



Employee's Withholding Allowance Certificate
New York State • New York City • Yonkers

Form with fields for: First name and middle initial, Last name, Your Social Security number, Permanent home address, Apartment number, City, village, or post office, State, ZIP code, and marital status options.

I certify that I am entitled to the number of withholding allowances claimed on this certificate.

Penalty - A penalty of \$500 may be imposed for any false statement you make that decreases the amount of money you have withheld from your wages.

Employee's signature and Date fields

Employee: Give this form to your employer and keep a copy for your records. Remember to review this form once a year and update it if needed.

Note: Single taxpayers with one job and zero dependents, enter 1 on lines 1 and 2 (if applicable). Married taxpayers with or without dependents, heads of household or taxpayers that expect to itemize deductions or claim tax credits, or both, complete the worksheet in the instructions.

Employers only: Keep this certificate with your records. Section with checkboxes for exemption allowances, new hire status, and health insurance availability.

Employer's name and address (Employer: complete this section only if you must send a copy of this form to the New York State Tax Department.) and Employer identification number fields

Scan here

