1HZ<RUN 6WDWH 'HSDUWPHQW RI)LQDQFH

(PSOR\HH¶V :LW$KOKOORRZDOODQFH &HUWL¿FDW

1HZ<RUN 6WDW<HU1 &LW<RQ<HUV

First name and middle initial	Last name	Your social security number
Permanent home address (number and street or rural route)	Apartment number	6LQJOH RU +HDG RI KRXVHKROG ☐ Married ☐ Married, but withhold at higher single rate ☐ Note: ,I PDUULHG EXW OHJDOO\ VHSDUDWH the Single or Head of household ER[
&LW\ YLOODJH RU SRVW RI¿FH 6WDWH =,3FRGH		

Are you a resident of New York City? ..... Yes ☐ No ☐

Are you a resident of Yonkers? ..... Yes ☐ No ☐

Complete the worksheet on page 3 before making any entries.

1 7RWDO QXPEHU RI DOORZDQFHV<RXU 6WDWH &RQGXFW &RXUW &DOF OH	1	
2 Total number of allowances for New York City (from line 28)	2	

Use lines 3, 4, and 5 below to have additional withholding per pay period under special agreement with your employer.

3 1HZ<RUN 6WDW.H...D.P.R.X.QW.....	3	
4 New York City amount	4	
5 Yonkers amount	5	

, FHUWLI\ WKDW , DP HQWLWOHG WR WKH QXPEHU RI ZLWKKROGLQJ DOORZDQFHV FO

(PSOR\HH¶V 1DPH &DXUH	'DWH

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. You may also be subject to criminal penalties.

Employee: detach this page and give it to your employer; keep a copy for your records.

Employers only: Mark an X LQ ER[DQG RU ER[% WR LQGLFDWH ZK\ \RX DUH &RPSOHWLQJ &HUWL¿FDW RI

$ (PSOR\HH FODLPHG PRUH WKDQ H[H.P.S.W.LRQ DOORZDQFHV IRU 1<6

% (PSOR\HH LV D QHZ...KL%LH RU LL.H.VWRQ.H performed services for pay (mm-dd-yyyy) (see instr.)

$UH GHSHQGHQW KHDOWK LQVXUDQFH EH.H.¿W DYDLODEOH IRU WKLV HPSOR\HH

,I Yes .H.Q.W.H.U .W.K.H. GDWH WKH K@0 K@0 @ 0 K @ 0

Employer's name and address (Employer: complete this section only if you are sending a copy of this form to the NYS Tax Department.)	(PSOR\HU LGHQWL¿FDWLRQ QXPEHU

Instructions

Changes effective for 2013

)RUP ,7 KDV EHHQ UHYLVHG WR LQFOXGH &RXUW &DOF OH SDJH XVHG WR FRPSXWH \RXU ZLWKKROGLQJ DOORZDQFHV EHJLQQLQJ RQ SDJH XVHG WR HQWHU DQ DG GLWLRQDO &RXUW &DOF OH ZLWKKROGLQJ KDVH EHHQ UHYLVHG ,I \RX SUHYLRXVO\ ¿OHG D)RUP 7 DQG XVHG WKH ZRUNVKHHW RU FKDUWV \RX VKRXOG FRPSOHWH D QHZ)RUP ,7 DQG JLYH LW WR \RXU HPSOR\HU

:KR VKRXOG ¿OH WKLV IRUP

7KLV FHUWL¿FDWH)RUP ,7 LV FRPSOHWHG &RXUW &DOF OH &RXUW &DOF OH &RXUW &DOF OH

Exemption from withholding

<RX FDQQRW XVH)RUP ,7 WR FODLP H[HPSWLRQ IURP ZLWKKROGLQJ
7R FODLP H[HPSWLRQ IURP LQFRPH WDA &HUWL¿FDWH H[ZLWKKROGLQJ \RX
)RUP ,7 (*Certificate of Exemption from Withholding*) with your
HPSORHU PXVW ¿OH D QHZ FHUWL¿FDWH HDFK \HDU WKDW \RX TXDOLI\ IRU
H[HPSWLRQ LQ WKH H[HPSWLRQ IURP ZLWKKROGLQJ LV DOORZDEOH RQO\ LI \RX KDG
QR 1HZ <RUN LQFRPH WD[OLDELOLW\ LQ WKH SULRU \HDU &RX H[SHFW QRQH LQ WKH
current year, and &RX DUH RYHU &HDUV RI DJH XQGHU RU D IXOO WLPH
VWXGHQW &RX &HPD\ DOVR FODLP H[HPSWLRQ IURP ZLWKKROGLQJ LI
you are a military spouse and meet the conditions set forth under the
6HUYLFHPHPEHUV &LYLO &HOLHI &RUSV &RQGLWLRQV &RXVHV
5HVLGHQF\ &RUSV &RXVHV D GHSHQGHQW ZKR LV XQGHU RU D
IXOO WLPH VWXGHQW &RX PD\ RZH WD[LI &RXU LQFRPH LV PRUH WKDQ

Withholding allowances

You may not claim a withholding allowance for yourself or, if married,
your spouse. Claim the number of withholding allowances you compute
LQ 3DUW DQG 3DUW RQ SDJH RI WKLV IRUP ,I &RX ZDQW PRUH WD[
withheld, you may claim fewer allowances. If you claim more than
14 allowances, your employer must send a copy of your Form IT-2104
WR WKH 1HZ <RUN &LW\ &RXQW &RXQW &RXQW

	$1,132,200 $1,183,649	$1,183,650 $1,235,149	$1,235,150 $1,286,599	$1,286,600 $1,338,049	$1,338,050 $1,389,549	$1,389,550 $1,440,999	$1,441,000 $1,492,449	$1,492,450 $1,543,899	$1,543,900 $1,595,399	$1,595,400 $1,646,849

	$102,900 $123,499	$123,500 $144,099	$144,100 $164,649	$164,650 $185,249	$185,250 $	$226,400 $	$267,600 $	$308,750 $	$360,250	$411,700	$463,150

py o4ctu76 (Page 64) 11/00 1 5176649

Need help?

Visit our Web site at www.tax.ny.gov

- JHW LQIRUPDWLRQ DQG PDQDJH \RX
- FKHFN IRU QHZ RQOLQH VHUYLFHV D

Telephone assistance

$XWRPDWHG LQFRPH WD[UHIXQG VWDWXV

Personal Income Tax ,QIRUPDWLRQ &HQWHU

7R RUGHU IRUPV DQG SXEOLFDWLRQV

Text Telephone (TTY) Hotline IRU SHUVRQV ZLWK hearing and speech disabilities using a TTY)

	$1,132,200 $1,183,649	$1,183,650 $1,235,149	$1,235,150 $1,286,599	$1,286,600 $1,338,049	$1,338,050 $1,389,549	$1,389,550 $1,440,999	$1,441,000 $1,492,449	$1,492,450 $1,543,899	$1,543,900 $1,595,399	$1,595,400 $1,646,849