Copy B To Be Filed FEDERAL Tax Return	With Employee's 'n	41-1628061 OMB No. 1545-0008	Copy 2 To Be Filed City, or Local Incom	41-1628061 OMB No. 1545-0008				
a Employee's soc sec no 519-45-2638	26037.42	Prederal income tax withheld 973.74 Social security tax withheld	a Employee's soc sec no 519-45-2638	26037.42	Prederal income tax withheld 973.74 Social security tax withheld			
b Employer ID number	27968.55	1734.05	b Employer ID number	27968.55	1734.05			
82-6000895	27968.55	6 Medicare tax withheld 405.57	82-6000895	27968.55	Medicare tax withheld 405.57			
c Employer's name, addres Kimberly School Dis	•		c Employer's name, addres Kimberly School Di	•				
141 Center Street W			141 Center Street West					
Kimberly ID 83341	esi		Kimberly ID 83341					
d Control number			d Control number					
39508			39508					
e Employee's first name an	d initial Last name	Suff.	e Employee's first name and initial Last name Suff.					
Tja Nicole Maxwell			Tja Nicole Maxwell					
3060 N 3350 E			3060 N 3350 E					
Kimberly ID 83341			Kimberly ID 83341					
f Employee's address and			f Employee's address and zip code					
7 Social security tips	8 Allocated tips	9 Verification Code	7 Social security tips	8 Allocated tips	9 Verification Code			
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12			
13 Statutory employee 14	Other 1931.13 PERSI - Retire	12b Code	13 Statutory employee 14	Other 1931.13 PERSI - Retire	12b Code			
Retirement plan		12c Code	Retirement plan		12c Code			
Third-party sick pay		12d Code	Third-party sick pay		12d Code			
ID 000024051	26037.42	2 681.00	ID 00002405	1 26037.4	2 681.00			
15 State Emplr.'s state I.D. #	16 State wages, tips, etc.	17 State income tax	15 State Emplr.'s state I.D. #	16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
Form W-2 Wage and Tax Sta	tement 2024	Dept. of the Treasury IRS	Form W-2 Wage and Tax Sta	atement 2024	Dept. of the Treasury IRS			
This information is being furnis	shed to the Internal Revenue Service.			2027				

			41-1628061 OMB No. 1545-0008	Oopy 2 to be the with Employee's clate,					41-1628061 OMB No. 1545-0008			
a Employee's soc sec no			2 Fede	eral income tax withheld	a Employee's soc sec no					ederal income tax withheld		
519-45-2638	1 .,		2 1000	973.74 4 Social security tax withheld		. ,	26037.42			973.74		
519-45-2638	3 Socia	26037.42 ocial security wages				519-45-2638		al security wages	1 9	Social security tax withheld		
b Employer ID number	1 000016	27968.55	4 0000	1734.05	b Em	nployer ID number	3 0000	27968.55	7 (1734.05		
, ,	5 Medio	care wages and tips	6 Medi	icare tax withheld	1 ' '	5 Medi	care wages and tips	6 N	Medicare tax withheld			
82-6000895		27968.55		405.57		82-6000895		27968.55		405.57		
c Employer's name, address, and zip code						c Employer's name, address, and zip						
Kimberly School Di	strict				Kimberly School District							
141 Center Street W	/est				141 Center Street West							
Kimberly ID 83341					Kimberly ID 83341							
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d Control number					40							
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39508	امتناسا اس	Lastanas		8#	39508							
e Employee's first name and initial Last name Suff.					e Employee's first name and initial Last name Suff.							
Tja Nicole Maxwell					Tja Nicole Maxwell							
3060 N 3350 E					3060 N 3350 E							
Kimberly ID 83341					Kimberly ID 83341							
f Employee's address and	zin oodo				f Employee's address and zip code							
f Employee's address and zip code 7 Social security tips 8 Allocated tips		9 '	9 Verification Code		7 Social security tips 8 Allocated tips				9 Verification Code			
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10 Dependent care benefits 11 Non		Nonqualified plans	12a	Code See inst. for box 12	10 Dependent care benefits		11 Nonqualified plans		1:	2a Code See inst. for box 12		
13 Statutory employee 14 Other 12b Code				Code	13 Statutory employee 14 Other					2b Code		
1931.13 PERSI - Retire						1931.13 PERSI - Retire						
Retirement plan		12c	ode Retirement plan					2c Code				
Χ						Х						
Third-party sick pay			12d	Code	TI	hird-party sick pay			1:	2d Code		
					ļ				Ц			
ID 00002405	1	26037	.42	681.00	ID	000024051	ı	26037.	42	681.00		
15 State Emplr.'s state I.D.	#	16 State wages, tips, etc.	17	State income tax	15 Stat	e Emplr.'s state I.D. #		16 State wages, tips, etc.		17 State income tax		
18 Local wages, tips, etc.		Local income tax		Locality name		cal wages, tips, etc.		Local income tax		Locality name		
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Form W-2 Wage and Tax Statement 2024 Dept. of the Treasury IRS Form W-2 Wage and Tax Statement 2024 Dept. of the Treasury												
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