

Form **W-2** Wage and Tax Statement **2020**

Copy B - To Be Filed With Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service
OMB No. 1545-0008 Department of the Treasury—Internal Revenue Service

1	Wages, tips, other compensation	4529.40	2	Federal income tax withheld	467.93
3	Social security wages		4	Social security tax withheld	
5	Medicare wages and tips		6	Medicare tax withheld	
b	Employer identification number	84-1144747			
c	Employer's name, address, and ZIP code	AURARIA HIGHER EDUCATION CENTER 1201 5TH STREET SUITE 370 DENVER CO 80217-3361			
a	Employee's social security number	***-**-7041	d	Control number	
7	Social security tips		8	Allocated tips	
9			10	Dependent care benefits	
11	Nonqualified plans		12a	See instructions for box 12	
14	Other	12b			
		12c			
		12d			
		13	Statutory employee	Retirement plan	Third-party sick pay
e	Employee's name, address, and ZIP code	GIRDHAR REDDY VENGALAM 9217 TREYBURN DR CHARLOTTE, NC 28216			
15	State CO	Employer's state ID number 00635309	16	State wages, tips, etc.	4529.40
17	State income tax	74.00	18	Local wages, tips, etc.	4529.40
19	Local income tax	23.00	20	Locality name	DENLWT

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Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee
on the back of Copy B.)
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Copy 2 - To Be Filed With Employee's State, City, or Local
Income Tax Return.
OMB No. 1545-0008 Department of the Treasury—Internal Revenue Service

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