

Copy B—To Be Filed With Employee's FEDERAL Tax Return.		41-0852411 OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
b Employer ID number (EIN)	5 Medicare wages and tips	6 Medicare tax withheld	
	c Employer's name, address, and ZIP code		
d Control number			
e Employee's name, address, and ZIP code Suff.			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee	14 Other	12b Code	
		12c Code	
		12d Code	
15 State Employer's state ID number		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2024 Dept. of the Treasury -- IRS
 This information is being furnished to the Internal Revenue Service. www.irs.gov/efile

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return.		41-0852411 OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
b Employer ID number (EIN)	5 Medicare wages and tips	6 Medicare tax withheld	
	c Employer's name, address, and ZIP code		
d Control number			
e Employee's name, address, and ZIP code Suff.			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code	
13 Statutory employee	14 Other	12b Code	
		12c Code	
		12d Code	
15 State Employer's state ID number		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2024 Dept. of the Treasury -- IRS

Copy C—For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)		41-0852411 OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
b Employer ID number (EIN)	5 Medicare wages and tips	6 Medicare tax withheld	
	c Employer's name, address, and ZIP code		
d Control number			
e Employee's name, address, and ZIP code Suff.			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
13 Statutory employee	14 Other	12b Code	
		12c Code	
		12d Code	
15 State Employer's state ID number		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2024 Dept. of the Treasury -- IRS
 This information is being furnished to the IRS. 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.

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return.		41-0852411 OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
b Employer ID number (EIN)	5 Medicare wages and tips	6 Medicare tax withheld	
	c Employer's name, address, and ZIP code		
d Control number			
e Employee's name, address, and ZIP code Suff.			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a Code	
13 Statutory employee	14 Other	12b Code	
		12c Code	
		12d Code	
15 State Employer's state ID number		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement 2024 Dept. of the Treasury -- IRS