Attention:

- By January 31, 2022, the Employer is responsible for providing the W-2 forms to the Employee and/or notifying the Employee they are available in the online payroll employee portal under "My History".
- \blacktriangleright The forms must be printed by the Employer or Employee through the online payroll employee portal.
- Using a standard printer, you can print the forms on plain white paper. No special paper or envelopes are required. However, the forms must be legible.
- W-2 forms will NOT be mailed by the payroll service provider.

General Instructions for W-2 Distribution and Filing

- Copy 1 is for the Employee and is provided for informational purposes only. The Employee should keep this for their records as it is a copy of what has been submitted to the state, city, and local tax agencies (if required).
- Copy B is for the Employee and should be filed by the Employee with the IRS.
- Copy C is for the Employee and is their copy to keep on file.
- Copy 2 is for the Employee and should be filed by the Employee with the state, city or local income tax agencies.

Please note, if the Employee worked in multiple states, a W-2 form will be available for each state and the same instructions apply. For any questions or corrections regarding the form, the Employee must reach out to the Employer.

W-2 Form Instructions

Notice to Employee

Notice to Entry terms The answer of the Present of the entry of the

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. Box 2. Enter this amount on the federal income tax withheld line of your tax return. Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959. Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000. Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR. You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits). **Box 10.** This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441. **Box 11.** This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy. Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans; \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$7,000. However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR. Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year. –Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. B–Uncollected Medicare tax on tips Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5) D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement. E—Elective deferrals under a section 403(b) salary reduction agreement F—Elective deferrals under a section 408(k)(6) salary reduction SEP G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct. J-Nontaxable sick pay (information only, not included in box 1, 3, or 5) K-20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR. L—Substantiated employee business expense reimbursements (nontaxable) M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR. N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR. N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR. P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5) Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount. R-Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts. S-Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1) T-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts. V-Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements. W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs). Y—Deferrals under a section 409Å nonqualified deferred compensation plan Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR. AA— Designated Roth contributions under a section 401(k) plan BB—Designated Roth contributions under a section 403(b) plan DD—Cost of employer-sponsored health coverage. The amount

reported with code DD is not taxable. EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan. FF—Permitted benefits under a qualified small employer health reimbursement arrangement GG—Income from qualified equity grants under section 83(i) HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year. **Box 13**. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs). **Box 14**. Employers may use this box to report inform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits just in case there is a question about your work record and/or earnings in a particular year.

22222	a Employee's social se 236-69-5036	curity number	OMB No. 154	15-0008				
b Employer identification number (EIN)				1 Wages, tips, other compensation 2 Federal income tax withheld				ax withheld
36-4549621					72833.41 8396.3			8396.38
c Employer's name, address, and ZIP code				3 S	ocial security wages			
GENIUS BUSINESS SOLUTIONS INC								4515.67
1711 5TH AVE				5 M	Medicare wages and tips 6 Medicare tax withheld 1056.00			
SUITE # 2				7 9	pcial security tips	<u> </u>	llocated tips	1030.00
MOLINE IL 61265				1 3	Jelai security lips		liocated tips	
d Control number				9		10 D	ependent care	benefits
e Employee's first name and initial	Last name		Suff.	11 N	onqualified plans	12a		
RADHA KRISHNA	PALOJU			13 St	atutory Retirement Third-party ployee plan sick pay	12b		
27000 FRANKLIN ROAD					nployee plan sick pay	C d e		
APT #123				14 Ot	her	12c		
SOUTHFIELD MI 48034						12d		
f Employee's address and ZIP cod	le					e		
15 State Employer's state ID numb	er 16 State v	vages, tips, etc.	17 State incor	ne tax	18 Local wages, tips, etc.	19 Loca	l income tax	20 Locality name
MI 36-4549621		72833.41	24	98.25				
Form W-2 Wage an	d Tax Statement	:	201	21	Department o	of the Trea	asury—Internal	Revenue Service

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

	a Employee 236-69-503	's social security number 6	OMB No. 154	5-0008	Safe, accurate, FAST! Use	≁ file	Visit the www.irs	e IRS website at s.gov/efile
b Employer identification number (EIN) 36-4549621					ages, tips, other compensation 72833.41	2 Federal income tax withheld 8396.38		
c Employer's name, address, and ZIP code					ocial security wages 72833.41	4 Social security tax withheld 4515.67		
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MOLINE IL 61265				7 S	ocial security tips	8 Alloc	cated tips	
d Control number				9		10 Dep	endent care	benefits
e Employee's first name and initial Last name Suff				11 Nonqualified plans 12a See instructions for box			for box 12	
RADHA KRISHNA	PALO	JU		13 ^S	tatutory Retirement Third-party nployee plan sick pay	12b		
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SOUTHFIELD MI 48034						12d		
f Employee's address and ZIP cod		40.01.1	47 01 1					00
15 State Employer's state ID numb MI 36-4549621	er	16 State wages, tips, etc. 72833.41		ne tax 198.25	18 Local wages, tips, etc.	19 Local in		20 Locality name
Form W-2 Wage and	d Tax Sta	tement	202	21	Department o	of the Treasu	ıry–Internal	Revenue Service

Form **W-Z** Wage and Tax Statement

Copy B—To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.

	a Employee's socia 236-69-5036	l security number	OMB No. 154	5-0008	This information is being furnis are required to file a tax return may be imposed on you if this	, a negligenc	e penalty or o	ther sanction
b Employer identification number (EIN) 36-4549621					1 Wages, tips, other compensation 2 Federal income tax withhel 72833.41 8396.3			
c Employer's name, address, and ZIP code GENIUS BUSINESS SOLUTIONS INC					cial security wages 72833.41	4 Social security tax withheld 4515.67		
1711 5TH AVE SUITE # 2				5 Me	edicare wages and tips 72833.41	6 Med	care tax with	nheld 1056.08
MOLINE IL 61265				7 So	cial security tips	8 Alloc	ated tips	
d Control number				9		10 Depe	endent care l	benefits
e Employee's first name and initial	Last name		Suff.	11 No	onqualified plans	12a See	instructions	for box 12
RADHA KRISHNA	PALOJU			13 ^{Sta}	tutory Retirement Third-party	12b		
27000 FRANKLIN ROAD					ployée plan sick pay ´	C o d e		
APT #123				14 Oth	ner	12c		
SOUTHFIELD MI 48034						12d		
f Employee's address and ZIP coc	e						1	
15 State Employer's state ID numb MI 36-4549621	er 16 Sta	te wages, tips, etc. 72833.41		ne tax 498.25	18 Local wages, tips, etc.	19 Local in	come tax	20 Locality name
Form W-2 Wage and	d Tax Stateme	ent	202	<u>]</u>		of the Treasu		Revenue Service

Form **W-2** Wage and Tax Statement

Safe, accurate, FAST! Use



Copy C-For EMPLOYEE'S RECORDS

(See Notice to Employee on the back of Copy B.)

MI	36-4549621		72833.41	2	498.25				
f Emp	oyee's address and ZIP coo Employer's state ID numb		16 State wages, tips, etc.	17 State incor	ne tax	18 Local wages, tips, etc.	19 Local income tax	c 20 Locality name	
SOUT	HFIELD MI 48034						12d C d e		
APT #	123				14 Oth	ler	12c ^C e		
	FRANKLIN ROAD				13 Stat	utory Retirement Third-party plan sick pay	12b		
	loyee's first name and initial A KRISHNA	Last		Suff.		nqualified plans	12a		
d Con	trol number				9		10 Dependent ca	are benefits	
	LINE IL 61265				7 So	cial security tips	8 Allocated tips		
	1 5TH AVE TE # 2					edicare wages and tips 72833.41	6 Medicare tax	1056.08	
c Employer's name, address, and ZIP code GENIUS BUSINESS SOLUTIONS INC						Social security wages 4 Social security tax withhe 72833.41 451			
b Employer identification number (EIN) 36-4549621						ges, tips, other compensation 72833.41		2 Federal income tax withheld 8396.38	
		a Employee's social security number 236-69-5036 OMB No. 15							

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return