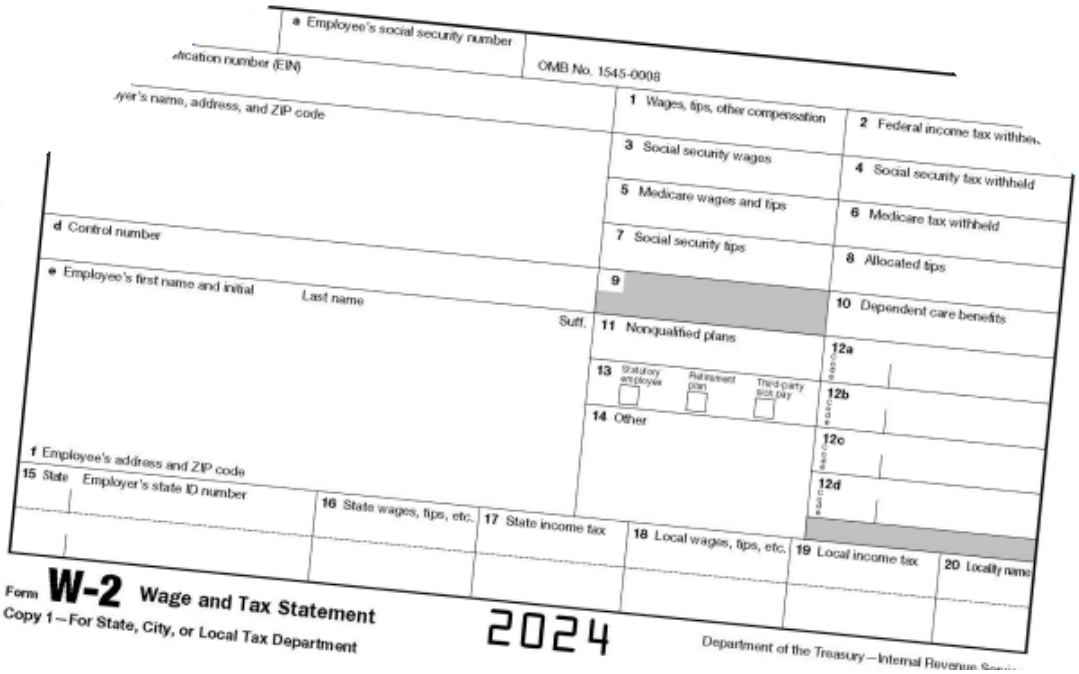

a Employee's social security number

OMB No. 1545-0008

ication number (EIN)

yer's name, address, and ZIP code

1 Wages, tips, other compensation

2 Federal income tax withhel

3 Social security wages

4 Social security tax withheld

5 Medicare wages and tips

6 Medicare tax withheld

7 Social security tips

8 Allocated tips

d Control number

9

10 Dependent care benefits

e Employee's first name and initial Last name Suff.

11 Nonqualified plans

12a

13 Statutory employee Retirement plan Third-party sick pay

12b

14 Other

12c

12d

f Employee's address and ZIP 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

Copy 1—For State, City, or Local Tax Department

2024

Department of the Treasury—Internal Revenue Servi