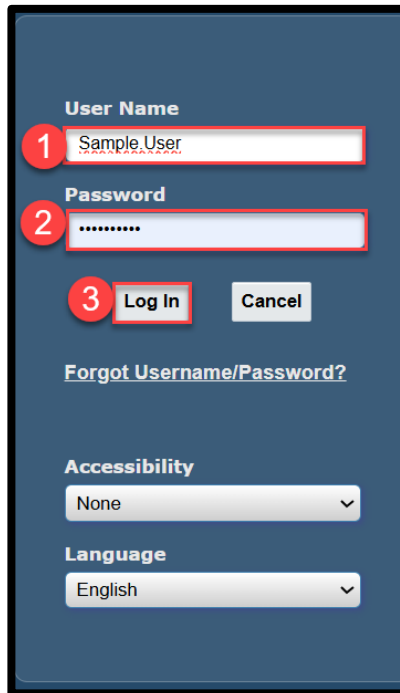


### LOG IN TO ONEPHILLY

On your web browser, enter <https://ess-onephilly.phila.gov/>, then:

1. Enter your **User Name**.
2. Enter your **Password**.
3. Click **Log In**.

If you don't know your **User Name** or **Password**, click the **Forgot Username/Password?** link and follow the reset instructions. If you are still facing problems, email [OnePhillyHelp@phila.gov](mailto:OnePhillyHelp@phila.gov).



The screenshot shows a login form on a dark blue background. It includes a 'User Name' field with 'Sample User' entered, a 'Password' field with masked characters, and a 'Log In' button. Red circles with numbers 1, 2, and 3 are overlaid on the form to indicate the steps: 1 for the User Name field, 2 for the Password field, and 3 for the Log In button. Below the login fields are links for 'Forgot Username/Password?', an 'Accessibility' dropdown menu set to 'None', and a 'Language' dropdown menu set to 'English'.

User Name  
1 Sample User

Password  
2 .....

3 Log In Cancel

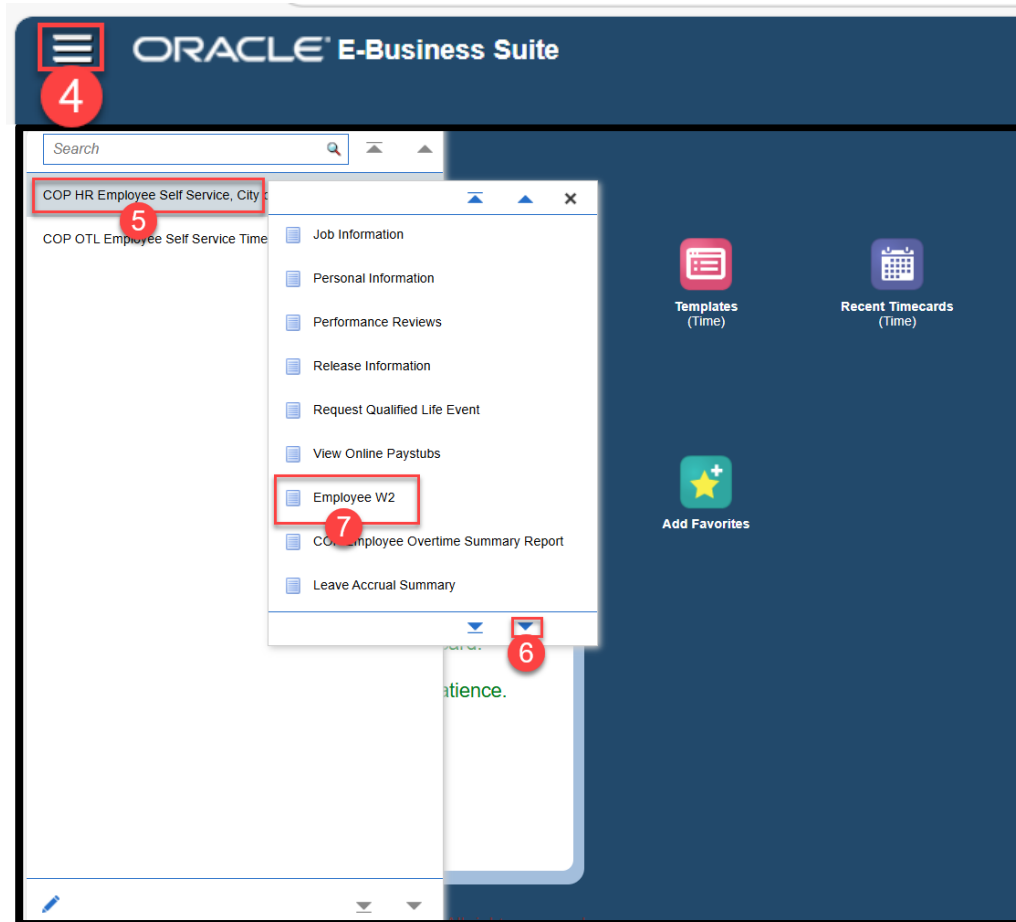
[Forgot Username/Password?](#)

Accessibility  
None

Language  
English

### NAVIGATE THE HOME PAGE

4. Click the **Navigator** button  to invoke a drop-down menu of responsibilities and functions.
5. Once the drop-down menu appears, click the **COP HR Employee Self Service** responsibility.
6. Click the down arrow button until you see **Employee W2**.
7. Double-click the **Employee W2** option.



## NAVIGATING THE FORM W-2 WAGE AND TAX STATEMENT

The **W2 Info Links** box, outlined in red, contains:

- A memo from Central Payroll with explanations of specific boxes on the W-2
- A W-2 Navigation and FAQ Guide for 2025
- A step-by-step guide on how to Print and Save Your W-2

ORACLE COP HR Employee Self Service

Form W-2 Wage and Tax Statement

Employee Name [REDACTED] Employee Number [REDACTED]  
Organization Email Address [Onephilly.Testing@phila.gov](mailto:Onephilly.Testing@phila.gov) Business Group City of Philadelphia

W2 Information

W2 Info Links  
[W2 Letter](#)  
[W2 Navigation and FAQ Guide](#)  
[How To Print Your W2](#)

View or Download W2

| W2 PDF                    |
|---------------------------|
| City of Philadelphia 2025 |
| City of Philadelphia 2024 |
| City of Philadelphia 2023 |
| City of Philadelphia 2022 |
| City of Philadelphia 2021 |
| City of Philadelphia 2020 |

## OPENING YOUR MOST RECENT W-2

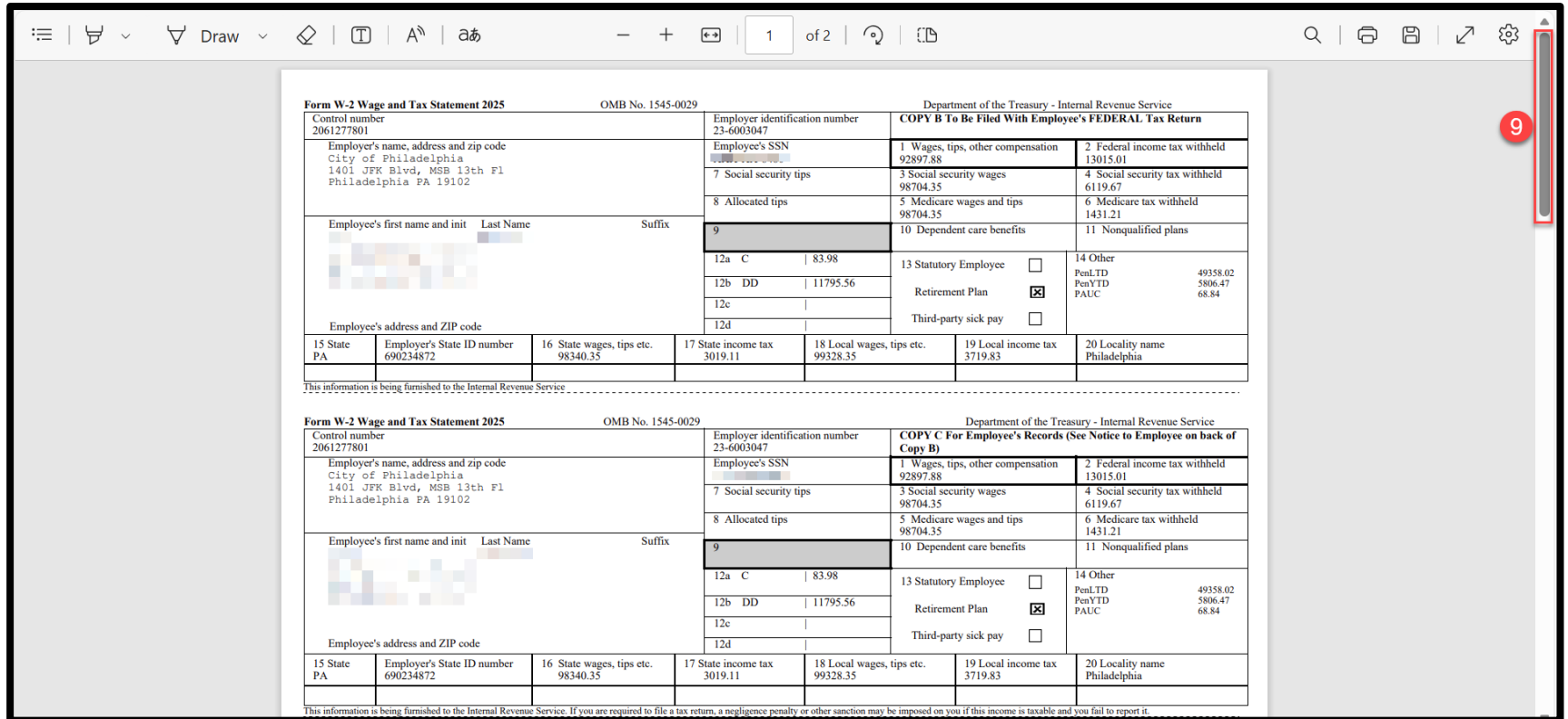
8. Click the Adobe icon for your most recent W-2 to open the file. (**Note:** If you're accessing your W-2 on a mobile device, such as an iPhone or Android phone, download features may vary.)

The screenshot shows the Oracle COP HR Employee Self Service interface. The header includes the Oracle logo and the text "ORACLE COP HR Employee Self Service". The main content area is titled "Form W-2 Wage and Tax Statement". It displays employee information, including Employee Name, Organization Email Address, Employee Number, Business Group, and City of Philadelphia. Below this is a section for "W2 Information". A "W2 Info Links" box on the right contains links for "W2 Letter", "W2 Navigation and FAQ Guide", and "How To Print Your W2". At the bottom, there is a "View or Download W2" section with a list of W2 PDFs for the years 2020 through 2025. The 2025 W2 PDF is highlighted with a red box and a red circle containing the number 8.

| W2 PDF | City of Philadelphia | Year |
|--------|----------------------|------|
| W2 PDF | City of Philadelphia | 2025 |
| W2 PDF | City of Philadelphia | 2024 |
| W2 PDF | City of Philadelphia | 2023 |
| W2 PDF | City of Philadelphia | 2022 |
| W2 PDF | City of Philadelphia | 2021 |
| W2 PDF | City of Philadelphia | 2020 |

## NAVIGATING YOUR W-2

9. Click and drag the vertical scrollbar down to view the full document.



The screenshot shows a PDF viewer interface with a toolbar at the top. The main content area displays two identical W-2 forms, one above the other. A red circle with the number 9 is positioned next to the vertical scrollbar on the right side of the viewer, indicating the step to click and drag the scrollbar to view the full document.

**Form W-2 Wage and Tax Statement 2025** OMB No. 1545-0029

Department of the Treasury - Internal Revenue Service

**COPY B To Be Filed With Employee's FEDERAL Tax Return**

|                                                                                                                      |  |                                              |  |                                                     |  |                                                             |  |
|----------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------|--|-----------------------------------------------------|--|-------------------------------------------------------------|--|
| Control number<br>2061277801                                                                                         |  | Employer identification number<br>23-6003047 |  | 1 Wages, tips, other compensation<br>92897.88       |  | 2 Federal income tax withheld<br>13015.01                   |  |
| Employer's name, address and zip code<br>City of Philadelphia<br>1401 JFK Blvd, MSB 13th Fl<br>Philadelphia PA 19102 |  | Employee's SSN<br>[REDACTED]                 |  | 3 Social security wages<br>98704.35                 |  | 4 Social security tax withheld<br>6119.67                   |  |
| Employee's first name and init Last Name Suffix<br>[REDACTED]                                                        |  | 7 Social security tips                       |  | 5 Medicare wages and tips<br>98704.35               |  | 6 Medicare tax withheld<br>1431.21                          |  |
|                                                                                                                      |  | 8 Allocated tips                             |  | 10 Dependent care benefits                          |  | 11 Nonqualified plans                                       |  |
|                                                                                                                      |  | 9 [REDACTED]                                 |  |                                                     |  |                                                             |  |
|                                                                                                                      |  | 12a C   83.98                                |  | 13 Statutory Employee <input type="checkbox"/>      |  | 14 Other<br>PenLTD 49358.02<br>PenYTD 5806.47<br>PAUC 68.84 |  |
|                                                                                                                      |  | 12b DD   11795.56                            |  | Retirement Plan <input checked="" type="checkbox"/> |  |                                                             |  |
|                                                                                                                      |  | 12c                                          |  | Third-party sick pay <input type="checkbox"/>       |  |                                                             |  |
|                                                                                                                      |  | 12d                                          |  |                                                     |  |                                                             |  |
| Employee's address and ZIP code                                                                                      |  | 15 State PA                                  |  | Employer's State ID number<br>690234872             |  | 16 State wages, tips etc.<br>98340.35                       |  |
|                                                                                                                      |  | 17 State income tax<br>3019.11               |  | 18 Local wages, tips etc.<br>99328.35               |  | 19 Local income tax<br>3719.83                              |  |
|                                                                                                                      |  |                                              |  |                                                     |  | 20 Locality name<br>Philadelphia                            |  |

This information is being furnished to the Internal Revenue Service.

**Form W-2 Wage and Tax Statement 2025** OMB No. 1545-0029

Department of the Treasury - Internal Revenue Service

**COPY C For Employee's Records (See Notice to Employee on back of Copy B)**

|                                                                                                                      |  |                                              |  |                                                     |  |                                                             |  |
|----------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------|--|-----------------------------------------------------|--|-------------------------------------------------------------|--|
| Control number<br>2061277801                                                                                         |  | Employer identification number<br>23-6003047 |  | 1 Wages, tips, other compensation<br>92897.88       |  | 2 Federal income tax withheld<br>13015.01                   |  |
| Employer's name, address and zip code<br>City of Philadelphia<br>1401 JFK Blvd, MSB 13th Fl<br>Philadelphia PA 19102 |  | Employee's SSN<br>[REDACTED]                 |  | 3 Social security wages<br>98704.35                 |  | 4 Social security tax withheld<br>6119.67                   |  |
| Employee's first name and init Last Name Suffix<br>[REDACTED]                                                        |  | 7 Social security tips                       |  | 5 Medicare wages and tips<br>98704.35               |  | 6 Medicare tax withheld<br>1431.21                          |  |
|                                                                                                                      |  | 8 Allocated tips                             |  | 10 Dependent care benefits                          |  | 11 Nonqualified plans                                       |  |
|                                                                                                                      |  | 9 [REDACTED]                                 |  |                                                     |  |                                                             |  |
|                                                                                                                      |  | 12a C   83.98                                |  | 13 Statutory Employee <input type="checkbox"/>      |  | 14 Other<br>PenLTD 49358.02<br>PenYTD 5806.47<br>PAUC 68.84 |  |
|                                                                                                                      |  | 12b DD   11795.56                            |  | Retirement Plan <input checked="" type="checkbox"/> |  |                                                             |  |
|                                                                                                                      |  | 12c                                          |  | Third-party sick pay <input type="checkbox"/>       |  |                                                             |  |
|                                                                                                                      |  | 12d                                          |  |                                                     |  |                                                             |  |
| Employee's address and ZIP code                                                                                      |  | 15 State PA                                  |  | Employer's State ID number<br>690234872             |  | 16 State wages, tips etc.<br>98340.35                       |  |
|                                                                                                                      |  | 17 State income tax<br>3019.11               |  | 18 Local wages, tips etc.<br>99328.35               |  | 19 Local income tax<br>3719.83                              |  |
|                                                                                                                      |  |                                              |  |                                                     |  | 20 Locality name<br>Philadelphia                            |  |

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

## PRINTING YOUR W-2

- Click the **Print** icon to initiate printing.
- Select a **Printer** from the dropdown menu.
- Click **Print**.

Print

Total: 2 sheets of paper

Printer

Finance OnePhilly Xerox AltaLi... 

Copies

1

Layout

Portrait

Landscape

Pages

All

12

Print

Cancel

Form W-2 Wage and Tax Statement 2025

OMB No. 1545-0029

Department of the Treasury - Internal Revenue Service

|                                                                                                                      |                                               |                                                       |                                           |                                |                                                             |                                |                                  |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------|-------------------------------------------|--------------------------------|-------------------------------------------------------------|--------------------------------|----------------------------------|
| Control number<br>2061277801                                                                                         | Employer identification number<br>23-6003047  | COPY B To Be Filed With Employee's FEDERAL Tax Return |                                           |                                |                                                             |                                |                                  |
| Employer's name, address and zip code<br>City of Philadelphia<br>1401 JFK Blvd, MSB 13th Fl<br>Philadelphia PA 19102 | Employee's SSN<br>[REDACTED]                  | 1 Wages, tips, other compensation<br>92897.88         | 2 Federal income tax withheld<br>13015.01 |                                |                                                             |                                |                                  |
| Employee's first name and init Last Name Suffix<br>[REDACTED]                                                        | 7 Social security tips<br>98704.35            | 3 Social security wages<br>98704.35                   | 4 Social security tax withheld<br>6119.67 |                                |                                                             |                                |                                  |
|                                                                                                                      | 8 Allocated tips                              | 5 Medicare wages and tips<br>98704.35                 | 6 Medicare tax withheld<br>1431.21        |                                |                                                             |                                |                                  |
|                                                                                                                      | 9                                             | 10 Dependent care benefits                            |                                           |                                | 11 Nonqualified plans                                       |                                |                                  |
|                                                                                                                      | 12a C 83.98                                   | 13 Statutory Employee <input type="checkbox"/>        |                                           |                                | 14 Other<br>PenLTD 49358.02<br>PenYTD 5806.47<br>PAUC 68.84 |                                |                                  |
|                                                                                                                      | 12b DD 11795.56                               | Retirement Plan <input checked="" type="checkbox"/>   |                                           |                                |                                                             |                                |                                  |
| 12c                                                                                                                  | Third-party sick pay <input type="checkbox"/> |                                                       |                                           |                                |                                                             |                                |                                  |
| 12d                                                                                                                  |                                               |                                                       |                                           |                                |                                                             |                                |                                  |
| Employee's address and ZIP code                                                                                      | 15 State PA                                   | Employer's State ID number<br>690234872               | 16 State wages, tips etc.<br>98340.35     | 17 State income tax<br>3019.11 | 18 Local wages, tips etc.<br>99328.35                       | 19 Local income tax<br>3719.83 | 20 Locality name<br>Philadelphia |

Form W-2 Wage and Tax Statement 2025

OMB No. 1545-0029

Department of the Treasury - Internal Revenue Service

|                                                                                                                      |                                               |                                                       |                                           |                                |                                                             |                                |                                  |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------|-------------------------------------------|--------------------------------|-------------------------------------------------------------|--------------------------------|----------------------------------|
| Control number<br>2061277801                                                                                         | Employer identification number<br>23-6003047  | COPY B To Be Filed With Employee's FEDERAL Tax Return |                                           |                                |                                                             |                                |                                  |
| Employer's name, address and zip code<br>City of Philadelphia<br>1401 JFK Blvd, MSB 13th Fl<br>Philadelphia PA 19102 | Employee's SSN<br>[REDACTED]                  | 1 Wages, tips, other compensation<br>92897.88         | 2 Federal income tax withheld<br>13015.01 |                                |                                                             |                                |                                  |
| Employee's first name and init Last Name Suffix<br>[REDACTED]                                                        | 7 Social security tips<br>98704.35            | 3 Social security wages<br>98704.35                   | 4 Social security tax withheld<br>6119.67 |                                |                                                             |                                |                                  |
|                                                                                                                      | 8 Allocated tips                              | 5 Medicare wages and tips<br>98704.35                 | 6 Medicare tax withheld<br>1431.21        |                                |                                                             |                                |                                  |
|                                                                                                                      | 9                                             | 10 Dependent care benefits                            |                                           |                                | 11 Nonqualified plans                                       |                                |                                  |
|                                                                                                                      | 12a C 83.98                                   | 13 Statutory Employee <input type="checkbox"/>        |                                           |                                | 14 Other<br>PenLTD 49358.02<br>PenYTD 5806.47<br>PAUC 68.84 |                                |                                  |
|                                                                                                                      | 12b DD 11795.56                               | Retirement Plan <input checked="" type="checkbox"/>   |                                           |                                |                                                             |                                |                                  |
| 12c                                                                                                                  | Third-party sick pay <input type="checkbox"/> |                                                       |                                           |                                |                                                             |                                |                                  |
| 12d                                                                                                                  |                                               |                                                       |                                           |                                |                                                             |                                |                                  |
| Employee's address and ZIP code                                                                                      | 15 State PA                                   | Employer's State ID number<br>690234872               | 16 State wages, tips etc.<br>98340.35     | 17 State income tax<br>3019.11 | 18 Local wages, tips etc.<br>99328.35                       | 19 Local income tax<br>3719.83 | 20 Locality name<br>Philadelphia |

This information is being furnished to the Internal Revenue Service

Form W-2 Wage and Tax Statement 2025

OMB No. 1545-0029

Department of the Treasury - Internal Revenue Service

|                                                                                                                      |                                               |                                                                          |                                           |                                |                                                             |                                |                                  |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------------------------|-------------------------------------------|--------------------------------|-------------------------------------------------------------|--------------------------------|----------------------------------|
| Control number<br>2061277801                                                                                         | Employer identification number<br>23-6003047  | COPY C For Employer's Records (See Notice to Employee on back of Copy B) |                                           |                                |                                                             |                                |                                  |
| Employer's name, address and zip code<br>City of Philadelphia<br>1401 JFK Blvd, MSB 13th Fl<br>Philadelphia PA 19102 | Employee's SSN<br>[REDACTED]                  | 1 Wages, tips, other compensation<br>92897.88                            | 2 Federal income tax withheld<br>13015.01 |                                |                                                             |                                |                                  |
| Employee's first name and init Last Name Suffix<br>[REDACTED]                                                        | 7 Social security tips<br>98704.35            | 3 Social security wages<br>98704.35                                      | 4 Social security tax withheld<br>6119.67 |                                |                                                             |                                |                                  |
|                                                                                                                      | 8 Allocated tips                              | 5 Medicare wages and tips<br>98704.35                                    | 6 Medicare tax withheld<br>1431.21        |                                |                                                             |                                |                                  |
|                                                                                                                      | 9                                             | 10 Dependent care benefits                                               |                                           |                                | 11 Nonqualified plans                                       |                                |                                  |
|                                                                                                                      | 12a C 83.98                                   | 13 Statutory Employee <input type="checkbox"/>                           |                                           |                                | 14 Other<br>PenLTD 49358.02<br>PenYTD 5806.47<br>PAUC 68.84 |                                |                                  |
|                                                                                                                      | 12b DD 11795.56                               | Retirement Plan <input checked="" type="checkbox"/>                      |                                           |                                |                                                             |                                |                                  |
| 12c                                                                                                                  | Third-party sick pay <input type="checkbox"/> |                                                                          |                                           |                                |                                                             |                                |                                  |
| 12d                                                                                                                  |                                               |                                                                          |                                           |                                |                                                             |                                |                                  |
| Employee's address and ZIP code                                                                                      | 15 State PA                                   | Employer's State ID number<br>690234872                                  | 16 State wages, tips etc.<br>98340.35     | 17 State income tax<br>3019.11 | 18 Local wages, tips etc.<br>99328.35                       | 19 Local income tax<br>3719.83 | 20 Locality name<br>Philadelphia |

## SAVING YOUR W-2

13. Click the **Print** icon to initiate saving.
14. Select **Save as PDF** from the dropdown menu.
15. Click **Save**.

The screenshot shows a web browser window displaying a W-2 form and a print dialog. A red circle with the number 13 points to the print icon in the browser's toolbar. A red circle with the number 14 points to the 'Save as PDF' option in the print dialog's dropdown menu. A red circle with the number 15 points to the 'Save' button at the bottom of the print dialog.

**W-2 Form Data:**

| Wage and Tax Statement 2025                                                                   |  | OMB No. 1545-0029                                            |                                           | Department of the Treasury - Internal Revenue Service |  |
|-----------------------------------------------------------------------------------------------|--|--------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------|--|
| Employer identification number<br>23-6003047                                                  |  | <b>COPY B To Be Filed With Employee's FEDERAL Tax Return</b> |                                           |                                                       |  |
| Employee's name, address and zip code<br>1401 JPM Chase, MSB 13th Fl<br>Philadelphia PA 19102 |  | 1 Wages, tips, other compensation<br>92897.88                | 2 Federal income tax withheld<br>13015.01 |                                                       |  |
| Employee's first name and initial<br>Last Name<br>Suffix                                      |  | 7 Social security tips<br>98704.35                           | 3 Social security wages<br>98704.35       | 4 Social security tax withheld<br>6119.67             |  |
|                                                                                               |  | 8 Allocated tips<br>98704.35                                 | 5 Medicare wages and tips<br>98704.35     | 6 Medicare tax withheld<br>1431.21                    |  |
|                                                                                               |  | 9                                                            | 10 Dependent care benefits                | 11 Nonqualified plans                                 |  |

**Print Dialog:**

- Printer: Save as PDF
- Layout: Portrait (selected), Landscape
- Pages: All (selected), Odd pages only
- Buttons: Save, Cancel