# ► Denotes required field



# Employee Set up Form

Company #C	этграну мате				<b>&gt;</b> Date _			
Employee #	► Status New	Hire Rehire _	Employee	change	► Status			
▶ SS#					W2	109	99 Both	
► Employee Full Name					1099 FUI/SU	JI Taxable	Y / N	
► Mailing Address					LLC Membe			
► City, State, Zip					_	-	/Taxes (S-Corp) wners Draw	
Employee Email Address					Work State			
Date of Birth	<b>Date</b> of	Hire		Gender	Male	Female	Non-Binary	
► Rate of Pay Salary Y	/ N Per Pay Salary A	mount \$		Di	v/Branch/Dep	o		
Hourly Rate \$	Override Div/Bra	anch/Dept		▶	Status	Full Tir	me / Part Time	
Hourly Rate \$	Override Div/Bra	anch/Dept		W	ork Visa Y / I	٧		_
				Vis	sa Туре			_
► Federal Withholding (Ple	ease check all that app	ly)		Vis	sa ID #			
Single or Married Filing	g SeparatelyM	arried Filing Jointly	Head	d of Hous	ehold St	:ep 2(c) C	hecked Y/N	
Dependents (Step	3) \$	Other Income (Ste	ep 4a) \$	5				
Deductions (Step 4	4b) \$	Additional Fed (St	tep 4c) \$	5				
► State Withholding M	l or S # of Allowan	ces	Additiona	al State\$_				
0	verride State Withhold	ing: (Specify State)	Additiona	al SWT \$_				
► VT Employee Health Insura	ince Coverage Status:	Eligible/Covered	_ Eligible/Not Co	vered	No Employer Pa	aid Ins/Not	Eligible Oth	er
Time Off Banks		Begin Balances			Notes			
Time On Danks		begin balances			Notes			
Deduction Name		Per Pay Amount	Per Pay Perc	centage	Notes			
Direct Deposit – Bank Name	Account Type (C or S or HSA)	Bank ABA#		Account #			Amount or Full NET PAY	
		_						
I (we) hereby authorize and request the CON called BANK, and I (we) authorize and reque I (we) authorize and reque I (we) authorize and request COMPANY to e delivered to me written notice of the correct following settlement for the erroneous entry It is understood that this agreement may be initiated by COMPANY after receipt of such receipt of such notification and a reasonable I (we) recognize, acknowledge and accept the claim incident to the operation of this plan, non-credit of any deposit, and any claim who	est BANK to accept any credit entries in iffect repayment to COMPANY for am tion and the reason therefore; and the terminated by me (either of us) at an notification and a reasonable opportule time to act on it. his service is being provided for my (of arising from any act or omission by the	nitiated by COMPANY to such accounts owed it because of a prior electricity of the prior of the correcting entry is transmitted in any time by written notification to Counity to act on it. Any such notification to convenience. As such, I (we) act of COMPANY and/or Asure Software COMPANY and/or Asure Software.	ount and to credit the surroneous credit initiate such time as to be deli OMPANY or BANK. An ation to BANK shall be gree to hold the COMP.	same to such acced to my (our) accivered or made any such notification effective only with ANY, Asure Softs, including with	count without respons count if prior to the cavailable to BANK before on to COMPANY shall th respect to entries of ware, each participation out limitation any clai	sibility for the co orrecting entry, ore midnight of I be effective on credited to my (on the based on alle	orrectness thereof. the COMPANY has sent the tenth day next nly with respect to entrie our) account by BANK a ACHA harmless from any eged loss as a result of	s fter
account.  PRE-NOTE: Asur highly encourages that all a	occount as through the pre-peting pr	ocess. The ONLY times when you	should say Pre-note M	O is if you are so	atting up a Direct Don	osit account the	at will be used with an H	IC A

► Employee Signature \_\_\_\_\_ ► Submitted by \_\_\_\_\_

# **Attention Employers and Employees:**

# Please read before completing the 2023 Form W-4

**Significant changes were made to the Form W-4 in 2020**, due to the federal tax law changes that took place in 2018. If you have not filled out a Form W-4 since these changes were made, please review the resources below for assistance.

Please review the IRS Estimator prior to completing the form.

### **IRS W-4 Estimator**

### FAQs on the 2020 Form W-4

The American Payroll Association has provided a template letter for employers to share with their employees regarding the changes that were made to the form in 2020. For more information, and to view the letter, please visit: https://www.americanpayroll.org/compliance/compliance-overview/hot-topics/2020-form-w-4

Employee's Withholding Certificate

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Give Form W-4 to your employer.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Your withholding is subject to review by the IRS.

Step 1:	(a) First name and middle initial	Last name		(b) Social security number			
Enter Personal Information	Address			Does your name match the name on your social security card? If not, to ensure you get			
	City or town, state, and ZIP code			credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.			
	(c) Single or Married filing separately  Married filing jointly or Qualifying surviving s						
	Description of the property of	se, skip to Step 5. See page					
Step 2: Multiple Job or Spouse Works	Complete this step if you (1) hold more also works. The correct amount of wire Do only one of the following.  (a) Reserved for future use.  (b) Use the Multiple Jobs Worksheet  (c) If there are only two jobs total, you option is generally more accurate higher paying job. Otherwise, (b) in the complex of t	on page 3 and enter the resu u may check this box. Do the than (b) if pay at the lower pa s more accurate	e earned from all of the lt in Step 4(c) below; same on Form W-4 f	or for the other job. This			
	os 3-4(b) on Form W-4 for only ONE of the ate if you complete Steps 3-4(b) on the Form			os. (Your withholding will			
Step 3:	If your total income will be \$200,000	or less (\$400,000 or less if ma	rried filing jointly):				
Claim Dependent	Multiply the number of qualifying o			-			
and Other Credits	Multiply the number of other depe Add the amounts above for qualifying		. \$ ents. You may add to	-			
	this the amount of any other credits.	Enter the total here		3 \$			
Step 4 (optional): Other	(a) Other income (not from jobs). expect this year that won't have we This may include interest, dividend	vithholding, enter the amount					
Adjustments	(b) Deductions. If you expect to claim want to reduce your withholding, uthe result here						
	(c) Extra withholding. Enter any addi	itional tax you want withheld e	each pay period	4(c) \$			
Step 5: Sign Here	Under penalties of perjury, I declare that this cert	ificate, to the best of my knowled	dge and belief, is true, c	orrect, and complete.			
	Employee's signature (This form is not va	alid unless you sign it.)	Da	ite			
Employers Only	Employer's name and address		First date of employment	Employer identification number (EIN)			

Cat. No. 10220Q

Form W-4 (2023) Page 2

### General Instructions

Section references are to the Internal Revenue Code.

### **Future Developments**

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

### Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

Exemption from withholding. You may claim exemption from withholding for 2023 if you meet both of the following conditions: you had no federal income tax liability in 2022 and you expect to have no federal income tax liability in 2023. You had no federal income tax liability in 2022 if (1) your total tax on line 24 on your 2022 Form 1040 or 1040-SR is zero (or less than the sum of lines 27, 28, and 29), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2023 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2024.

Your privacy. If you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c).

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay income and self-employment taxes through withholding from your wages, you should enter the self-employment income on Step 4(a). Then compute your self-employment tax, divide that tax by the number of pay periods remaining in the year, and include that resulting amount per pay period on Step 4(c). You can also add half of the annual amount of self-employment tax to Step 4(b) as a deduction. To calculate self-employment tax, you generally multiply the self-employment income by 14.13% (this rate is a quick way to figure your selfemployment tax and equals the sum of the 12.4% social security tax and the 2.9% Medicare tax multiplied by 0.9235). See Pub. 505 for more information, especially if the sum of self-employment income multiplied by 0.9235 and wages exceeds \$160,200 for a given individual.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

## Specific Instructions

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

If you (and your spouse) have a total of only two jobs, you may check the box in option (c). The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



Multiple jobs. Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

#### Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2023 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

Step 4(c). Enter in this step any additional tax you want withheld from your pay each pay period, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Form W-4 (2023) Page 3

#### Step 2(b) - Multiple Jobs Worksheet (Keep for your records.)



If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job. To be accurate, submit a new Form W-4 for all other jobs if you have not updated your withholding since 2019.

Note: If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables.

1	<b>Two jobs.</b> If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter		
	that value on line 1. Then, skip to line 3	1	\$
2	<b>Three jobs.</b> If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.		
	a Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries	_	•
	and enter that value on line 2a	2a	\$
	b Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount		
	on line 2b	2b	\$
	c Add the amounts from lines 2a and 2b and enter the result on line 2c	2c	\$
3	Enter the number of pay periods per year for the highest paying job. For example, if that job pays		
	weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc	3	
4	Divide the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in Step 4(c) of Form W-4 for the highest paying job (along with any other additional		
	amount you want withheld)	4	<u>\$</u>
	Step 4(b) - Deductions Worksheet (Keep for your records.)		<u>"</u>
1	Enter an estimate of your 2023 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income.	1	\$
			<u> </u>
2	Enter:   • \$27,700 if you're married filing jointly or a qualifying surviving spouse • \$20,800 if you're head of household • \$13,850 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other		
	adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	4	\$
5	Add lines 3 and 4. Enter the result here and in Step 4(b) of Form W-4	5	\$

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

Form W-4 (2023) Page **4** 

Married Filing Jointly or Qualifying Surviving Spouse  Lower Paying Job Annual Taxable Wage & Salary													
Higher Paying Job				Lowe	r Paying	Job Annua	al Taxable	Wage & S	Salary				
Annual Taxable Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000	
\$0 - 9,999	\$0	\$0	\$850	\$850	\$1,000	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,870	
\$10,000 - 19,999	0	930	1,850	2,000	2,200	2,220	2,220	2,220	2,220	2,220	3,200	4,070	
\$20,000 - 29,999	850	1,850	2,920	3,120	3,320	3,340	3,340	3,340	3,340	4,320	5,320	6,190	
\$30,000 - 39,999	850	2,000	3,120	3,320	3,520	3,540	3,540	3,540	4,520	5,520	6,520	7,390	
\$40,000 - 49,999	1,000	2,200	3,320	3,520	3,720	3,740	3,740	4,720	5,720	6,720	7,720	8,590	
\$50,000 - 59,999	1,020	2,220	3,340	3,540	3,740	3,760	4,750	5,750	6,750	7,750	8,750	9,610	
\$60,000 - 69,999	1,020	2,220	3,340	3,540	3,740	4,750	5,750	6,750	7,750	8,750	9,750	10,610	
\$70,000 - 79,999	1,020	2,220	3,340	3,540	4,720	5,750	6,750	7,750	8,750	9,750	10,750	11,610	
\$80,000 - 99,999	1,020	2,220	4,170	5,370	6,570	7,600	8,600	9,600	10,600	11,600	12,600	13,460	
\$100,000 - 149,999	1,870	4,070	6,190	7,390	8,590	9,610	10,610	11,660	12,860	14,060	15,260	16,330	
\$150,000 - 239,999 \$240,000 - 259,999	2,040 2,040	4,440 4,440	6,760 6,760	8,160	9,560 9,560	10,780	11,980 11,980	13,180	14,380	15,580 15,580	16,780 16,780	17,850 17,850	
\$260,000 - 259,999	2,040	4,440	6,760	8,160 8,160	9,560	10,780	11,980	13,180	14,380	15,580	16,780	18,140	
\$280,000 - 279,999	2,040	4,440	6,760	8,160	9,560	10,780	11,980	13,180	14,380	15,870	17,870	19,740	
\$300,000 - 319,999	2,040	4,440	6,760	8,160	9,560	10,780	11,980	13,470	15,470	17,470	19,470	21,340	
\$320,000 - 364,999	2,040	4,440	6,760	8,550	10,750	12,770	14,770	16,770	18,770	20,770	22,770	24,640	
\$365,000 - 524,999	2,970	6,470	9,890	12,390	14,890	17,220	19,520	21,820	24,120	26,420	28,720	30,880	
\$525,000 and over	3,140	6,840	10,460	13,160	15,860	18,390	20,890	23,390	25,890	28,390	30,890	33,250	
				Single o	r Marrie	d Filing S	Separate	ly					
Higher Paying Job	Single or Married Filing Separately  Lower Paying Job Annual Taxable Wage & Salary												
Annual Taxable	\$0 -	\$10,000 -	\$20,000 -	\$30,000 -	\$40,000 -	\$50,000 -	\$60,000 -	\$70,000 -	\$80,000 -	\$90,000 -	\$100,000 -	\$110,000 -	
Wage & Salary	9,999	19,999	29,999	39,999	49,999	59,999	69,999	79,999	89,999	99,999	109,999	120,000	
\$0 - 9,999	\$310	\$890	\$1,020	\$1,020	\$1,020	\$1,860	\$1,870	\$1,870	\$1,870	\$1,870	\$2,030	\$2,040	
\$10,000 - 19,999	890	1,630	1,750	1,750	2,600	3,600	3,600	3,600	3,600	3,760	3,960	3,970	
\$20,000 - 29,999	1,020	1,750	1,880	2,720	3,720	4,720	4,730	4,730	4,890	5,090	5,290	5,300	
\$30,000 - 39,999	1,020	1,750	2,720	3,720	4,720	5,720	5,730	5,890	6,090	6,290	6,490	6,500	
\$40,000 - 59,999	1,710	3,450	4,570	5,570	6,570	7,700	7,910	8,110	8,310	8,510	8,710	8,720	
\$60,000 - 79,999	1,870	3,600	4,730	5,860	7,060	8,260	8,460	8,660	8,860	9,060	9,260	9,280	
\$80,000 - 99,999	1,870	3,730	5,060	6,260	7,460	8,660	8,860	9,060	9,260	9,460	10,430	11,240	
\$100,000 - 124,999	2,040	3,970	5,300	6,500	7,700	8,900	9,110	9,610	10,610	11,610	12,610	13,430	
\$125,000 - 149,999 \$150,000 - 174,999	2,040	3,970	5,300 5,610	6,500 7,610	7,700 9,610	9,610 11,610	10,610 12,610	11,610 13,750	12,610 15,050	13,610 16,350	14,900 17,650	16,020 18,770	
\$175,000 - 174,999	2,720	5,450	7,580	9,580	11,580	13,870	15,180	16,480	17,780	19,080	20,380	21,490	
\$200.000 - 249.999	2,720	5,930	8,360	10,660	12,960	15,260	16,570	17,870	19,170	20,470	21,770	22,880	
\$250,000 - 249,999	2,970	6,010	8,440	10,740	13,040	15,340	16,640	17,940	19,240	20,540	21,840	22,960	
\$400.000 - 449.999	2,970	6.010	8,440	10,740	13.040	15,340	16,640	17,940	19,240	20,540	21,840	22,960	
\$450,000 and over	3,140	6,380	9.010	11,510	14,010	16,510	18,010	19,510	21,010	22,510	24,010	25,330	
,				_		Househo	old		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Higher Paying Job						Job Annua		Wage & S	Salary				
Annual Taxable	\$0 -	\$10,000 -	\$20,000 -	\$30,000 -	\$40,000 -	\$50,000 -	\$60,000 -	\$70,000 -	\$80,000 -	\$90,000 -	\$100,000 -	\$110,000 -	
Wage & Salary	9,999	19,999	29,999	39,999	49,999	59,999	69,999	79,999	89,999	99,999	109,999	120,000	
\$0 - 9,999	\$0	\$620	\$860	\$1,020	\$1,020	\$1,020	\$1,020	\$1,650	\$1,870	\$1,870	\$1,890	\$2,040	
\$10,000 - 19,999	620	1,630	2,060	2,220	2,220	2,220	2,850	3,850	4,070	4,090	4,290	4,440	
\$20,000 - 29,999	860	2,060	2,490	2,650	2,650	3,280	4,280	5,280	5,520	5,720	5,920	6,070	
\$30,000 - 39,999	1,020	2,220	2,650	2,810	3,440	4,440	5,440	6,460	6,880	7,080	7,280	7,430	
\$40,000 - 59,999	1,020	2,220	3,130	4,290	5,290	6,290	7,480	8,680	9,100	9,300	9,500	9,650	
\$60,000 - 79,999	1,500	3,700	5,130	6,290	7,480	8,680	9,880	11,080	11,500	11,700	11,900	12,050	
\$80,000 - 99,999	1,870	4,070	5,690	7,050	8,250	9,450	10,650	11,850	12,260	12,460	12,870	13,820	
\$100,000 - 124,999	2,040	4,440	6,070	7,430	8,630	9,830	11,030	12,230	13,190	14,190	15,190	16,150	
\$125,000 - 149,999	2,040	4,440	6,070	7,430	8,630	9,980	11,980	13,980	15,190	16,190	17,270	18,530	
\$150,000 - 174,999	2,040	4,440	6,070	7,980	9,980	11,980	13,980	15,980	17,420	18,720	20,020	21,280	
\$175,000 - 199,999	2,190	5,390	7,820	9,980	11,980	14,060	16,360	18,660	20,170	21,470	22,770	24,030	
\$200,000 - 249,999	2,720	6,190	8,920	11,380	13,680	15,980	18,280	20,580	22,090	23,390	24,690	25,950	
\$250,000 - 449,999 \$450,000 and over	2,970	6,470 6,840	9,200	11,660 12,430	13,960	16,260	18,560	20,860	22,380	23,680	24,980	26,230	
φισυ,υυυ and over	3,140	0,840	9,770	12,430	14,930	17,430	19,930	22,430	24,150	25,650	27,150	28,600	



Department of Taxation and Finance

IT-2104

# **Employee's Withholding Allowance Certificate**

New York State • New York City • Yonkers

First name and middle initial	Last name		Your Social Securit	ty number
Permanent home address (number and street or rural route)	Ара	rtment number	Single or Head of hou	sehold Married
Chu silver as and offer	State	ZIP code	Married, but withhold	d at higher single rate
City, village, or post office	State	ZIP code	Note: If married but leg the Single or Head of h	gally separated, mark an X in
Are you a resident of New York City?	ew York State and Yonk line 31) sholding per pay perio	d under special a	from line 19)agreement with yo	1 2
I certify that I am entitled to the number of withholding	allowances claimed or	this certificate.		
Employee's signature			Date	
Penalty – A penalty of \$500 may be imposed for any f from your wages. You may also be subject to criminal Employee: detach this page and give it to your em	penalties.		the amount of mone	ey you have withheld
Employer: Keep this certificate with your records.  Mark an X in box A and/or box B to indicate why you a		_	k State (see instruction	ons):
A Employee claimed more than 14 exemption allowar	nces for NYS	A		
B Employee is a new hire or a rehire B First of	date employee performed	services for pay (mn	n-dd-yyyy) (see instr.):	
Are dependent health insurance benefits available	e for this employee?	Yes	No 🗔	
If Yes, enter the date the employee qualifies (mm	ı-dd-yyyy):			
Employer's name and address (Employer: complete this section only if you	are sending a copy of this form to I	he NYS Tax Department.)	Employer identification n	umber

#### Instructions

#### Important information

The 2021-2022 New York State budget was signed into law on April 19, 2021. Changes to New York State personal income tax have caused withholding tax changes for taxpayers with taxable income:

- more than \$2,155,350, and who are married filing jointly or a qualified widow(er);
- more than \$1,077,550, and who are single or married filing separately;
- more than \$1,616,450, and who are head of household.

Accordingly, if you previously filed a Form IT-2104 and earn more than the amounts listed above, you should complete a new 2022 Form IT-2104 and give it to your employer.

#### Changes effective for 2022

Form IT-2104 has been revised for tax year 2022. The worksheet on page 4 and the charts beginning on page 5, used to compute withholding allowances or to enter an additional dollar amount on line(s) 3, 4, or 5, have been revised. If you previously filed a Form IT-2104 and used the worksheet or charts, you should complete a new 2022 Form IT-2104 and give it to your employer.

#### Who should file this form

This certificate, Form IT-2104, is completed by an employee and given to the employer to instruct the employer how much New York State (and New York City and Yonkers) tax to withhold from the employee's pay. The more allowances claimed, the lower the amount of tax withheld.

If the federal Form W-4 you most recently submitted to your employer was for tax year 2019 or earlier, and you did not file Form IT-2104, your employer may use the same number of allowances you claimed on your federal Form W-4. Due to differences in federal and New York State tax law, this may result in the wrong amount of tax withheld for New York State, New York City, and Yonkers.

For tax years 2020 or later, withholding allowances are no longer reported on federal Form W-4. Therefore, if you submit a federal Form W-4 to your employer for tax year 2020 or later, and you do not file Form IT-2104, your employer may use zero as your number of allowances. This may result in the wrong amount of tax withheld for New York State, New York City, and Yonkers.

Complete Form IT-2104 each year and file it with your employer if the number of allowances you may claim is different from federal Form W-4 or

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has changed. Common reasons for completing a new Form IT-2104 each year include the following:

- You started a new job.
- You are no longer a dependent.
- Your individual circumstances may have changed (for example, you were married or have an additional child).
- You moved into or out of NYC or Yonkers.
- You itemize your deductions on your personal income tax return.
- You claim allowances for New York State credits.
- You owed tax or received a large refund when you filed your personal income tax return for the past year.
- Your wages have increased and you expect to earn \$107,650 or more during the tax year.
- The total income of you and your spouse has increased to \$107,650 or more for the tax year.
- You have significantly more or less income from other sources or from another job.
- · You no longer qualify for exemption from withholding.
- You have been advised by the Internal Revenue Service that you are entitled to fewer allowances than claimed on your original federal Form W-4 (submitted to your employer for tax year 2019 or earlier), and the disallowed allowances were claimed on your original Form IT-2104.
- You are a covered employee of an employer that has elected to participate in the Employer Compensation Expense Program.

#### Exemption from withholding

You cannot use Form IT-2104 to claim exemption from withholding. To claim exemption from income tax withholding, you **must** file Form IT-2104-E, Certificate of Exemption from Withholding, with your employer. You must file a new certificate each year that you qualify for exemption. This exemption from withholding is allowable only if you had no New York income tax liability in the prior year, you expect none in the current year, and you are over 65 years of age, under 18, or a full-time student under 25. You may also claim exemption from withholding if you are a military spouse and meet the conditions set forth under the Servicemembers Civil Relief Act as amended by the Military Spouses Residency Relief Act and the Veterans Benefits and Transition Act. If you are a dependent who is under 18 or a full-time student, you may owe tax if your income is more than \$3.100.

#### Withholding allowances

You may not claim a withholding allowance for yourself or, if married, your spouse. Claim the number of withholding allowances you compute in Part 1 and Part 4 of the worksheet on page 4. If you want more tax withheld, you may claim fewer allowances. If you claim more than 14 allowances, your employer must send a copy of your Form IT-2104 to the New York State Tax Department. You may then be asked to verify your allowances. If you arrive at negative allowances (less than zero) on lines 1 or 2 and your employer cannot accommodate negative allowances, enter 0 and see Additional dollar amount(s) below.

Income from sources other than wages – If you have more than \$1,000 of income from sources other than wages (such as interest, dividends, or alimony received), reduce the number of allowances claimed on line 1 and line 2 (if applicable) of the IT-2104 certificate by one for each \$1,000 of nonwage income. If you arrive at negative allowances (less than zero), see Withholding allowances above. You may also consider making estimated tax payments, especially if you have significant amounts of nonwage income. Estimated tax requires that payments be made by the employee directly to the Tax Department on a quarterly basis. For more information, see the instructions for Form IT-2105, Estimated Tax Payment Voucher for Individuals, or see Need help? on page 7.

Other credits (Worksheet line 14) – If you will be eligible to claim any credits other than the credits listed in the worksheet, such as an investment tax credit, you may claim additional allowances.

Find your filing status and your New York adjusted gross income (NYAGI) in the chart below, and divide the amount of the expected credit by the number indicated. Enter the result (rounded to the nearest whole number) on line 14.

Single and NYAGI is:	Head of household and NYAGI is:	Married and NYAGI is:	Divide amount of expected credit by:		
Less than	Less than	Less than	63		
\$215,400	\$269,300	\$323,200			
Between	Between	Between	68		
\$215,400 and	\$269,300 and	\$323,200 and			
\$1,077,550	\$1,616,450	\$2,155,350			
Between	Between	Between	96		
\$1,077,550 and	\$1,616,450 and	\$2,155,350 and			
\$5,000,000	\$5,000,000	\$5,000,000			
Between	Between	Between	100		
\$5,000,000 and	\$5,000,000 and	\$5,000,000 and			
\$25,000,000	\$25,000,000	\$25,000,000			
Over	Over	Over	110		
\$25,000,000	\$25,000,000	\$25,000,000			

Example: You are married and expect your New York adjusted gross income to be less than \$323,200. In addition, you expect to receive a flow-through of an investment tax credit from the S corporation of which you are a shareholder. The investment tax credit will be \$160. Divide the expected credit by 63. 160/63 = 2.5397. The additional withholding allowance(s) would be 3. Enter 3 on line 14.

Married couples with both spouses working – If you and your spouse both work, you should each file a separate IT-2104 certificate with your respective employers. Your withholding will better match your total tax if the higher wage-earning spouse claims all of the couple's allowances and the lower wage-earning spouse claims zero allowances. Do not claim more total allowances than you are entitled to. If your combined wages are:

- less than \$107,650, you should each mark an X in the box Married, but withhold at higher single rate on the certificate front, and divide the total number of allowances that you compute on line 19 and line 31 (if applicable) between you and your working spouse.
- \$107,650 or more, use the chart(s) in Part 5 and enter the additional withholding dollar amount on line 3.

Taxpayers with more than one job – If you have more than one job, file a separate IT-2104 certificate with each of your employers. Be sure to claim only the total number of allowances that you are entitled to. Your withholding will better match your total tax if you claim all of your allowances at your higher-paying job and zero allowances at the lower-paying job. In addition, to make sure that you have enough tax withheld, if you are a single taxpayer or head of household with two or more jobs, and your combined wages from all jobs are under \$107,650, reduce the number of allowances by seven on line 1 and line 2 (if applicable) on the certificate you file with your higher-paying job employer. If you arrive at negative allowances (less than zero), see Withholding allowances above.

If you are a single or a head of household taxpayer, and your combined wages from all of your jobs are between \$107,650 and \$2,263,265, use the chart(s) in Part 6 and enter the additional withholding dollar amount from the chart on line 3.

If you are a married taxpayer, and your combined wages from all of your jobs are \$107,650 or more, use the chart(s) in Part 5 and enter the additional withholding dollar amount from the chart on line 3 (Substitute the words Higher-paying job for Higher earner's wages within the chart).

Dependents – If you are a dependent of another taxpayer and expect your income to exceed \$3,100, you should reduce your withholding allowances by one for each \$1,000 of income over \$2,500. This will ensure that your employer withholds enough tax.

Following the above instructions will help to ensure that you will not owe additional tax when you file your return.

Heads of households with only one job – If you will use the head-of-household filing status on your state income tax return, mark the Single or Head of household box on the front of the certificate. If you have only one job, you may also wish to claim two additional withholding allowances on line 15.

#### Additional dollar amount(s)

You may ask your employer to withhold an additional dollar amount each pay period by completing lines 3, 4, and 5 on Form IT-2104. In most instances, if you compute a negative number of allowances and your employer cannot accommodate a negative number, for each negative allowance claimed you should have an additional \$1.85 of tax withheld per week for New York State withholding on line 3, and an additional \$0.80 of tax withheld per week for New York City withholding on line 4. Yonkers residents should use 16.75% (.1675) of the New York State amount for additional withholding for Yonkers on line 5.

Note: If you are requesting your employer to withhold an additional dollar amount on lines 3, 4, or 5 of this allowance certificate, the additional dollar amount, as determined by these instructions or by using the chart(s) in Part 5 or Part 6, is accurate for a weekly payroll. Therefore, if you are not paid on a weekly basis, you will need to adjust the dollar amount(s) that you compute. For example, if you are paid biweekly, you must double the dollar amount(s) computed.

#### Avoid underwithholding

Form IT-2104, together with your employer's withholding tables, is designed to ensure that the correct amount of tax is withheld from your pay. If you fail to have enough tax withheld during the entire year, you may owe a large tax liability when you file your return. The Tax Department must assess interest and may impose penalties in certain situations in addition to the tax liability. Even if you do not file a return, we may determine that you owe personal income tax, and we may assess interest and penalties on the amount of tax that you should have paid during the year.

#### Employers

Box A – If you are required to submit a copy of an employee's Form IT-2104 to the Tax Department because the employee claimed more than 14 allowances, mark an X in box A and send a copy of Form IT-2104 to: NYS Tax Department, Income Tax Audit Administrator, Withholding Certificate Coordinator, W A Harriman Campus, Albany NY 12227-0865. If the employee is also a new hire or rehire, see Box B instructions. See Publication 55, Designated Private Delivery Services, if not using U.S. Mail.

Due dates for sending certificates received from employees claiming more than 14 allowances are:

Quarter	Due date	Quarter	Due date
January - March	April 30	July – September	October 31
April – June	July 31	October - December	January 31

Box B – If you are submitting a copy of this form to comply with New York State's New Hire Reporting Program, mark an X in box B. Enter the first day any services are performed for which the employee will be paid wages, commissions, tips and any other type of compensation. For services based solely on commissions, this is the first day an employee working for commissions is eligible to earn commissions. Also, mark an X in the Yes or No box indicating if dependent health insurance benefits are available to this employee. If Yes, enter the date the employee qualifies for coverage. Mail the completed form, within 20 days of hiring, to: NYS Tax Department, New Hire Notification, PO Box 15119, Albany NY 12212-5119. To report newly-hired or rehired employees online instead of submitting this form, go to https://www.nynewhire.com.

(continued)

## Worksheet

See the instructions before completing this worksheet.

part to compute your withholding allowances for New York State and Yonkers (line 1).

dependents that you will claim on your state return (do not include yourself or, if married, your spouse)  1 for each credit you expect to claim on your state return.  sehold credit  dit  tetr 3 for each credit you expect to claim on your state return.  t care credit  it  redit	7
sehold credit	8
sehold credit edit nter 3 for each credit you expect to claim on your state return. t care credit	8
edit	9
nter 3 for each credit you expect to claim on your state return. t care credit	
it	40
	10
redit	11
I tax credit: If you expect to be a resident of New York City for any part of the tax year, enter 2	13
tructions)	
	15
	16 ———
	17
	18
18. Enter the result here and on line 1. If you have more than one job, or if you and your spouse both	
ons for Taxpayers with more than one job or Married couples with both spouses working	19
s part only if you expect to itemize deductions on your state return.	
al filing status, enter the applicable amount from the table below	21
Standard deduction table —	_
ned as a dependent) \$ 8,000 Qualifying widow(er)	
d as a dependent) \$ 3,100 Married filing jointly	
line 20 (if line 21 is larger than line 20, enter 0 here and on line 18 above)	22
ver Compensation Expense Program (line 17).	
0 1 7	
Drop any fraction and enter the result here and on line 17 above	28
s part to compute your withholding allowances for New York City (line 2).	
Enter the result here and on line 2	31
String St	status and only one job (enter 2 if the situation applies)

Part 5 – These charts are only for married couples with both spouses working or married couples with one spouse working more than one job, and whose combined wages are between \$107,650 and \$2,263,265.

Enter the additional withholding dollar amount on line 3.

The additional dollar amount, as shown below, is accurate for a weekly payroll. If you are not paid on a weekly basis, you will need to adjust these dollar amount(s). For example, if you are paid biweekly, you must double the dollar amount(s) computed.

				Cor	mbined v	vages be	tween \$1	107,650 a	nd \$538	749		
Higher earn	er's wages	\$107,650 \$129,249	\$129,250 \$150,749	\$150,750 \$172,299	\$172,300 \$193,849	\$193,850 \$236,949	\$236,950 \$280,099	\$280,100 \$323,199	\$323,200 \$377,099	\$377,100 \$430,949	\$430,950 \$484,899	\$484,900 \$538,749
\$53,800	\$75,299	\$12	\$17									
\$75,300	\$96,799	\$11	\$18	\$26	\$30							
\$96,800	\$118,399	\$7	\$15	\$23	\$32	\$41						
\$118,400	\$129,249	\$2	\$10	\$17	\$26	\$38	\$36					
\$129,250	\$139,999		\$4	\$14	\$23	\$35	\$33					
\$140,000	\$150,749		\$2	\$10	\$19	\$32	\$33	\$29				
\$150,750	\$161,549			\$4	\$15	\$28	\$33	\$26				
\$161,550	\$172,499			\$2	\$11	\$24	\$30	\$26	\$25			
\$172,500	\$193,849				\$4	\$17	\$24	\$24	\$38	\$52		
\$193,850	\$236,949					\$5	\$12	\$19	\$37	\$50	\$51	
\$236,950	\$280,099						\$5	\$12	\$42	\$59	\$53	\$56
\$280,100	\$323,199							\$5	\$36	\$66	\$64	\$57
\$323,200	\$377,099								\$18	\$37	\$49	\$46
\$377,100	\$430,949									\$8	\$20	\$31
\$430,950	\$484,899										\$8	\$20
\$484,900	\$538,749											\$8

					Combine	d wages	between	n \$538,7	50 and \$1	1,185,399	)		
Higher earn	ner's wages	\$538,750 \$592,649	\$592,650 \$646,499	\$646,500 \$700,399	\$700,400 \$754,299	\$754,300 \$808,199	\$808,200 \$862,049	\$862,050 \$915,949	\$915,950 \$969,899			\$1,077,550 \$1,131,499	
\$236,950	\$280,099	\$59											
\$280,100	\$323,199	\$62	\$55										
\$323,200	\$377,099	\$39	\$46	\$52	\$34								
\$377,100	\$430,949	\$28	\$22	\$28	\$35	\$5	\$5						
\$430,950	\$484,899	\$31	\$28	\$22	\$28	\$34	\$5	\$5	\$5				
\$484,900	\$538,749	\$20	\$31	\$28	\$22	\$28	\$35	\$5	\$5	\$5	\$5		
\$538,750	\$592,649	\$8	\$20	\$31	\$28	\$22	\$28	\$35	\$5	\$5	\$5	\$3	\$2
\$592,650	\$646,499		\$8	\$20	\$31	\$28	\$22	\$28	\$35	\$5	\$5	\$3	\$2
\$646,500	\$700,399			\$8	\$20	\$31	\$28	\$22	\$28	\$34	\$5	\$3	\$2
\$700,400	\$754,299				\$8	\$20	\$31	\$28	\$22	\$28	\$35	\$3	\$2
\$754,300	\$808,199					\$8	\$20	\$31	\$28	\$22	\$28	\$36	\$2
\$808,200	\$862,049						\$8	\$20	\$31	\$28	\$22	\$30	\$39
\$862,050	\$915,949							\$8	\$20	\$31	\$28	\$24	\$33
\$915,950	\$969,899								\$8	\$20	\$31	\$30	\$27
\$969,900	\$1,023,749									\$8	\$20	\$33	\$33
\$1,023,750	\$1,077,549										\$8	\$21	\$36
\$1,077,550	\$1,131,499											\$9	\$23
\$1,131,500	\$1,185,399												\$9

			С	ombine	dwages	between	\$1,185,4	100 and \$	1,724,29	9	
Higher earn	er's wages		\$1,239,250	\$1,293,200	\$1,347,050	\$1,400,950	\$1,454,850	\$1,508,700 \$1,562,549	\$1,562,550	\$1,616,450	
\$592,650	\$646,499	\$5	\$8								
\$646,500	\$700,399	\$5	\$8	\$11	\$14						
\$700,400	\$754,299	\$5	\$8	\$11	\$14	\$17	\$20				
\$754,300	\$808,199	\$5	\$8	\$11	\$14	\$17	\$20	\$24	\$27		
\$808,200	\$862,049	\$5	\$8	\$11	\$14	\$17	\$20	\$24	\$27	\$30	\$33
\$862,050	\$915,949	\$42	\$8	\$11	\$14	\$17	\$20	\$24	\$27	\$30	\$33
\$915,950	\$969,899	\$36	\$45	\$11	\$14	\$17	\$20	\$24	\$27	\$30	\$33
\$969,900	\$1,023,749	\$30	\$39	\$48	\$14	\$17	\$20	\$24	\$27	\$30	\$33
\$1,023,750	\$1,077,549	\$36	\$33	\$42	\$52	\$17	\$20	\$24	\$27	\$30	\$33
\$1,077,550	\$1,131,499	\$38	\$38	\$34	\$44	\$53	\$19	\$22	\$25	\$28	\$31
\$1,131,500	\$1,185,399	\$23	\$38	\$38	\$35	\$44	\$53	\$19	\$22	\$25	\$28
\$1,185,400	\$1,239,249	\$9	\$23	\$38	\$38	\$35	\$44	\$53	\$19	\$22	\$25
\$1,239,250	\$1,293,199		\$9	\$23	\$38	\$38	\$35	\$44	\$53	\$19	\$22
\$1,293,200	\$1,347,049			\$9	\$23	\$37	\$38	\$34	\$44	\$53	\$19
\$1,347,050	\$1,400,949				\$9	\$23	\$38	\$38	\$35	\$44	\$53
\$1,400,950	\$1,454,849					\$9	\$23	\$38	\$38	\$35	\$44
\$1,454,850	\$1,508,699						\$9	\$23	\$38	\$38	\$34
\$1,508,700	\$1,562,549							\$9	\$23	\$38	\$38
\$1,562,550	\$1,616,449								\$9	\$23	\$38
\$1,616,450	\$1,670,399									\$9	\$23
\$1,670,400	\$1,724,299										\$9

			С	ombine	wages	between	\$1,724,3	00 and \$	2,263,26	5	
Waharaaa			\$1,778,150								
Higher earn	ers wages	\$1,778,149	\$1,832,049	\$1,885,949	\$1,939,799	\$1,993,699	\$2,047,599	\$2,101,499	\$2,155,349	\$2,209,299	\$2,263,265
\$862,050	\$915,949	\$36	\$39								
\$915,950	\$969,899	\$36	\$39	\$42	\$45						
\$969,900	\$1,023,749	\$36	\$39	\$42	\$45	\$48	\$52				
\$1,023,750	\$1,077,549	\$36	\$39	\$42	\$45	\$48	\$52	\$55	\$58		
\$1,077,550	\$1,131,499	\$34	\$38	\$41	\$44	\$47	\$50	\$53	\$56	\$1,234	\$1,263
\$1,131,500	\$1,185,399	\$31	\$34	\$38	\$41	\$44	\$47	\$50	\$53	\$1,231	\$1,263
\$1,185,400	\$1,239,249	\$28	\$31	\$34	\$38	\$41	\$44	\$47	\$50	\$1,228	\$1,260
\$1,239,250	\$1,293,199	\$25	\$28	\$31	\$34	\$38	\$41	\$44	\$47	\$1,224	\$1,257
\$1,293,200	\$1,347,049	\$22	\$25	\$28	\$31	\$34	\$38	\$41	\$44	\$1,221	\$1,253
\$1,347,050	\$1,400,949	\$19	\$22	\$25	\$28	\$31	\$34	\$38	\$41	\$1,218	\$1,250
\$1,400,950	\$1,454,849	\$53	\$19	\$22	\$25	\$28	\$31	\$34	\$38	\$1,215	\$1,247
\$1,454,850	\$1,508,699	\$44	\$53	\$19	\$22	\$25	\$28	\$31	\$34	\$1,212	\$1,244
\$1,508,700	\$1,562,549	\$34	\$44	\$53	\$19	\$22	\$25	\$28	\$31	\$1,209	\$1,241
\$1,562,550	\$1,616,449	\$38	\$34	\$44	\$53	\$19	\$22	\$25	\$28	\$1,206	\$1,238
\$1,616,450	\$1,670,399	\$37	\$38	\$34	\$44	\$53	\$19	\$22	\$25	\$1,203	\$1,235
\$1,670,400	\$1,724,299	\$23	\$38	\$38	\$35	\$44	\$53	\$19	\$22	\$1,200	\$1,232
\$1,724,300	\$1,778,149	\$9	\$23	\$38	\$38	\$35	\$44	\$53	\$19	\$1,197	\$1,229
\$1,778,150	\$1,832,049		\$9	\$23	\$38	\$38	\$35	\$44	\$53	\$1,193	\$1,225
\$1,832,050	\$1,885,949			\$9	\$23	\$38	\$38	\$35	\$44	\$1,228	\$1,222
\$1,885,950	\$1,939,799				\$9	\$23	\$38	\$38	\$34	\$1,218	\$1,257
\$1,939,800	\$1,993,699					\$9	\$23	\$38	\$38	\$1,209	\$1,247
\$1,993,700	\$2,047,599						\$9	\$23	\$38	\$1,212	\$1,238
\$2,047,600	\$2,101,499							\$9	\$23	\$1,212	\$1,241
\$2,101,500	\$2,155,349								\$9	\$1,197	\$1,241
\$2,155,350	\$2,209,299									\$16	\$52
\$2,209,300	\$2,263,265										\$16

Note: These charts do not account for additional withholding in the following instances:

- a married couple with both spouses working, where one spouse's wages are more than \$1,131,632 but less than \$2,263,265, and the other spouse's wages are also more than \$1,131,632 but less than \$2,263,265;
- married taxpayers with only one spouse working, and that spouse works more than one job, with wages from each job under \$2,263,265, but combined wages from all jobs is over \$2,263,265.

If you are in one of these situations and you would like to request an additional dollar amount of withholding from your wages, contact the Tax Department for assistance (see Need help? on page 7).

Part 6 - These charts are only for single taxpayers and head of household taxpayers with more than one job, and whose combined wages are between \$107,650 and \$2,263,265.

Enter the additional withholding dollar amount on line 3.

The additional dollar amount, as shown below, is accurate for a weekly payroll. If you are not paid on a weekly basis, you will need to adjust these dollar amount(s). For example, if you are paid biweekly, you must double the dollar amount(s) computed.

		Combined wages between \$107,650 and \$538,70									/49		
Higher	wage	\$107,650 \$129,249	\$129,250 \$150,749	\$150,750 \$172,299	\$172,300 \$193,849	\$193,850 \$236,949	\$236,950 \$280,099	\$280,100 \$323,199	\$323,200 \$377,099	\$377,100 \$430,949	\$430,950 \$484,899	\$484,900 \$538,749	
\$53,800	\$75,299	\$12	\$19										
\$75,300	\$96,799	\$12	\$20	\$28	\$29								
\$96,800	\$118,399	\$8	\$16	\$24	\$27	\$29							
\$118,400	\$129,249	\$2	\$10	\$18	\$21	\$26	\$40						
\$129,250	\$139,999		\$4	\$14	\$17	\$23	\$46						
\$140,000	\$150,749		\$2	\$9	\$13	\$19	\$46	\$47					
\$150,750	\$161,549			\$3	\$9	\$15	\$46	\$46					
\$161,550	\$172,499			\$1	\$7	\$12	\$46	\$48	\$46				
\$172,500	\$193,849				\$3	\$10	\$44	\$51	\$49	\$52			
\$193,850	\$236,949					\$12	\$38	\$53	\$53	\$55	\$45		
\$236,950	\$280,099						\$10	\$20	\$33	\$31	\$35	\$18	
\$280,100	\$323,199							\$7	\$18	\$31	\$26	\$32	
\$323,200	\$377,099								\$8	\$20	\$31	\$27	
\$377,100	\$430,949									\$8	\$20	\$31	
\$430,950	\$484,899										\$8	\$20	
\$484,900	\$538,749											\$8	

		Combined wages between \$538,750 and \$1,185,399											
Higher	wage	\$538,750 \$592,649	\$592,650 \$646,499	\$646,500 \$700,399	\$700,400 \$754,299	\$754,300 \$808,199	\$808,200 \$862,049	\$862,050 \$915,949	\$915,950 \$969,899		\$1,023,750 \$1,077,549		\$1,131,500 \$1,185,399
\$236,950	\$280,099	\$11											
\$280,100	\$323,199	\$9	\$8										
\$323,200	\$377,099	\$33	\$8	\$8	\$8								
\$377,100	\$430,949	\$27	\$33	\$8	\$8	\$8	\$8						
\$430,950	\$484,899	\$31	\$27	\$33	\$8	\$8	\$8	\$8	\$8				
\$484,900	\$538,749	\$20	\$31	\$27	\$33	\$8	\$8	\$8	\$8	\$8	\$8		
\$538,750	\$592,649	\$8	\$20	\$31	\$27	\$33	\$8	\$8	\$8	\$8	\$8	\$604	\$636
\$592,650	\$646,499		\$8	\$20	\$31	\$27	\$33	\$8	\$8	\$8	\$8	\$604	\$636
\$646,500	\$700,399			\$8	\$20	\$31	\$27	\$33	\$8	\$8	\$8	\$604	\$636
\$700,400	\$754,299				\$8	\$20	\$31	\$27	\$33	\$8	\$8	\$604	\$636
\$754,300	\$808,199					\$8	\$20	\$31	\$27	\$33	\$8	\$604	\$636
\$808,200	\$862,049						\$8	\$20	\$31	\$27	\$33	\$604	\$636
\$862,050	\$915,949							\$8	\$20	\$31	\$27	\$629	\$636
\$915,950	\$969,899								\$8	\$20	\$31	\$623	\$661
\$969,900	\$1,023,749									\$8	\$20	\$627	\$655
\$1,023,750	\$1,077,549										\$8	\$616	\$659
\$1,077,550	\$1,131,499											\$16	\$52
\$1,131,500	\$1,185,399												\$16

(Part 6 continued on page 8)

## Privacy notification

See our website or Publication 54, Privacy Notification.

# Need help?



Visit our website at www.tax.ny.gov

- get information and manage your taxes online
- · check for new online services and features

### Telephone assistance

Automated income tax refund status: 518-457-5149

Personal Income Tax Information Center: 518-457-5181

To order forms and publications: 518-457-5431

Text Telephone (TTY) or TDD Dial 7-1-1 for the equipment users New York Relay Service

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		Combined wages between \$1,185,400 and \$1,724,299										
Higher	wage							\$1,508,700 \$1,562,549				
\$592,650	\$646,499	\$668	\$700									
\$646,500	\$700,399	\$668	\$700	\$733	\$765							
\$700,400	\$754,299	\$668	\$700	\$733	\$765	\$797	\$829					
\$754,300	\$808,199	\$668	\$700	\$733	\$765	\$797	\$829	\$861	\$893			
\$808,200	\$862,049	\$668	\$700	\$733	\$765	\$797	\$829	\$861	\$893	\$925	\$957	
\$862,050	\$915,949	\$668	\$700	\$732	\$765	\$797	\$829	\$861	\$893	\$925	\$957	
\$915,950	\$969,899	\$668	\$700	\$732	\$765	\$797	\$829	\$861	\$893	\$925	\$957	
\$969,900	\$1,023,749	\$693	\$700	\$733	\$765	\$797	\$829	\$861	\$893	\$925	\$957	
\$1,023,750	\$1,077,549	\$687	\$725	\$733	\$765	\$797	\$829	\$861	\$893	\$925	\$957	
\$1,077,550	\$1,131,499	\$95	\$123	\$161	\$169	\$201	\$233	\$265	\$297	\$329	\$361	
\$1,131,500	\$1,185,399	\$52	\$95	\$123	\$161	\$169	\$201	\$233	\$265	\$297	\$329	
\$1,185,400	\$1,239,249	\$16	\$52	\$95	\$123	\$161	\$169	\$201	\$233	\$265	\$297	
\$1,239,250	\$1,293,199		\$16	\$52	\$95	\$123	\$161	\$169	\$201	\$233	\$265	
\$1,293,200	\$1,347,049			\$16	\$52	\$95	\$123	\$161	\$169	\$201	\$233	
\$1,347,050	\$1,400,949				\$16	\$52	\$95	\$123	\$161	\$169	\$201	
\$1,400,950	\$1,454,849					\$16	\$52	\$95	\$123	\$161	\$169	
\$1,454,850	\$1,508,699						\$16	\$52	\$95	\$123	\$161	
\$1,508,700	\$1,562,549							\$16	\$52	\$95	\$123	
\$1,562,550	\$1,616,449								\$16	\$52	\$95	
\$1,616,450	\$1,670,399									\$16	\$52	
\$1,670,400	\$1,724,299										\$16	

			С	ombine	wages	between	\$1,724,3	00 and \$	2,263,26	5	
Highe	r wage		\$1,778,150	\$1,832,050	\$1,885,950	\$1,939,800	\$1,993,700	\$2,047,600	\$2,101,500	\$2,155,350 \$2,209,299	
\$862,050	\$915,949	\$989	\$1,022								
\$915,950	\$969,899	\$989	\$1,021	\$1,054	\$1,086						
\$969,900	\$1,023,749	\$989	\$1,022	\$1,054	\$1,086	\$1,118	\$1,150				
\$1,023,750	\$1,077,549	\$989	\$1,022	\$1,054	\$1,086	\$1,118	\$1,150	\$1,182	\$1,214		
\$1,077,550	\$1,131,499	\$393	\$426	\$458	\$490	\$522	\$554	\$586	\$618	\$650	\$70
\$1,131,500	\$1,185,399	\$361	\$393	\$426	\$458	\$490	\$522	\$554	\$586	\$618	\$650
\$1,185,400	\$1,239,249	\$329	\$361	\$393	\$426	\$458	\$490	\$522	\$554	\$586	\$618
\$1,239,250	\$1,293,199	\$297	\$329	\$361	\$393	\$426	\$458	\$490	\$522	\$554	\$586
\$1,293,200	\$1,347,049	\$265	\$297	\$329	\$361	\$393	\$426	\$458	\$490	\$522	\$554
\$1,347,050	\$1,400,949	\$233	\$265	\$297	\$329	\$361	\$393	\$426	\$458	\$490	\$522
\$1,400,950	\$1,454,849	\$201	\$233	\$265	\$297	\$329	\$361	\$393	\$426	\$458	\$490
\$1,454,850	\$1,508,699	\$169	\$201	\$233	\$265	\$297	\$329	\$361	\$393	\$425	\$458
\$1,508,700	\$1,562,549	\$161	\$169	\$201	\$233	\$265	\$297	\$329	\$361	\$393	\$425
\$1,562,550	\$1,616,449	\$123	\$161	\$169	\$201	\$233	\$265	\$297	\$329	\$361	\$393
\$1,616,450	\$1,670,399	\$95	\$123	\$161	\$169	\$201	\$233	\$265	\$297	\$329	\$361
\$1,670,400	\$1,724,299	\$52	\$95	\$123	\$161	\$169	\$201	\$233	\$265	\$297	\$329
\$1,724,300	\$1,778,149	\$16	\$52	\$95	\$123	\$161	\$169	\$201	\$233	\$265	\$297
\$1,778,150	\$1,832,049		\$16	\$52	\$95	\$123	\$161	\$169	\$201	\$233	\$265
\$1,832,050	\$1,885,949			\$16	\$52	\$95	\$123	\$161	\$169	\$201	\$233
\$1,885,950	\$1,939,799				\$16	\$52	\$95	\$123	\$161	\$169	\$201
\$1,939,800	\$1,993,699					\$16	\$52	\$95	\$123	\$161	\$169
\$1,993,700	\$2,047,599						\$16	\$52	\$95	\$123	\$161
\$2,047,600	\$2,101,499							\$16	\$52	\$95	\$123
\$2,101,500	\$2,155,349								\$16	\$52	\$95
\$2,155,350	\$2,209,299									\$16	\$52
\$2,209,300	\$2,263,265										\$16



# Employment Eligibility Verification Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9 OMB No. 1615-0047 Expires 10/31/2022

► START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information			ust complete and	d sign Se	ection 1 o	f Form I-9 no later			
than the first day of employment, but no Last Name (Family Name)	First Name (Given Na	-	Middle Initial	Towns I	ant Name	Llead (Famul			
Last Name (Family Name)	First Name (Given Nai	me)	Milodie Initial	Other L	ast Names	s Used (if any)			
Address (Street Number and Name)	Apt. Number	City or Town			State	ZIP Code			
Date of Birth (mm/dd/yyyy) U.S. Social Se	curity Number Emp	loyee's E-mail Ad	dress	E	mployee's	Telephone Number			
I am aware that federal law provides fo connection with the completion of this	form.			or use of	f false do	cuments in			
I attest, under penalty of perjury, that I	am (cneck one of th	e following box	kes):						
1. A citizen of the United States  2. A noncitizen national of the United State	s (See instructions)								
3. A lawful permanent resident (Alien Re		S Number):							
4. An alien authorized to work until (expir	ration date, if applicable,	mm/dd/yyyy):							
Some aliens may write "N/A" in the expiration date field. (See instructions)									
Aliens authorized to work must provide only one of the following document numbers to complete Form I-9:  An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.									
Alien Registration Number/USCIS Number	<u> </u>		_						
OR									
2. Form I-94 Admission Number:									
OR 3. Foreign Passport Number:									
Country of Issuance:									
Signature of Employee			Today's Date	e (mm/dd	(yyyy)				
(Fields below must be completed and sign I attest, under penalty of perjury, that I	A preparer(s) and/or tr ned when preparers a have assisted in the	anslator(s) assiste nd/or translators	assist an emplo	yee in c	ompleting	Section 1.)			
knowledge the information is true and o	correct.								
Signature of Preparer or Translator				Today's [	Date (mm/o	id/yyyy)			
Last Name (Family Name)		First Nan	ne (Given Name)						
Address (Street Number and Name)		City or Town			State	ZIP Code			

Employer Completes Next Page





# **Employment Eligibility Verification** Department of Homeland Security U.S. Citizenship and Immigration Services

USCIS

Form I-9 OMB No. 1615-0047 Expires 10/31/2022

Section 2. Employer or A (Employers or their authorized repre- must physically examine one docum- of Acceptable Documents.")	sentative must	complete and	d sign Section	n 2 within 3	business day	rs of the en	nployee's fi iment from	irst day of employment. You List C as listed on the "Lists
	.ast Name (Fa	mily Name)		First Name	(Given Nam	ne) I	M.I. Citiz	enship/Immigration Status
List A Identity and Employment Autho	OI orization	R	List Iden		Al	ND	Em	List C ployment Authorization
Document Title		Document 1	Title			Docume	nt Title	
Issuing Authority		Issuing Aut	hority			Issuing A	Authority	
Document Number		Document I	Number			Docume	nt Number	
Expiration Date (if any) (mm/dd/yyyy	9	Expiration [	Date (if any) (	mm/dd/yyyy	)	Expiratio	n Date (if	any) (mm/dd/yyyy)
Document Title								
Issuing Authority		Additions	al Informatio	n				R Code - Sections 2 & 3 o Not Write in This Space
Document Number								
Expiration Date (if any) (mm/dd/yyyy	)							
Document Title								
Issuing Authority								
Document Number								
Expiration Date (if any) (mm/dd/yyyy	)							
Certification: I attest, under pen (2) the above-listed document(s) employee is authorized to work The employee's first day of en	appear to b in the United	e genuine a States.	nd to relate		oloyee name	ed, and (3	) to the b	
Signature of Employer or Authorized	Representativ	/e	Today's Da	te (mm/dd/y				rized Representative
Last Name of Employer or Authorized Re	epresentative	First Name of	f Employer or i	Authorized Re	epresentative	Employe	er's Busine	ss or Organization Name
Employer's Business or Organization	n Address (Str	eet Number a	and Name)	City or Tov	vn		State	ZIP Code
Section 3. Reverification a	nd Rehires	(To be con	npleted and	signed by	employer o	r authoriz	ed repres	entative.)
A. New Name (if applicable)								applicable)
Last Name (Family Name)	First N	lame (Given	Name)	Mid	dle Initial	Date (mm	/dd/yyyy)	
<ul> <li>C. If the employee's previous grant o continuing employment authorization</li> </ul>				provide the	information f	for the docu	ument or re	eceipt that establishes
Document Title			Docume	nt Number			Expiration	Date (if any) (mm/dd/yyyy)
l attest, under penalty of perjury the employee presented docume								
Signature of Employer or Authorized	Representation	ve Today's	s Date (mm/o	id/yyyy)	Name of Em	nployer or A	Authorized	Representative

# LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A  Documents that Establish  Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	ID	LIST C Documents that Establish Employment Authorization
2.	U.S. Passport or U.S. Passport Card  Permanent Resident Card or Alien Registration Receipt Card (Form I-551)  Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa		Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address      ID card issued by federal, state or local government agencies or entities.	1.	A Social Security Account Number card, unless the card includes one of the following restrictions:  (1) NOT VALID FOR EMPLOYMENT  (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION  (3) VALID FOR WORK ONLY WITH
4.	Employment Authorization Document that contains a photograph (Form I-786)		provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	2.	DHS AUTHORIZATION  Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status:  a. Foreign passport; and		School ID card with a photograph     Voter's registration card     U.S. Military card or draft record     Military dependent's ID card	3.	Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	Form I-94 or Form I-94A that has the following:     (1) The same name as the passport; and		7. U.S. Coast Guard Merchant Mariner Card	4. 5.	Native American tribal document U.S. Citizen ID Card (Form I-197)
	(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has	Native American tribal document     Driver's license issued by a Canadian government authority		6.	Identification Card for Use of Resident Citizen in the United States (Form I-179)
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		For persons under age 18 who are unable to present a document listed above:	7.	Employment authorization document issued by the Department of Homeland Security
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		10. School record or report card  11. Clinic, doctor, or hospital record  12. Day-care or nursery school record		

Examples of many of these documents appear in the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

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