



2024 S-Corporation Shareholder Insurance Calculation

Company: _____

*Please fill out a separate section for each > 2% Shareholder

Shareholder Name:

Ownership Percentage:

_____ 2024 Health Insurance Premiums paid for greater than 2% Shareholders
_____ 2024 Accident Insurance Premiums paid for greater than 2% Shareholders
_____ Total 2024 Shareholder Insurance to be added to W2

Shareholder Name:

Ownership Percentage:

_____ 2024 Health Insurance Premiums paid for greater than 2% Shareholders
_____ 2024 Accident Insurance Premiums paid for greater than 2% Shareholders
_____ Total 2024 Shareholder Insurance to be added to W2

Shareholder Name:

Ownership Percentage:

_____ 2024 Health Insurance Premiums paid for greater than 2% Shareholders
_____ 2024 Accident Insurance Premiums paid for greater than 2% Shareholders
_____ Total 2024 Shareholder Insurance to be added to W2

Shareholder Name:

Ownership Percentage:

_____ 2024 Health Insurance Premiums paid for greater than 2% Shareholders
_____ 2024 Accident Insurance Premiums paid for greater than 2% Shareholders
_____ Total 2024 Shareholder Insurance to be added to W2