

Copy B To Be Filed with Employee's FEDERAL Tax Return.		2024 OMB No. 1545-0008	
a Employee's SSN 656-83-6213	1 Wages, tips, other comp 14293.38	2 Federal income tax withheld 683.00	
b Employer ID no. (EIN) 82-0535547	3 Social security wages 14293.38	4 Social security tax withheld 886.19	
	5 Medicare wages and tips 14293.38	6 Medicare tax withheld 207.25	
c Employer's name, address, and ZIP code PROGRESSIVE BEHAVIOR SYSTEMS P.O. BOX 714 RUPERT ID 83350-1621			
d Control number			
e Employee's name, address, and ZIP code EMELINE NIYOGUSHIMA 3710 N CENTREPOINT WAY APT M1 MERIDIAN ID 83646			
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 <input type="checkbox"/>	14 Other	12b Code	
Retirement Plan <input type="checkbox"/>		12c Code	
Third party sick pay <input type="checkbox"/>		12d Code	
ID 002658525	14293.38	383.00	
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
This information is being furnished to the Internal Revenue Service.

Dept. of the Treasury - IRS

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Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

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.

Copy C For EMPLOYEE'S RECORDS. (See Notice to Employees).		2024 OMB No. 1545-0008	
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