

How to Generate W-2 Report

1. Click the **Reports** from **Payroll** module.
2. Click **Process W-2**

Process W-2

Process Print Generate E-File Close

Details

Year

☐ Open
 ☒ Select All
 ☐ Select None
 ☐ View

<input type="checkbox"/>	Employee No.	Last Name	First Name	Middle Name	Department	Address	City	State	Zip/Postal Code	Processed
<input type="checkbox"/>	0001005055					4242 Flagstaff ...	Fort Wayne	IN	46815	<input type="checkbox"/>
<input type="checkbox"/>	0001005123	Goshorn	Kate		Accounting					<input type="checkbox"/>
<input type="checkbox"/>	0001005124	Kelly	Rose							<input type="checkbox"/>
<input type="checkbox"/>	0001005125	Palm	Steve	1	IT					<input type="checkbox"/>
<input type="checkbox"/>	0001005131	Olney	George	M	Admin	1234 Main St	Fort Wayne	IN	46835	<input checked="" type="checkbox"/>
<input type="checkbox"/>	0001005134	Employee	Joe	T	Sales	1234 2nd Ave	Robbinston	ME	04671	<input type="checkbox"/>
<input type="checkbox"/>	0001005145					7414 HAZ Ave ...	Vancouver	WA	98665	<input type="checkbox"/>
<input type="checkbox"/>	0001005166	Mills	Steve	J	Accounting	6542 Sunny Lane	Fort Wayne	IN	46818	<input type="checkbox"/>
<input type="checkbox"/>	1005233	Employee	Joe		Sales	4242 Flagstaff ...	Fort Wayne	IN	46815	<input type="checkbox"/>
<input type="checkbox"/>	1005234	Supervisor	Joe		Sales	4242 Flagstaff ...	Fort Wayne	IN	46815	<input type="checkbox"/>
<input type="checkbox"/>	1005260	Smith	Steve		Store A	Diana Way	Fenton	MI	48430	<input type="checkbox"/>
<input type="checkbox"/>	1005261	Jones	Jill		Store B	6422 East State...	Fort Wayne	IN	46815	<input type="checkbox"/>
<input type="checkbox"/>	1005267	Turner	Brandon		Store A	6875 11th St	LaGrange	IN	46761	<input type="checkbox"/>

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3. Select employees to generate W-2 Report or click **Select All** button and click **Process** button

Process W-2

Process Print Generate E-File Close

Details

Year 2017

☐ Open
 ☒ Select All
 ☐ Select None
 ☐ View

<input type="checkbox"/>	Employee No.	Last Name	First Name	Middle Name	Department	Address	City	State	Zip/Postal Code	Processed
<input type="checkbox"/>	HDGRIDER	Grider	Helen	D	IT	4512 Carriage ...	Oceanside	CA	92054	<input type="checkbox"/>
<input type="checkbox"/>	JBCOSTA	Costa	Jacob	B	IT	1803 Woodlan...	Sacramento	CA	95815	<input type="checkbox"/>
<input type="checkbox"/>	JBFLORES	Flores	Judy	B	IT	3584 Kuhl Aven...	Atlanta	GA	30312	<input type="checkbox"/>
<input checked="" type="checkbox"/>	JBFWILER	Fowler	James	B	Warehouse	4566 Tetrick Ro...	Winter Haven	FL	33884	<input type="checkbox"/>
<input checked="" type="checkbox"/>	JDPATRICK	Patrick	Julia	D	QC	772 Coleman A...	Death Valley	CA	92328	<input type="checkbox"/>
<input checked="" type="checkbox"/>	JGCOUNTSS	Countess	Joshua	G	Warehouse	1190 Rose Ave...	Metaline	LA	70001	<input type="checkbox"/>
<input type="checkbox"/>	JBARNIS	Barnis	Jackie	A	Accounting	4521 East State...	Fort Wayne	IN	46815	<input type="checkbox"/>
<input type="checkbox"/>	JMBICKEL	Bickel	James	M	Store A	1496 Harron D...	Baltimore	MD	21202	<input type="checkbox"/>
<input type="checkbox"/>	KPCOPPOLA	Coppola	Kevin	P	Warehouse	610 Zappia Drive	Lexington	KY	40507	<input type="checkbox"/>
<input type="checkbox"/>	KPCOX	Cox	Kendra	P	IT	3460 Bond Stre...	Providence	RI	02905	<input type="checkbox"/>
<input type="checkbox"/>	KTRICHTER	Richter	Keisha	T	Store B	2839 Willow Oa...	Lafayette	LA	70501	<input type="checkbox"/>
<input type="checkbox"/>	LDURMAN	Turman	Lucy	D	Store B	3778 Burning ...	Philadelphia	PA	19104	<input type="checkbox"/>
<input type="checkbox"/>	LMILLI	Miller	Lisa	I	Store R	3708 Winton L...	Houston	TX	77007	<input type="checkbox"/>

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4. Click **Print** button
 - a. Click **Form W-2 (Black-&White Copy A, B, C, D, 1 & 2)** to generate W-2 report

Print Form W-2 (Black & White Copy A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z) to generate W-2 report

Report Viewer - Form W-2

Archive Close

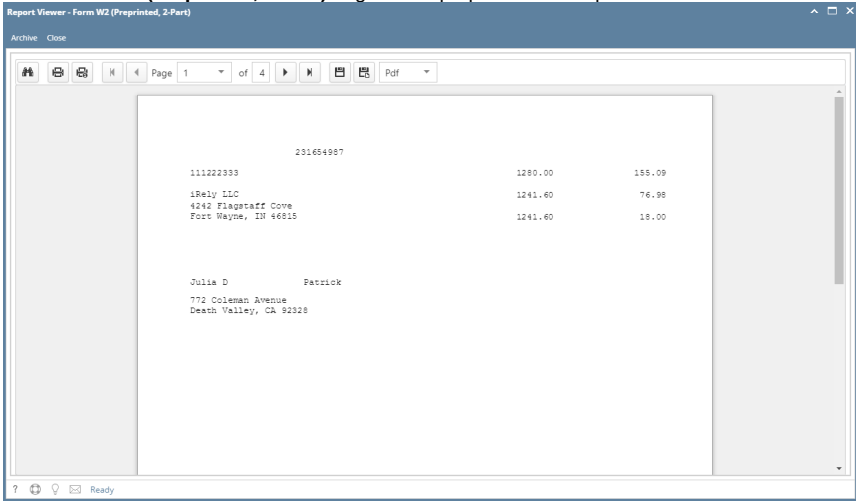
Page 1 of 24 Pdf

22222 Year <input type="checkbox"/> Employee's social security number 251454997		For Official use Only OMB No. 1545-0047	
6 Employer identification number (SSN) 111222333		1 Wages, tips, other compensation 1200.00	
7 Employer's name, address and ZIP code 12345 LLC 4342 Flagstaff Cove Fort Wayne, IN 46815		2 Federal income tax withheld 155.09	
		3 Medicare wages and tips 1241.60	
		4 Medicare tax withheld 76.99	
		5 Social security tax 1241.60	
		6 Allocated tax 15.00	
8 Pension number		9 Allocation type	
9 Institution's full name and address 10111 D 112 Coleman Avenue Death Valley, CA 92028		10 Unaffiliated plans 124	
Last name PATRICK		11 Social security tax benefits 124	
		12 Other 124	
		13 Other 124	
14 Employee's address and ZIP code		15 Local income tax 124	
16 State Employer's state ID number		17 Social wages, tips, etc. 124	
18 State income tax, etc. 124		19 Social income tax, etc. 124	
20 Social income tax, etc. 124		21 Social income tax, etc. 124	

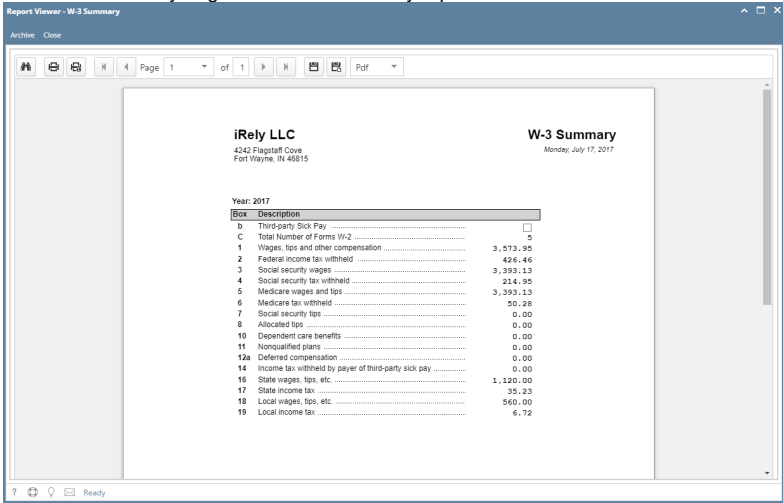
Form **W-2 Wage and Tax Statement** 2017
 Copy A For Social Security Administration — Send this entire page with Form 1040 to the Social Security Administration; photocopy as you require.
 Do Not Cut, Fold, or Staple Forms on This Page

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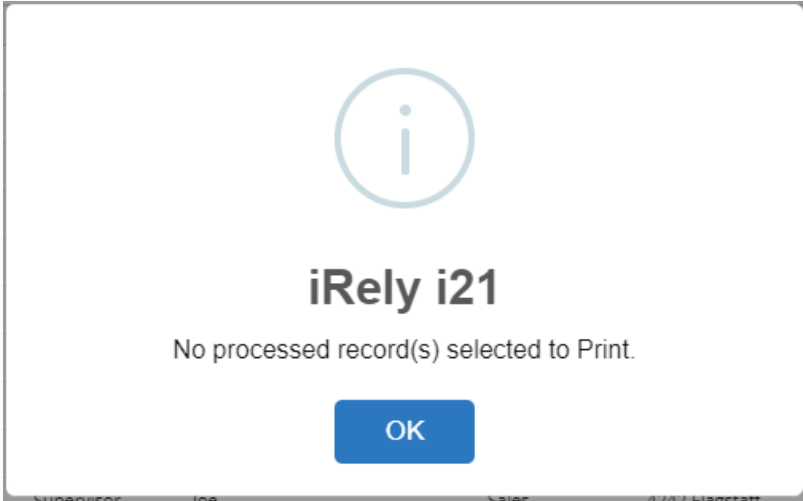
b. Click Form W-2 (Preprinted, 2-Part) to generate preprinted W-2 report



c. Click W-3 Summary to generate W-3 summary report



i If no employee is processed and Print button is clicked, warning is displayed



5. Click button with printer icon to print generated reports.

6. To generate E-File for W-2, click **Generate E-File** button

Electronic Filing W-2

Generate Save Undo Close

Details

Year 2017

Submitter Information		Employer Information	
BSO User ID	test Registered EIN 34534534	Agent Indicator	Agent for EIN
Name	iRELY ADMIN	Employer EIN	111222333 Other EIN
Location Address		Establishment No	Terminating Business
Delivery Address	test	Employer Name	iRely LLC
City	Melbourne State VIC	Location Address	4242 Flagstaff Cove
Zip Code	2132 Ext Country Australia	Delivery Address	4242 Flagstaff Cove
Preparer	Self-Prepared WFID	City	Fort Wayne State IN
Company Information		Zip Code	46815 Ext Country United States
Company Name	iRely LLC	Employment Code	R Employer Kind N
Location Address	4242 Flagstaff Cove	Tax Jurisdiction	Third-party Sick Pay
Delivery Address	4242 Flagstaff Cove	Contact Name	
City	Fort Wayne State IN	Phone	8004335724 x Fax 2604865187
Zip Code	46815 Ext Country United States	Email	
Contact Name	TEST		
Phone	8004335724 x Fax 2604865187		
Email			

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7. Fill out required fields and click **Generate** button



Data input on the fields are saved when generating E-File