

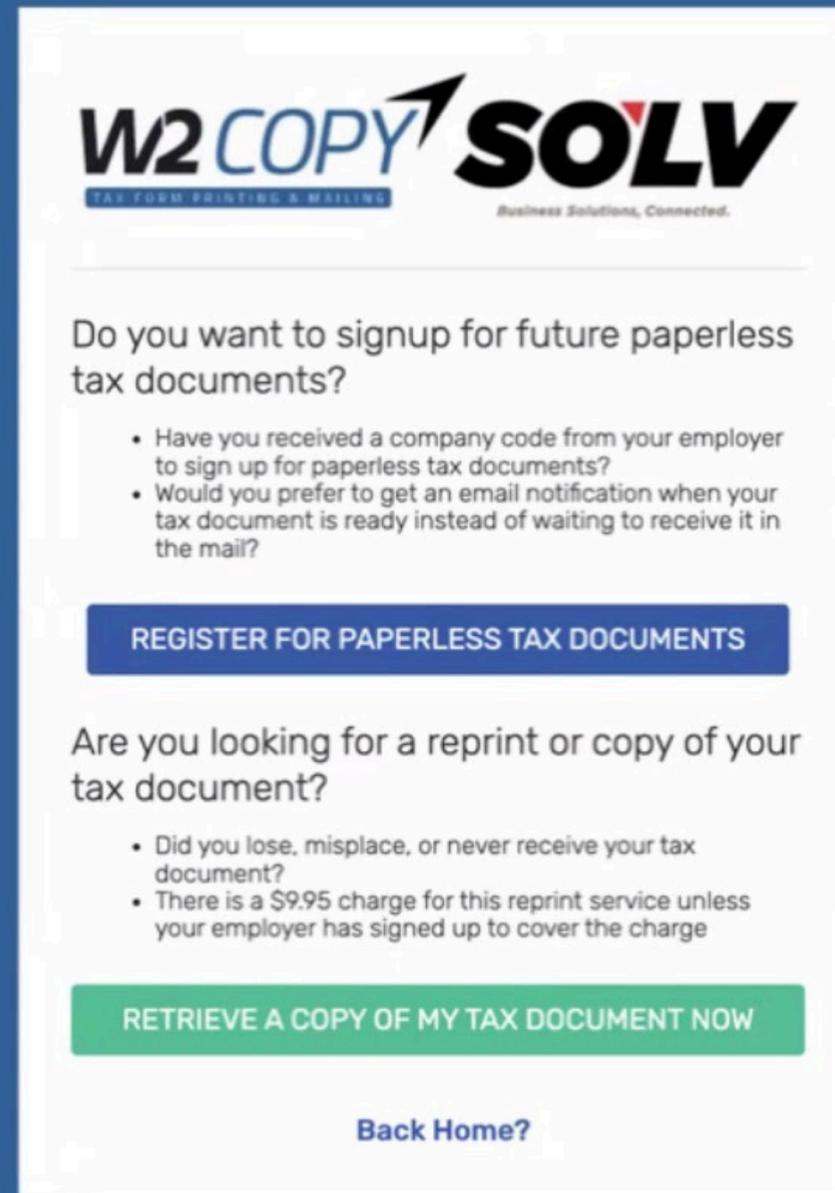
TUTORIAL

Para obtener copia de documento de taxes.

CLICK HERE 

<https://ew2online.w2copy.net/express>





W2 COPY SOLV
TAX FORM PRINTING & MAILING Business Solutions, Connected.

Do you want to signup for future paperless tax documents?

- Have you received a company code from your employer to sign up for paperless tax documents?
- Would you prefer to get an email notification when your tax document is ready instead of waiting to receive it in the mail?

REGISTER FOR PAPERLESS TAX DOCUMENTS

Are you looking for a reprint or copy of your tax document?

- Did you lose, misplace, or never receive your tax document?
- There is a \$9.95 charge for this reprint service unless your employer has signed up to cover the charge

RETRIEVE A COPY OF MY TAX DOCUMENT NOW

[Back Home?](#)

<https://ew2online.w2copy.net/express>



a) Damos Click en el botón verde **“Retrieve a copy of my tax document now”**



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a) Agrega tu “Número de Seguro Social”



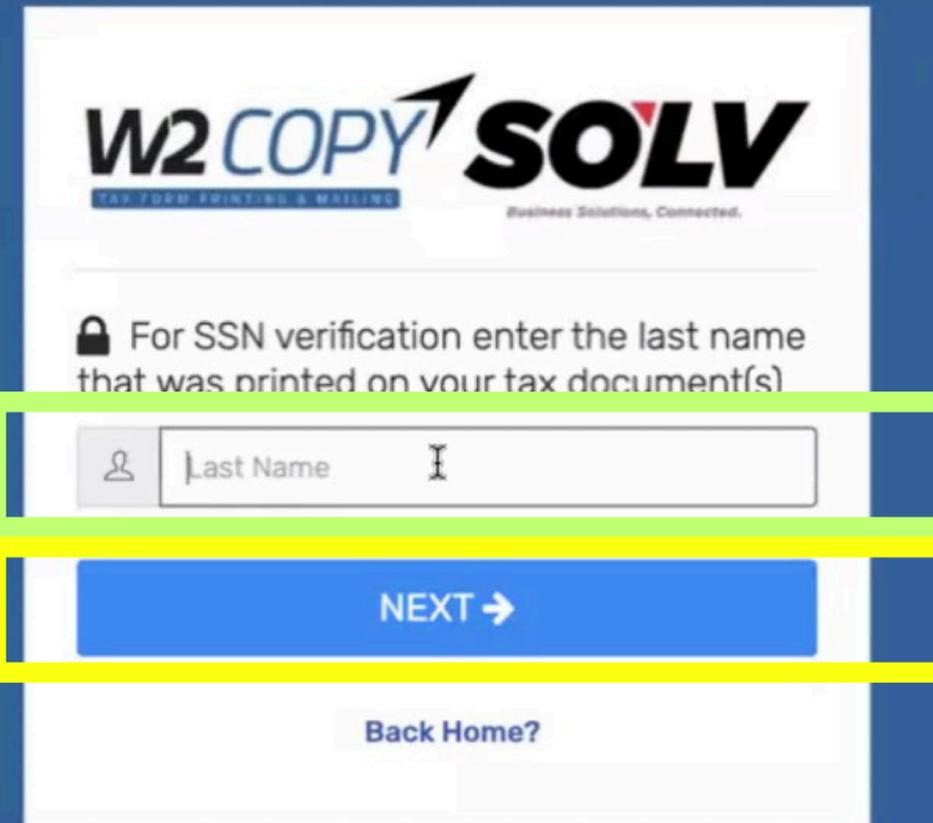
W2COPY SOLV
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Enter Social Security Number. Just numbers no dashes.

NEXT →
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b) Click en “Next”





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🔒 For SSN verification enter the last name that was printed on your tax document(s)

NEXT →

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a) Agrega solamente “**Apellido, que fue impreso en tu documento de taxes**”

b) Click en “**Next**”



a) Selecciona **“Workforce Business Services In, que fue impreso en tu documento de taxes”**



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Select your employer that was printed on your tax document(s)

- FAHEY GROUP
- KUB, HILLS AND TORPHY
- MANTE AND SONS
- LIPTON LTD
- WORKFORCE BUSINESS SERVICES,IN**

“Obligatorio”

NEXT →

Back Home?

* You have 30 seconds before it will start over



b) Click en **“Next”**



a) Selecciona solamente “**Código Postal/Zip Code**, que fue impreso en tu documento de taxes”



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Select your zip code that was printed on your tax document(s)

16407-7464

98132-7304

33031

89540-1497

96537-6298

NEXT →

[Back Home?](#)

* You have 30 seconds before it will start over

“Ejemplo”



b) Click en “**Next**”



a) Selecciona solamente
“Estado/State, que fue impreso en
tu documento de taxes”



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Select your state that was printed on your tax document(s)

FL **“Ejemplo”**

SC

MA

CO

IN

NEXT →

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* You have 30 seconds before it will start over



b) Click en “Next”



a) Selecciona solamente
“Ciudad/City, que fue impreso
en tu documento de taxes”



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Select your city that was printed on your tax document(s)

- SARINATON
- MIKAYLAPORT
- EMANUELHAVEN
- JASTTOWN
- HOMESTEAD

“Ejemplo”

NEXT →

Back Home?

* You have 30 seconds before it will start over



b) Click en “Next”



a) Selecciona solamente
“Dirección/Address, que fue
impreso en tu documento de
taxes”



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🔒 Select your address that was printed on your tax document(s)

- 56400 MARGOT PORT APT. 861
- 24505 SW 189TH AVE
- 470T BERGSTROM ESTATE
- 198 CORDELL MOUNTAIN SUITE 036
- 483 MCCULLOUGH UNION

NEXT →

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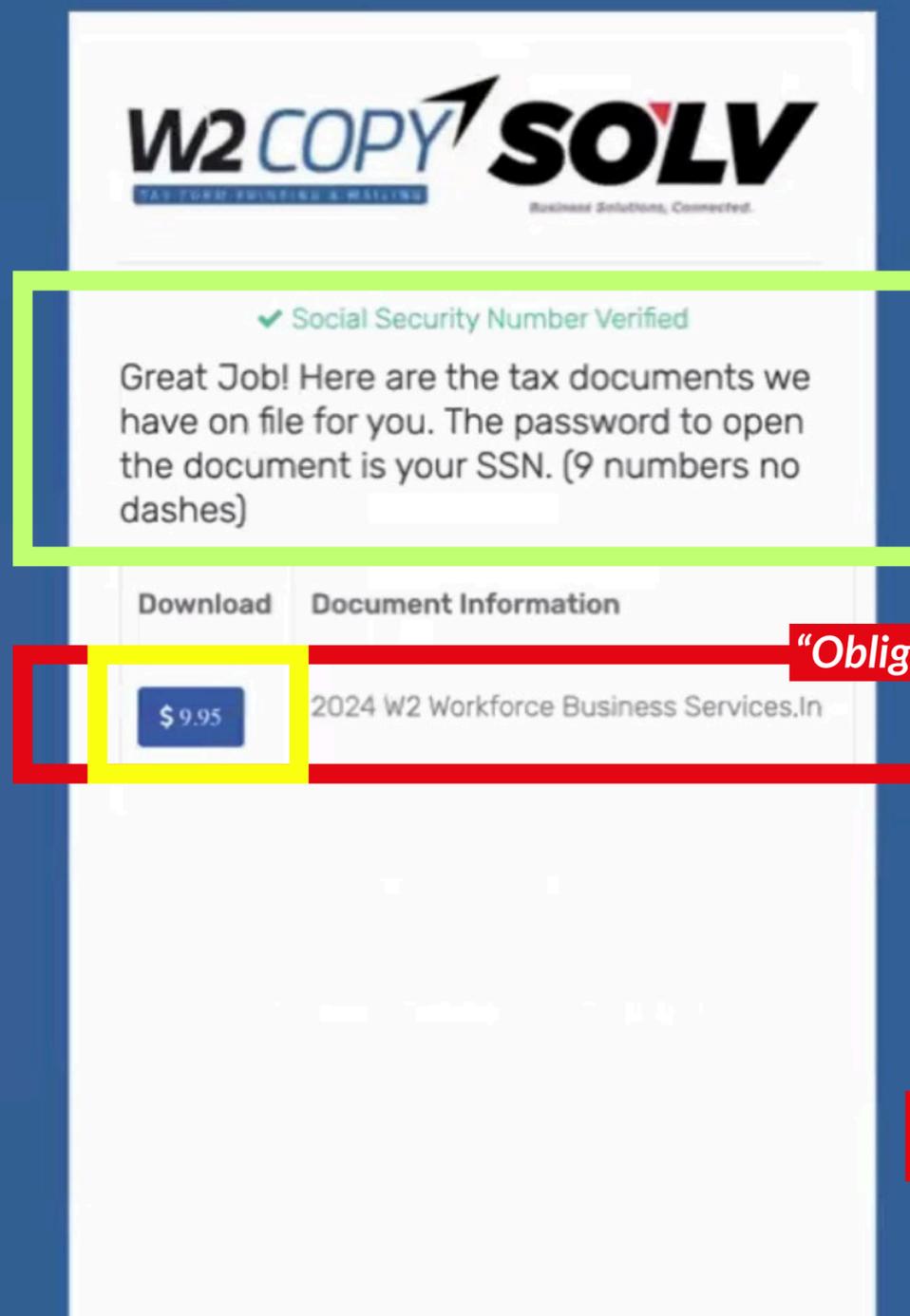
* You have 30 seconds before it will start over

“Ejemplo”



b) Click en “Next”





a) Verificar mensaje, de registro correcto, **“Social Security Number Verified”**



“Obligatorio”



b) Para poder descargar el documento, se deberá pagar en línea, **“una tarifa correspondiente”**

c) Click en **“Botón con Monto”**



W2 COPY SOLV
Business Accounts, Commercial

Take a Tax Document Payment for
2024 W2 Workforce Business
Services, Inc

VISA AMERICAN EXPRESS MASTERCARD DISCOVER

Payment amount
\$995

Name on card
Enter the name as shown on credit card

Card number
Enter a valid card number

Expiration
MMYY
Enter the expiration date

Security code
Enter the cvv code on back of card

Zip Code

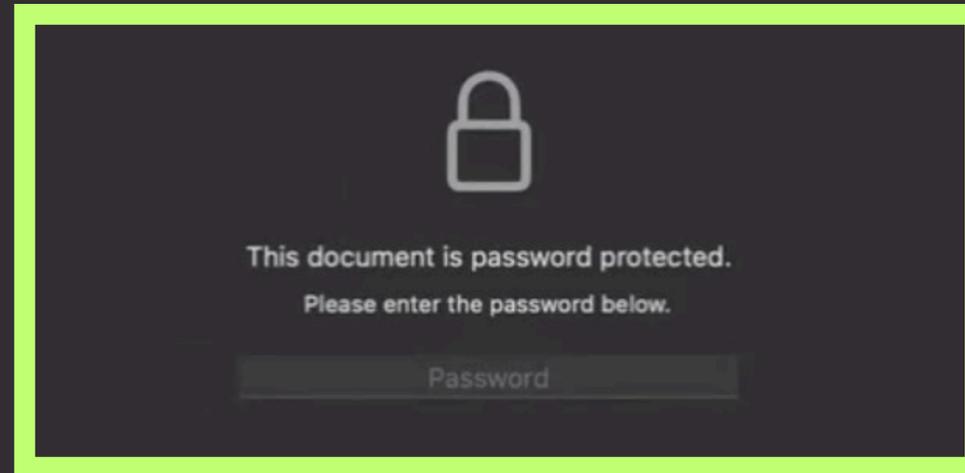
Pay

a) Agregar tú, “Método de Pago”



c) Click en “Pagar/Pay”





a) Para acceder o abrir al PDF descargado, se solicitará contraseña la cual es **“Tú Número de Seguro Social (9 dígitos)”**



Documento Descargado



Form W-2 Wage and Tax Statement 2024				7 Social security tips	1 Wages, tips, other comp.
c Employer's name, address and ZIP code				8 Allocated tips	3 Social security wages
				9	5 Medicare wages and tips
				10 Dependent care benefits	11 Nonqualified plans
				12a Code - See inst. for box 12	
e Employee's name, address and ZIP code				13 Statutory Employee Retirement Plan Third-Party Sick Pay	14 Other
				12b - 12d Codes	
				b Employer ID number	
				a Employee's social security number	
15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	

Copy B to be filed with employee's FEDERAL Tax Return

OMB No. 1545-0047 2024

Form W-2 Wage and Tax Statement 2024				7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld
c Employer's name, address and ZIP code				8 Allocated tips	3 Social security wages	4 Social security tax withheld
				9	5 Medicare wages and tips	6 Medicare tax withheld
				10 Dependent care benefits	11 Nonqualified plans	12a Code - See inst. for box 12
e Employee's name, address and ZIP code				13 Statutory Employee Retirement Plan Third-Party Sick Pay	14 Other	12b - 12d Codes
				b Employer ID number		
				a Employee's social security number		
15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy C for EMPLOYEES RECORDS. (See Notice to Employee).

Form W-2 Wage and Tax Statement 2024				7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld
c Employer's name, address and ZIP code				8 Allocated tips	3 Social security wages	4 Social security tax withheld
				9	5 Medicare wages and tips	6 Medicare tax withheld
				10 Dependent care benefits	11 Nonqualified plans	12a Code - See inst. for box 12
e Employee's name, address and ZIP code				13 Statutory Employee Retirement Plan Third-Party Sick Pay	14 Other	12b - 12d Codes
				b Employer ID number		
				a Employee's social security number		
15 State	Employer's state ID no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy 2 to be filed with employee's State, City or Local Tax Return

Form W-2 Wage and Tax Statement 2024				7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld
c Employer's name, address and ZIP code				8 Allocated tips	3 Social security wages	4 Social security tax withheld
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XIT For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions

Copy 2 to be filed with employee's State, City or Local Tax Return

a) Para acceder o abrir al PDF descargado, se solicitará contraseña la cual es "Tú Número de Seguro Social (9 dígitos)"