

Department of Taxation and Finance Certificate of Income Tax Withheld

IT-2102.6

(with instructions)

If every effort to get a federal Form W-2, *Wage and Tax Statement,* from your employer has failed, file this certificate with this year's tax return, for this employer. If you were unable to get a federal Form W-2 from more than one employer, file a separate certificate for each employer. **Complete this form, sign, and submit it with your return**.

Explain why you were unable to obtain a federal Form W-2 from your employer:

Enter your employer's present name and address if different from

Enter any other information, such as the employer identification number (EIN), that will help the Tax Department locate your employer, or if you prefer, submit a copy of your payroll stub:

Privacy notification

The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of Social Security numbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

See our website or Publication 54, Privacy Notification, for more information.

There may be additional information about UI Law and the Department of Labor.

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that entered on the certificate:

Certificate of Income Tax Withheld

New York State • New York City • Yonkers

Employee's first name and initial	Last name		Your Social Security number
Mailing address (number and street or PO Box)		Apt no.	
City, village, or post office	State	ZIP code	Use this form only
Employer's name			when you are unable to obtain federal Form W-2
Address (number and street or rural route)			from your employer.
City, village, or post office	State	ZIP code	

		Whole dollars only
1 Total wages before any deductions	1	.00
2 New York State income tax withheld	2	.00
3 New York City income tax withheld	3	.00
4 Yonkers income tax withheld	4	.00
	3 4	

I certify that the total amount of wages paid and New York State, New York City, and Yonkers tax withheld by the employer shown on this form are, to the best of my knowledge, correct. I further state that it was not possible to obtain federal Form W-2 from the employer for the reason noted above.

Employee signature	Date

