

1 Wages, tips, other compensation		2 Federal Income tax withheld	
32823.00		405.12	
3 Social security wages		4 Social security tax withheld	
32823.00		2035.03	
5 Medicare wages and tips		6 Medicare tax withheld	
32823.00		475.93	
a Employee's SSA number		Employer use only	
246-11-8084			
b Employer's FED ID number		d Control number	
59-0324412		01853014	
c Employer's name, address, and ZIP code			
PUBLIX SUPER MARKETS INC P.O. Box 32024 Lakeland FL 33802-2024 P001-3-1012 BAK			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 14289.74	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14 Other Misc.		12c	
100.00			
		12d	
e Employee's first name and initial Last name Suff.			
Sharon R Smith			
1516 Jasmine Cove Circle			
Simpsonville SC 29680			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
SC	25296664-2		
16 State wages, tips, etc.		19 Local income tax	
32823.00			
17 State income tax		20 Locality name	
1407.66			
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2024 Dept. of the Treasury - Internal Revenue Service Copy C for Employee's records			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
32823.00		405.12	
3 Social security wages		4 Social security tax withheld	
32823.00		2035.03	
5 Medicare wages and tips		6 Medicare tax withheld	
32823.00		475.93	
a Employee's SSA number		Employer use only	
246-11-8084			
b Employer's FED ID number		d Control number	
59-0324412		01853014	
c Employer's name, address, and ZIP code			
PUBLIX SUPER MARKETS INC P.O. Box 32024 Lakeland FL 33802-2024			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 14289.74	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14 Other Misc.		12c	
100.00			
		12d	
e Employee's first name and initial Last name Suff.			
Sharon R Smith			
1516 Jasmine Cove Circle			
Simpsonville SC 29680			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
SC	25296664-2		
16 State wages, tips, etc.		19 Local income tax	
32823.00			
17 State income tax		20 Locality name	
1407.66			
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2024 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's STATE Income Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
32823.00		405.12	
3 Social security wages		4 Social security tax withheld	
32823.00		2035.03	
5 Medicare wages and tips		6 Medicare tax withheld	
32823.00		475.93	
a Employee's SSA number		Employer use only	
246-11-8084			
b Employer's FED ID number		d Control number	
59-0324412		01853014	
c Employer's name, address, and ZIP code			
PUBLIX SUPER MARKETS INC P.O. Box 32024 Lakeland FL 33802-2024			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 14289.74	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14 Other Misc.		12c	
100.00			
		12d	
e Employee's first name and initial Last name Suff.			
Sharon R Smith			
1516 Jasmine Cove Circle			
Simpsonville SC 29680			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
SC	25296664-2		
16 State wages, tips, etc.		19 Local income tax	
32823.00			
17 State income tax		20 Locality name	
1407.66			
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2024 Dept. of the Treasury - Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return			

1 Wages, tips, other compensation		2 Federal Income tax withheld	
32823.00		405.12	
3 Social security wages		4 Social security tax withheld	
32823.00		2035.03	
5 Medicare wages and tips		6 Medicare tax withheld	
32823.00		475.93	
a Employee's SSA number		Employer use only	
246-11-8084			
b Employer's FED ID number		d Control number	
59-0324412		01853014	
c Employer's name, address, and ZIP code			
PUBLIX SUPER MARKETS INC P.O. Box 32024 Lakeland FL 33802-2024			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
		DD 14289.74	
13 Statutory Employee	Retirement plan	Third-Party Sick pay	12b
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14 Other Misc.		12c	
100.00			
		12d	
e Employee's first name and initial Last name Suff.			
Sharon R Smith			
1516 Jasmine Cove Circle			
Simpsonville SC 29680			
f Employee's address and ZIP code			
15 State	Employer's state ID	18 Local wages, tips, etc	
SC	25296664-2		
16 State wages, tips, etc.		19 Local income tax	
32823.00			
17 State income tax		20 Locality name	
1407.66			
Form OMB. No. 1545-0008 W-2 Wage and Tax Statement 2024 Dept. of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's CITY or LOCAL Income Tax Return			