

New York State Department of Taxation and Finance

Certificate of Income Tax Withheld (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 your 2008
tax return instead of New York State Form IT-2, Summary of W-2
Statements, 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 attach it to your
return.

return.	oro timo rorim, orgin, and attaon it to you.		
Explain why you were unal employer:	ole to obtain a federal Form W-2 from your	Privacy notificatio collect and maintair Tax Law, including the 429, 475, 505, 697, disclosure of social	
		This information will and, when authorize information program	
Enter your employer's pres that entered on the certific	ent name and address if different from ate:	Information concern to certain state ager enforcement, evalua training programs an Failure to provide the criminal penalties, of	
		This information is r and Data Entry, NY Albany NY 12227; t United States and c	
	Do no	ot detach.	
2008	Certificate of Inc	ome Tax Wi	
	Now fork state 11	211 1011 Only 10111010	

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

ation — The Commissioner of Taxation and Finance may intain personal information pursuant to the New York State ling but not limited to, sections 5-a, 171, 171-a, 287, 308, 697, 1096, 1142, and 1415 of that Law; and may require ocial security numbers pursuant to 42 USC 405(c)(2)(C)(i).

n will be used to determine and administer tax liabilities orized by law, for certain tax offset and exchange of tax grams as well as for any other lawful purpose.

cerning quarterly wages paid to employees is provided agencies for purposes of fraud prevention, support valuation of the effectiveness of certain employment and ns and other purposes authorized by law.

de the required information may subject you to civil or ies, or both, under the Tax Law.

n is maintained by the Director of Records Management , NYS Tax Department, W A Harriman Campus, 227; telephone 1 800 225-5829. From areas outside the ınd outside Canada, call (518) 485-6800.



Withheld

IT-2102.6

▼ Your social security number Employee's first name and initial Last name Mailing address (number and street or rural route) Apt no. ZIP code City, village, or post office State type Use this form only Print or 1 when you are unable to Employer's name obtain federal Form W-2 from your employer. Address (number and street or rural route) City, village, or post office State ZIP code

			Dollars	C	Cents
1	Total wages before any deductions	1.			
2	New York State income tax withheld	2.			
3	New York City income tax withheld	3.			
4	Yonkers income tax withheld	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

