

# W2 Boxes Explained

2020 Wage and Tax Statement																																	
W2 Box	State Software Explanation																																
A	SSN as entered in BIOSCN																																
B	Employer Federal EIN as entered in W2PROC																																
C	District name and address as entered in W2PROC																																
E	Name as entered in BIOSCN  <div style="border: 1px solid green; border-radius: 10px; padding: 5px; display: inline-block;">  Legal name always prints, in non-blank. If Legal name is blank, uses Name field.         </div>																																
F	Address as entered on BIOSCN																																
1	YTD taxable gross on 001 DEDSCN																																
2	YTD deduct total on 001 DEDSCN																																
3	YTD taxable gross on 692/693 DEDSCN flagged with deduction category of F																																
4	YTD deduct total on 692/693 and 694/695 DEDSCN flagged with deduction category of F																																
5	YTD taxable gross on 692/693 DEDSCN flagged with deduction category of M																																
6	YTD deduct total on 692/693 and 694/695 DEDSCN flagged with deduction category of M																																
10	Dependent care amount on 001 DEDSCN or YTD deduct total on any DEDSCN with type DPCARE																																
12	<table border="1"> <tr> <td>C</td> <td>Cost of life insurance over \$50,000</td> </tr> <tr> <td>D</td> <td>401(k) amounts</td> </tr> <tr> <td>E</td> <td>403(b)</td> </tr> <tr> <td>F</td> <td>408(k) (6)</td> </tr> <tr> <td>G</td> <td>457</td> </tr> <tr> <td>H</td> <td>501c (18) (d)</td> </tr> <tr> <td>J</td> <td>Non taxable sick pay</td> </tr> <tr> <td>P</td> <td>Excludable moving expenses - <b>Armed Forces only</b></td> </tr> <tr> <td>R</td> <td>Employer contributions to an Archer MSA</td> </tr> <tr> <td>T</td> <td>Adoption benefits</td> </tr> <tr> <td>W</td> <td>Employer contributions to Health Savings Accounts</td> </tr> <tr> <td>AA</td> <td>Designated Roth contributions to section 401(k) plan</td> </tr> <tr> <td>BB</td> <td>Designated Roth contributions under section 403 (b) salary reduction agreements</td> </tr> <tr> <td>DD</td> <td>Cost of employer-sponsored health coverage</td> </tr> <tr> <td>EE</td> <td>Designated Roth contributions under a governmental section 457(b) plan</td> </tr> <tr> <td>FF</td> <td>Use this code to report the total amount of permitted benefits under a QSEHRA The maximum reimbursement for an eligible employee under a QSEHRA is \$4,950 (\$10,000 if it also provides reimbursements for family members), before indexing for Inflation.</td> </tr> </table>	C	Cost of life insurance over \$50,000	D	401(k) amounts	E	403(b)	F	408(k) (6)	G	457	H	501c (18) (d)	J	Non taxable sick pay	P	Excludable moving expenses - <b>Armed Forces only</b>	R	Employer contributions to an Archer MSA	T	Adoption benefits	W	Employer contributions to Health Savings Accounts	AA	Designated Roth contributions to section 401(k) plan	BB	Designated Roth contributions under section 403 (b) salary reduction agreements	DD	Cost of employer-sponsored health coverage	EE	Designated Roth contributions under a governmental section 457(b) plan	FF	Use this code to report the total amount of permitted benefits under a QSEHRA The maximum reimbursement for an eligible employee under a QSEHRA is \$4,950 (\$10,000 if it also provides reimbursements for family members), before indexing for Inflation.
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13	<b>Retirement Plan:</b> 401(a) 401(k) 403(b) 408(k) 501c(18)																																

14	Leased vehicle amount and COVID amounts as entered on 001 DEDSCN or any other deduction amounts entered in W2PROC
14	Fringe Benefits
15	State ID name as entered in W2PROC
16	YTD taxable gross amount on 002 DEDSCN
17	YTD deduct total on 002 DEDSCN
18	YTD taxable gross amount on all City DEDSCN
19	YTD deduct total on all City DEDSCN
20	W2 abbreviation as entered in DEDNAM