



Department of Taxation and Finance

(PSOR\HH\TV :LWKKROGLQJ \$OORZDQFH)
New York State • New York City • Yonkers

IT-2104

Form with fields for First name and middle initial, Last name, Your Social Security number, Permanent home address, Apartment number, and marital status options.

Before making any entries, see the Note below, and if applicable, complete the worksheet in the instructions.

Table with 2 columns: Question number and Answer field. Contains questions about the number of allowances claimed.

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

Table with 2 columns: Question number and Answer field. Contains questions about New York State, New York City, and Yonkers amounts.

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.

Form with fields for Employee's signature and Date.

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 RQ OLQHV DQG LI DSSOLFDEOH 0DUULHG dependents, heads of household or taxpayers that expect to itemize deductions or claim tax credits, or both, complete the worksheet in the instructions.

Employer: .HHS WKL V FHUWL FDWH ZLWK \RXU UHFRUGV ,I DQ\ RI WKH IROORZLQJ DSSO\ PDUN DQ X in each corresponding box, complete the additional information requested, a copy of this form to New York State.

Form with checkboxes and input fields for Employer questions A and B regarding exemption allowances and new hire information.

You may report new hire information online instead of mailing the form to New York State. Visit www.nynewhire.com. Note:6306.9478Tm ngt78Tw-5w6s.

Form with fields for Employer's name and address and a QR code area.

