

Employee Reference Copy  
**W-2** Wage and Tax Statement **2022**  
Copy C for employee's records. OMB No. 1545-0008

d Control number 0000029560 W9Z	Dept. 039502	Corp. RLG3	Employer use only A S 627281
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c Employer's name, address, and ZIP code  
**FEDEX CORPORATE SERVICES**  
 30 FEDEX PARKWAY  
 2ND FLOOR HORIZONTAL  
 COLLIERVILLE,, TN 38017

e/f Employee's name, address, and ZIP code  
**VYSHNAVI AITU**  
 1070 MILANO PT  
 APT 1021  
 COLORADO SPRINGS, CO 80921

b Employer's FED ID number 62-1808017	a Employee's SSA number XXX-XX-0114
1 Wages, tips, other comp. 81889.00	2 Federal income tax withheld 10783.50
3 Social security wages 21658.38	4 Social security tax withheld 1342.82
5 Medicare wages and tips 21658.38	6 Medicare tax withheld 314.05
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12 C   118.44
4 Other	12b D   5271.65
	12c W   949.84
	12d DD   5078.40
	13 Stat emp. Ret. plan 3rd party sick pay X
5 State CO	Employer's state ID no. 02818396
7 State income tax 3547.00	16 State wages, tips, etc. 81889.00
9 Local income tax	18 Local wages, tips, etc.
	20 Locality name

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Social Security Number: XXX-XX-0114



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17 State income tax 3547.00	18 Local wages, tips, etc.	
19 Local income tax	20 Locality name	

Federal Filing Copy  
**W-2** Wage and Tax Statement **2022**  
Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

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19 Local income tax	20 Locality name	

CO. State Filing Copy  
**W-2** Wage and Tax Statement **2022**  
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

1 Wages, tips, other comp. 81889.00	2 Federal income tax withheld 10783.50		
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City or Local Filing Copy  
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Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008