

Department of the Treasury—Internal Revenue Service

<b>d</b> Control number		<b>1</b> Wages, tips, other compensation	<b>2</b> Federal income tax withheld
OMB NO. 1545-0008		<b>3</b> Social security wages	<b>4</b> Social security tax withheld
		<b>5</b> Medicare wages and tips	<b>6</b> Medicare tax withheld
<b>c</b> Employer's name, address and ZIP code			
<b>7</b> Social security tips		<b>8</b> Allocated tips	<b>9</b>
<b>10</b> Dependent care benefits		<b>11</b> Nonqualified plans	<b>12a</b> See instructions for box 12
<b>12b</b>	<b>12c</b>	<b>12d</b>	
<b>b</b> Employer identification number (EIN)		<b>a</b> Employee's social security number	
<b>13</b> Statutory employee	Retirement plan	Third-party sick pay	<b>14</b> Other
<b>e</b> Employee's name, address and ZIP code			
This information is being furnished to the Internal Revenue Service. 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.			
<b>2024</b>		<b>15</b> State Employer's state ID No.	<b>16</b> State wages, tips, etc.
<b>Form W-2 Wage and Tax Statement</b>		<b>17</b> State income tax	<b>18</b> Local wages, tips, etc.
<b>Copy C-For EMPLOYEE'S RECORDS</b>		<b>19</b> Local income tax	<b>20</b> Locality name
<i>(See Notice to Employee on the back of Copy B.)</i>			

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<b>Form W-2 Wage and Tax Statement</b>		<b>17</b> State income tax	<b>18</b> Local wages, tips, etc.
<b>Copy B-To Be Filed With Employee's FEDERAL Tax Return</b>		<b>19</b> Local income tax	<b>20</b> Locality name

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<b>Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return.</b>		<b>19</b> Local income tax	<b>20</b> Locality name

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FROM:

Important Tax Document Enclosed

First-Class Mail