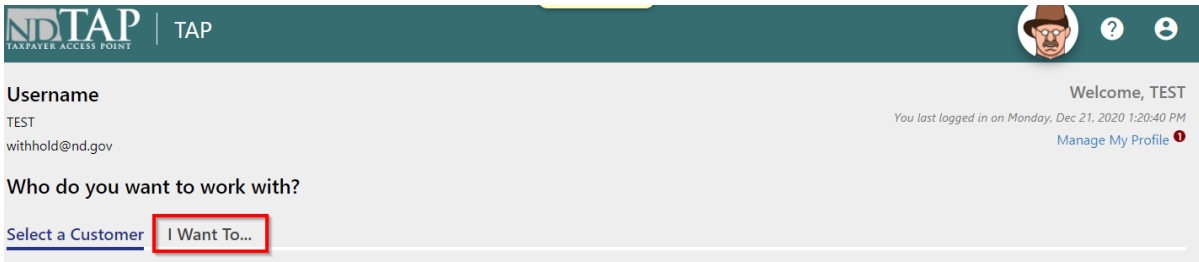
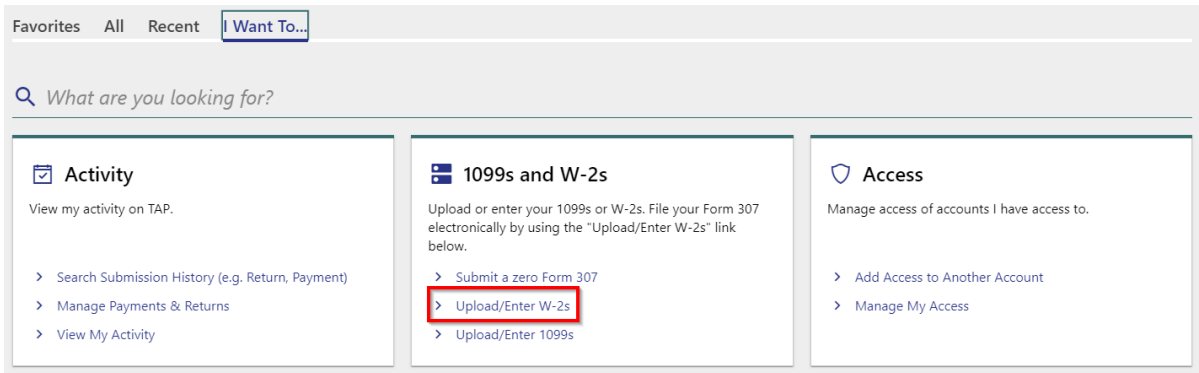


STEP BY STEP INSTRUCTIONS ON HOW TO ELECTRONICALLY FILE W-2s

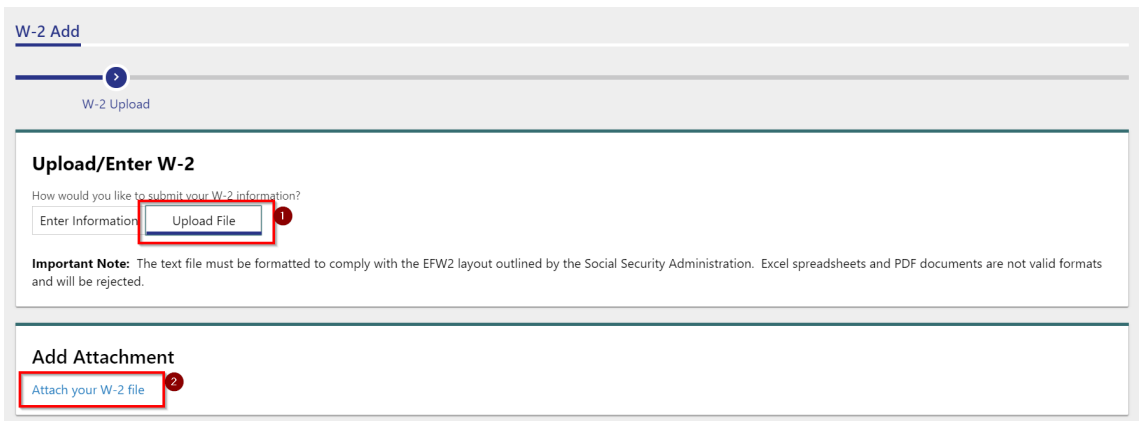
1. Once you login, click on the “I Want To...” tab.



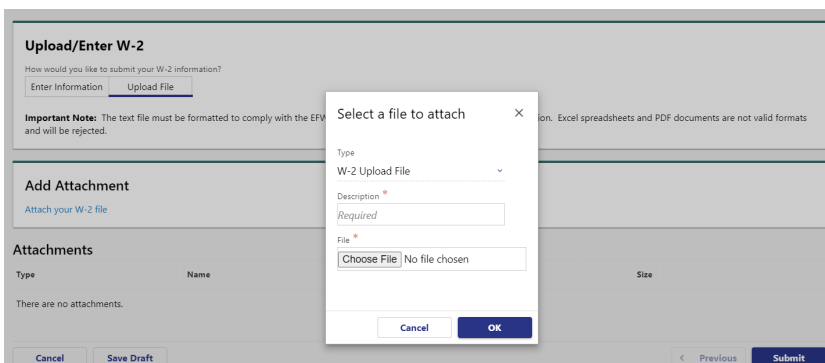
2. Under the 1099s and W-2s tile, click “Upload/Enter W-2s”.



3. If you are uploading a text file of the W-2 information, continue to step 4.
If you are keying in the W-2 information, continue to step 6.
4. Click “Upload File” to the question and then click “Attach your W-2 file”.



5. Once you choose your file & click OK, it will show if any errors exist or will show the file is attached. Click “Submit”. You have successfully submitted your W-2 information to our office. Save the Confirmation Number for your reference.



6. Click “Enter Information” to the question how you would like to submit your W-2 information.

W-2 Add

W-2 Upload

Upload/Enter W-2

How would you like to submit your W-2 information?

Enter Information

Upload File

Important Note: The text file must be formatted to comply with the EFW2 layout outlined by the Social Security Administration. Excel spreadsheets and PDF documents are not valid formats and will be rejected.

Add Attachment

Attach your W-2 file

7. If it does not list the employer information, you will need to add it by clicking “Add employer” to add the payer information. If it already lists the employer information, verify it is correct and click Next.
- * NOTE: Once you have already entered employer information, TAP automatically saves it for you each time you come to this step.

W-2 Add

W-2 Upload

W-2 Employer

Add / Modify W-2 Employers

Follow the steps below to add or modify employers you want to key W-2s for. To add additional employers, click the “Add Another Employer” link.

Employer Information

ID: 12-3456789

+ Add Another Employer

ID Type	FEIN	Name	Country	Street	City	State	Zip Code
<div><div></div><div>×</div><div>FEIN</div></div>	12-3456789	TEST	USA	600 E BLVD AVE DEPT 127	BISMARCK	NORTH DAKOTA	58505
<div><div>+ Add Another Employer</div><div>Click to add another employer.</div></div>							

+ Add Another Employer

Cancel

Save Draft

< Previous

Next >

8. Select the employer you are filing for. Then, select the filing period.

W-2 Add

W-2 Upload W-2 Employer **Select Employer/Filing Period**

Select an employer

Select an employer from the list.

Select	FEIN	Name	Country	Street	City	State	Zip Code
<input checked="" type="radio"/>	12-3456789	TEST	USA	600 E BLVD AVE DEPT 127	BISMARCK	NORTH DAKOTA	58505

Select A Filing Period

Select the filing period to key W-2s for and then click the "Next" button.

Select	Period
<input checked="" type="radio"/>	31-Dec-2020
<input type="radio"/>	31-Dec-2019
<input type="radio"/>	31-Dec-2018

[Cancel](#) [Save Draft](#) [< Previous](#) [Next >](#)

9. If you are filing a zero Form 307 (meaning you have no W-2s to report), check the box and click Next. If you have W-2s to enter in, click on the "Add W-2" button on the right side of the blue toolbar.

W-2 Add

W-2 Upload W-2 Employer **Select Employer/Filing Period** **W-2 Information**

Employee Information

☐ Check this box if there are no W-2s to report this period.

Please add a W-2 before moving to the next step!

Check the box to indicate no W-2s or click "Add W-2" to key the information.

Employee Information

[+ Add W-2](#)

10. Key each W-2 form individually. To add another W-2 form, simply click the "Add Another W-2" button. Once you have added all the forms you need to enter, click "Next". If you get an error, be sure to check that you do not see any red dots next to the Employee Information or ID's on the blue toolbar.

Note: You only need to enter in the employee's information, federal wages & withholding (Box 1 & 2), and state wages & withholding (Box 16 & 17). If you have zero withholding to report, make sure to check the box next to Box 2 or under Box 17.

Employee Information ID:

ID: + Add Another W-2 X Delete This W-2

Enter information for every W-2. Click the "Add Another W-2" button to create an additional record.
Once information for all records has been entered, click the "Next" button.

a Employee's social security number * ID Number		OMB No. 1545-0008	
b Employer identification number (EIN)		1 Wages, tips, other compensation * Required	2 Federal income tax withheld * Required
c Employer's name, address, and ZIP code Name Street State/Zip		3 Social security wages	4 Social security tax withheld
		5 Medicare wages and tips	6 Medicare tax withheld
		7 Social security tips	8 Allocated tips
d Control number		9	10 Dependent care benefits
e Employee's first name and initial Last name Suffix * First Name Mic * Last Name		11 Nonqualified plans	12a
USA		13 Statutory employees Retirement plan Third-party sick pay	12b
Street		14 Other	12c
City State Zip			12d
f Employee's address and ZIP code			
15 State Employer's state ID number NC Employer State ID	16 State wages, tips, etc. * Required	17 State income tax * Required	18 Local wages, tips, etc.
			19 Local income tax
			20 Locality name

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

Department of the Treasury—Internal Revenue Service

Check this box if zero state withholding

Check this box if zero federal withholding

[+ Add Another W-2](#) [X Delete This W-2](#)

Cancel

Save Draft

< Previous

Next

Cancel

Save Draft

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Next

Cancel

Save Draft

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Next

Cancel

Save Draft

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Next

11. On the summary page, confirm that the correct number of W-2s were entered and the total wages/withholding is correct. If it is correct, check the box at the bottom to confirm.

W-2 Add



Summary

W-2 Summary Information for employer: TEST - 123456789

Review the following summary of the W-2s entered to ensure they are complete and accurate.

[Click here to review a list of the W-2s entered](#)

Total Number of W-2s Entered

	1,000.00
--	----------

Total Federal Income Tax Withheld

		100.00
--	--	--------

Total North Dakota Wages

	1,000.00
--	----------

Total North Dakota Tax Withheld

Confirm

☐ By checking this box I declare I have examined the W-2s and to the best of my knowledge and belief, the information is true, correct, and complete. *

Cancel

Save Draft

< Previous

Submit

Cancel

Save Draft

< Previous

Submit

Cancel

Save Draft

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Submit

Cancel

Save Draft

< Previous

Submit

12. Once the box is checked, the contact details will show up below to complete. Enter your name and title in the required boxes. Verify your email and phone number are correct. Click "Submit".

☒ By checking this box I declare I have examined the W-2s and to the best of my knowledge and belief, the information is true, correct, and complete.

Contact Details

Enter the following contact information and then click the "Submit" button at the bottom of the page.

Name *	Title *
<input type="text" value="Required"/>	<input type="text" value="Required"/>
Email	Phone
<input type="text" value="withhold@nd.gov"/>	<input type="text" value="(701) 328-1248"/>

[Cancel](#)[Save Draft](#)

[< Previous](#)[Submit](#)

13. You have successfully submitted your W-2 information to our office. Save or print the Confirmation Number for your reference.

Confirmation

Your W-2 Information Has Been Submitted

The following is a summary of your W-2 which will be processed shortly.

Submission Information

Submission: W-2 Add

Confirmation #: 0-502-282-752

Submitted: 12/21/2020 3:04:51 PM

PLEASE DO NOT MAIL IN A PAPER FORM 307. THIS SUBMISSION FULFILLS THE FORM 307 REQUIREMENT.

If you have any questions regarding this W-2, please contact our office by email at TAPhelp@nd.gov or by phone at 701.328.1257 and reference the confirmation number identified above.

[Back](#)[Print Confirmation](#)