ADDRESS AND ZIP CODE							13. STATUTORY RET	REMENT X THIRD-PARTY SICK PAY	
PRESIDENCE AND SECURITION OF THE PROPERTY OF T		16. STATE WAGES, TIPS, E	2007/00/20	7. STATE INCOME 1	ΓAX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	
MI 26-3694	4085	128159	9.27		5446.77				