

## **Update Tax Withholdings**

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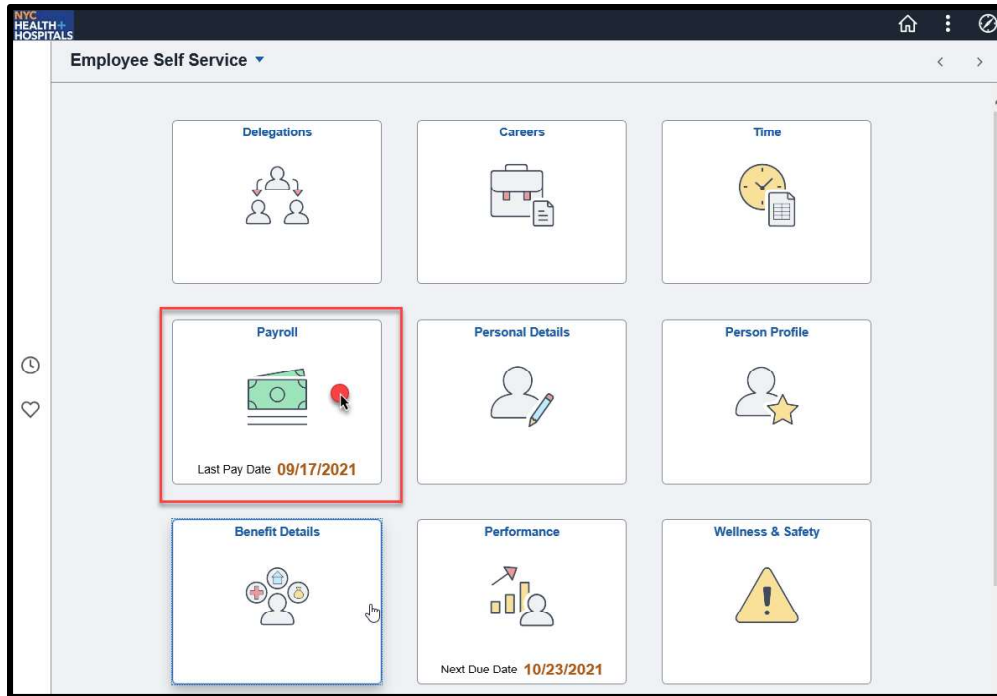
**PAGES 8-13:**    **[Update Tax Withholdings \(IT-2104\)- State & Local](#)**

***\*Please note that this functionality works best on the Internet Explorer browser***

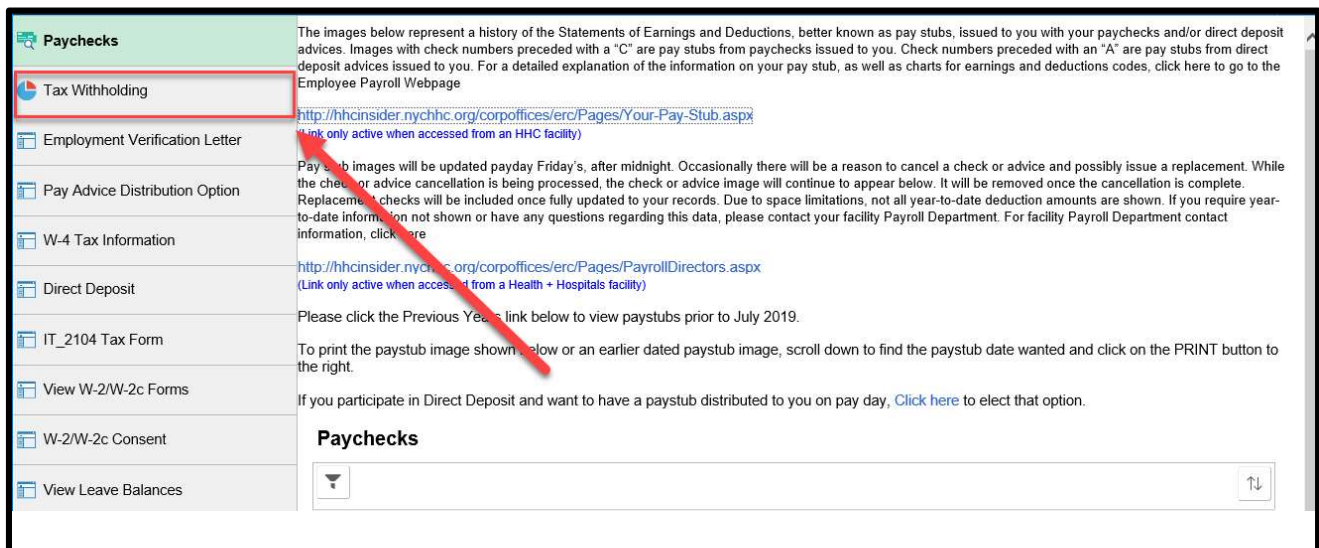
***\*Upon submission of your tax forms, your User ID must be entered in all CAPITAL LETTERS***

## Update Tax Withholdings (W-4) - Federal

1. After successfully logging into PeopleSoft HR, click on the **Payroll** tile.



2. Select the **Tax Withholding** option.



### 3. The **Tax Withholding** page displays. Select Form Type **Federal**.

**Tax Withholding**

Company NYC Health & Hospitals  
Status Active

Form Type	Jurisdiction	Withholding Details	
Federal	Federal	Tax Status H-of-H Other Income 0.00 Extra Withholding 0.00	Dependent Amount 2000.00 Deductions 0.00 Other >
State	New York	Tax Status Single Additional Amount 0.00 Additional Percentage	Withholding Allowances 3 Additional Allowances > Other
Local	SECTION 1127	Tax Status Single Additional Amount Additional Percentage	Withholding Allowances Additional Allowances Other

### 4. Select **Federal Withholding Allowance Certificate**.

**Federal Tax Withholding Forms**

Company NYC Health & Hospitals

You must complete Form W-4 so the Payroll Department can calculate the correct amount of tax to withhold from your pay. Federal income tax is withheld from your wages based on marital status and the number of allowances claimed on this form. You may also specify that an additional dollar amount be withheld. You can file a new Form W-4 anytime your tax situation changes and you choose to have more, or less, tax withheld.

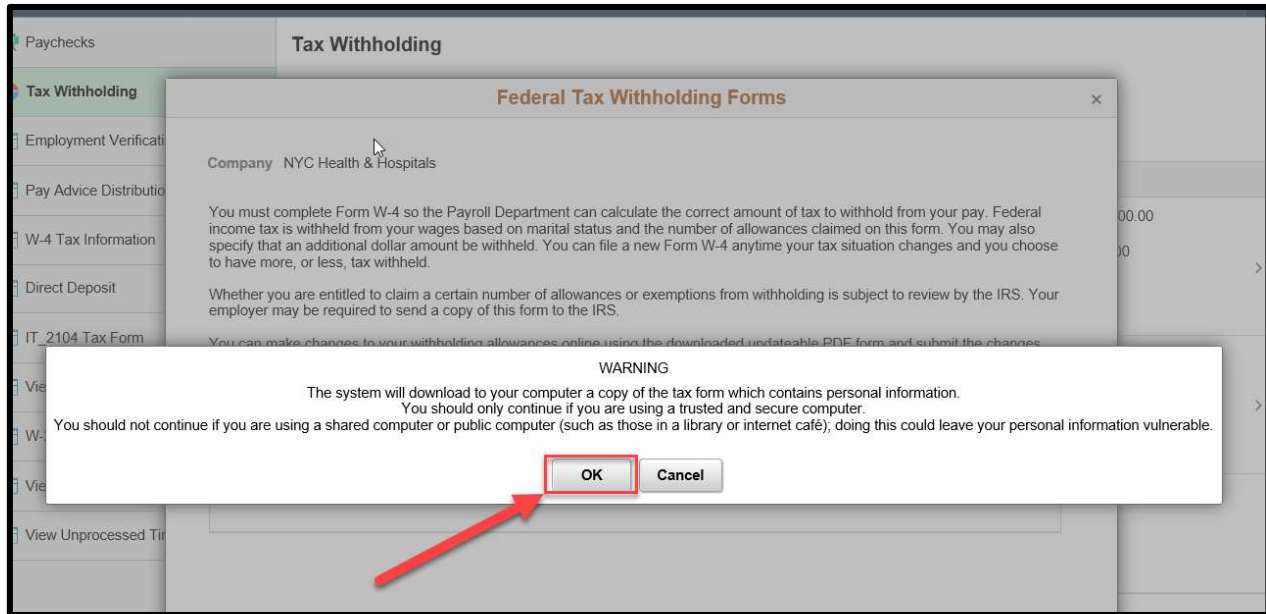
Whether you are entitled to claim a certain number of allowances or exemptions from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.

You can make changes to your withholding allowances online using the downloaded updateable PDF form and submit the changes for processing by your payroll department. Be sure to print or save a copy of the completed form for your records.

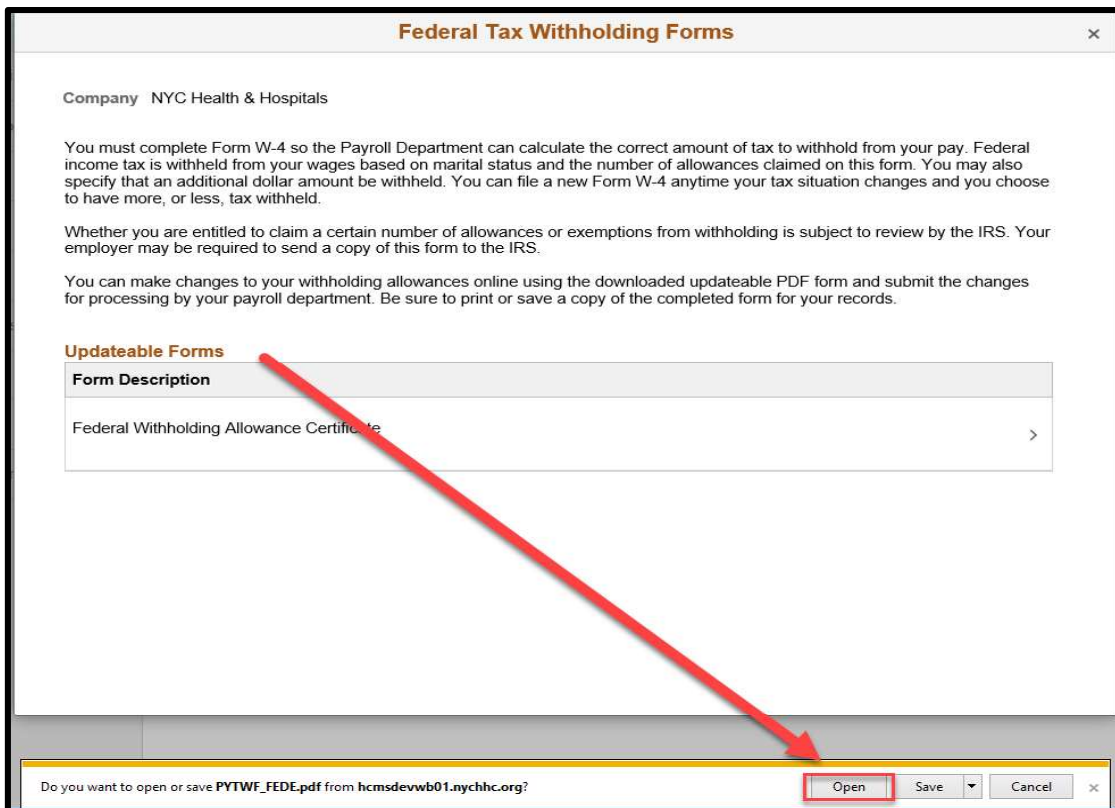
**Updateable Forms**

Form Description
Federal Withholding Allowance Certificate >

5. A **Warning** message will appear. Click **OK** to continue.



6. **Federal Withholding Allowance Certificate** will download. At the bottom of the page, select **Open** to open file.



7. **W-4 Withholding Certificate PDF** will open. Please note that Employee Information, such as name, address, and social security number, will automatically populate based on your current HR information in PeopleSoft. Instructions on how to complete the form are on **Page 2**.

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Home Tools PYTWF\_FEDE.pdf x

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**Form W-4**  
Department of the Treasury  
Internal Revenue Service

**Employee's Withholding Certificate**  
OMB No. 1545-0074  
2020

► 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.  
► Your withholding is subject to review by the IRS.

**Step 1: Enter Personal Information**

(a) First name and middle initial: JANE  
Last name: EMPLOYEE  
(b) Social security number: [REDACTED]  
Address: [REDACTED]  
City or town, state, and ZIP code: [REDACTED]  
(c) ☐ Single or Married filing separately  
☐ Married filing jointly (or Qualifying widow(er))  
☐ Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

► Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to [www.ssa.gov](http://www.ssa.gov).

**Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, when to use the online estimator, and privacy.

**Step 2: Multiple Jobs or Spouse Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.  
Do **only one** of the following:  
(a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3-4); or  
(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or  
(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld. ☐  
**TIP:** To be accurate, submit a 2020 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

**Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

**Step 3: Claim Dependents**

If your income will be \$200,000 or less (\$400,000 or less if married filing jointly):  
Multiply the number of qualifying children under age 17 by \$2,000 ► \$ [REDACTED]  
Multiply the number of other dependents by \$500 ► \$ [REDACTED]  
Add the amounts above and enter the total here 3 \$ [REDACTED]

**Step 4 (optional): Other Adjustments**

(a) **Other income (not from jobs).** If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income. 4(a) \$ [REDACTED]  
(b) **Deductions.** If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here. 4(b) \$ [REDACTED]  
(c) **Extra withholding.** Enter any additional tax you want withheld each pay period. 4(c) \$ [REDACTED]  
Exemption from withholding. By claiming exemption from withholding, you certify that you owed no Federal income tax in 2019, and that you expect to owe no Federal income tax in 2020. If you claim exemption from withholding, no income tax will be withheld from your paycheck. Not Applicable

**Step 5: Sign Here**

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.  
JANE EMPLOYEE  
Employee's signature (This form is not valid unless you sign it.) 10/21/2020  
Date

**Employers Only**

Employer's name and address: NYC Health & Hospitals CORP SERVICES, BLDG #4, 11TH FL BRONX, NY 10465  
First date of employment: [REDACTED]  
Employer identification number (EIN): 132655001

For Privacy Act and Paperwork Reduction Act Notice, see page 3. Cat. No. 10220Q Form W-4 (2020)

**Submit**



8. Complete all necessary information on the form. When you are done, click on the green **Submit** button on the **bottom** of the form.

**Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

**Step 3:** If your income will be \$200,000 or less (\$400,000 or less if married filing jointly):

**Claim Dependents**

Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$

Multiply the number of other dependents by \$500 ▶ \$ 500

Add the amounts above and enter the total here ▶ 3 \$

**Step 4 (optional):**

**(a) Other income (not from jobs).** If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income ▶ 4(a) \$

**(b) Deductions.** If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here ▶ 4(b) \$

**(c) Extra withholding.** Enter any additional tax you want withheld each pay period ▶ 4(c) \$

Exemption from withholding. By claiming exemption from withholding, you certify that you owed no Federal income tax in 2019, and that you expect to owe no Federal income tax in 2020. If you claim exemption from withholding, no income tax will be withheld from your paycheck. ▶ Not Applicable

**Step 5:** Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

**Sign Here** ▶ JANE EMPLOYEE ▶ 10/21/2020

**Employer's Only**

Employer's name and address ▶ NYC Health & Hospitals CORP SERVICES, BLDG #4, 11TH FL BRONX, NY 1046

First date of employment ▶

Employer identification number (EIN) ▶ 655001

For Privacy Act and Paperwork Reduction Act Notice, see page 3. Cat. No. 10220Q Form W-4 (2020)

**Submit**

9. A **Windows Security** prompt will appear. Enter your PeopleSoft User ID and password. This will serve as your signature. **User ID must be entered in all CAPS.**

**Windows Security**

AcroRd32

The server hcmsdevwb01.nychhc.org is asking for your user name and password.

That server also reports: "PeopleSoft Enterprise PeopleTools".

Warning: Your user name and password will be sent using basic authentication on a connection that isn't secure.

EMPLOYEEJ2

.....

**OK** **Cancel**

10. After a few moments, if all information is entered correctly, a **Successful** message will appear, along with a copy of the **completed Employee Withholding Certificate**. You can save the PDF to your computer or print a copy for your records.

*The changes you have made to your Employee Withholding Allowance Certificate have been successfully submitted on 2020-10-21. You can scroll to the next page to view your saved data or print/save a copy of this document for your records.*

*Please be advised when you close this document the original PDF document remains open for your reference. To exit the application process, you will need to close both the original and the updated PDF documents.*

*If you need to make additional changes, you must navigate back to the Tax Withholding Forms page and begin the process again.*

11. Your Federal Withholding information is now updated and will be reflected in the Tax Withholding page in PeopleSoft. **Please allow 1-2 pay periods for changes to display on your paystub.**

Paychecks

**Tax Withholding**

Employment Verification Letter

Pay Advice Distribution Option

W-4 Tax Information

Direct Deposit

IT-2104 Tax Form

**Tax Withholding**

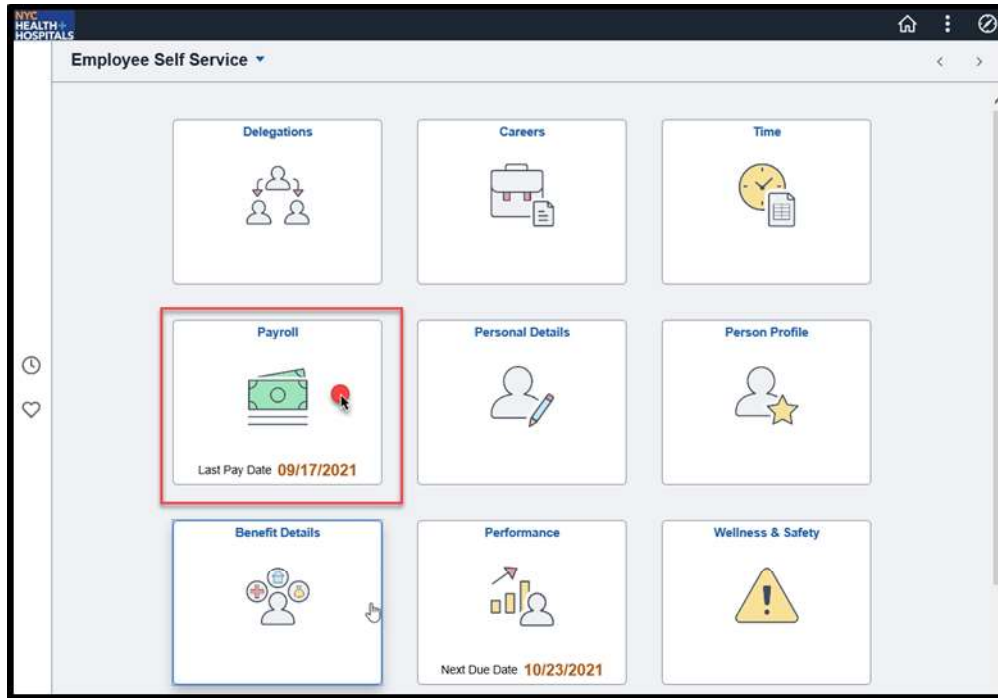
Company NYC Health & Hospitals

Status Active

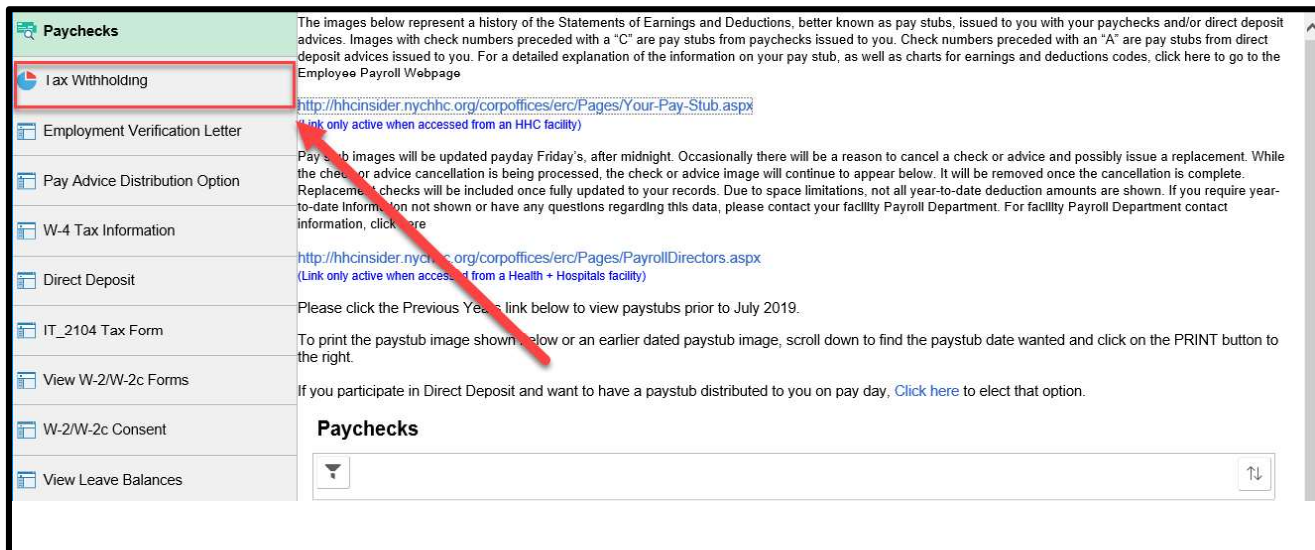
Form Type	Jurisdiction	Withholding Details
Federal	Federal	<p>Tax Status Single</p> <p>Dependent Amount 500.00</p> <p>Other Income 0.00</p> <p>Deductions 0.00</p> <p>Extra Withholding 0.00</p> <p>Other</p>

## Update Tax Withholdings (IT-2104) – State & Local

1. After successfully logging into PeopleSoft, click on the **Payroll** tile.



2. Select the **Tax Withholding** option.





3. The **Tax Withholding** page displays. Select Form Type **State**.

The screenshot shows the 'Tax Withholding' page for NYC Health & Hospitals. The left sidebar contains a list of options: Paychecks, Tax Withholding (selected), Employment Verification Letter, Pay Advice Distribution Option, W-4 Tax Information, Direct Deposit, IT\_2104 Tax Form, View W-2/W-2c Forms, W-2/W-2c Consent, View Leave Balances, and View Unprocessed Timesheets. The main content area displays the 'Tax Withholding' details for the company 'NYC Health & Hospitals' with status 'Active'. A table lists three withholding forms: Federal, State, and Local. The 'State' form is highlighted with a red box, and a red arrow points to it from the sidebar. The 'State' form details are as follows:

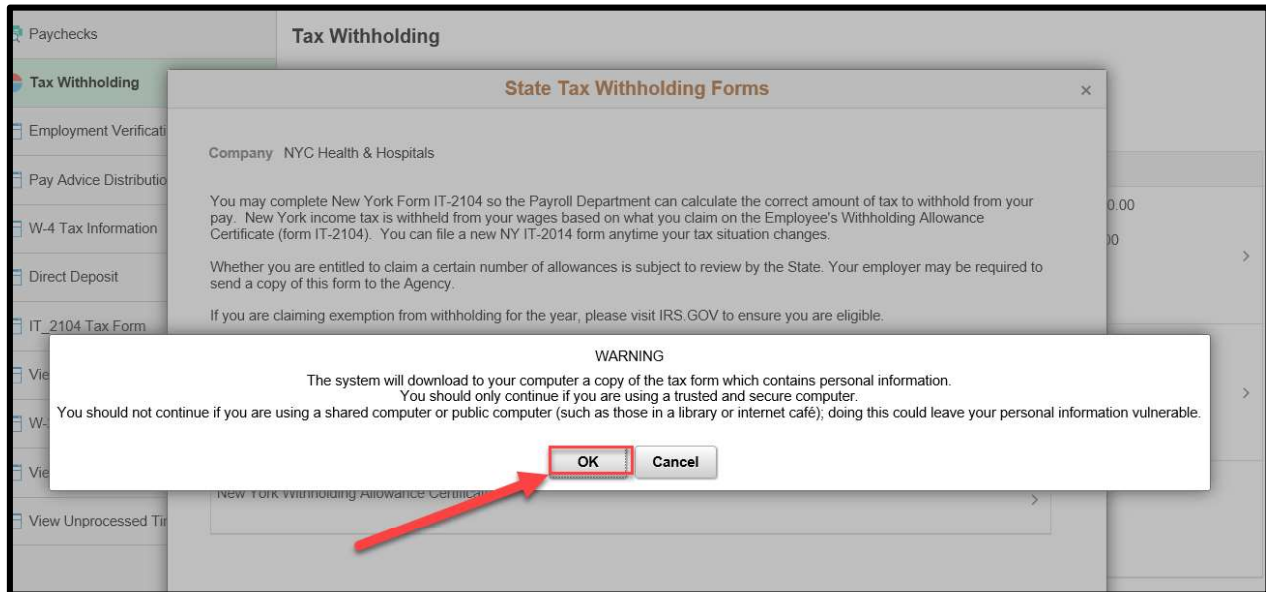
Form Type	Jurisdiction	Tax Status	Withholding Details
Federal	Federal	H-of-H	Dependent Amount 2000.00
		Other Income 0.00	Deductions 0.00
		Extra Withholding 0.00	Other
State	New York	Single	Withholding Allowances 3
		Additional Amount 0.00	Additional Allowances
		Additional Percentage	Other
Local	SECTION 1127	Single	Withholding Allowances
		Additional Amount	Additional Allowances
		Additional Percentage	Other

4. Select **New York Withholding Allowance Certificate**.

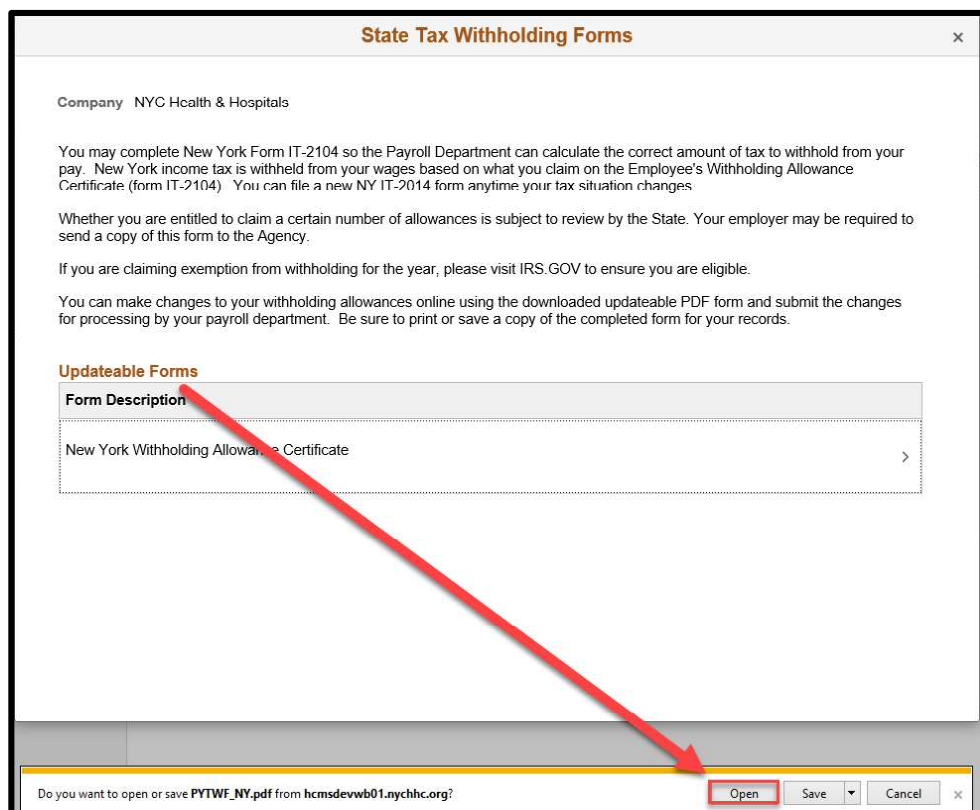
The screenshot shows the 'State Tax Withholding Forms' page for NYC Health & Hospitals. The left sidebar is the same as in the previous screenshot. The main content area displays information about New York Form IT-2104. A red arrow points from the sidebar to the 'New York Withholding Allowance Certificate' link in the 'Updateable Forms' section. The 'Updateable Forms' section is highlighted with a red box. The 'New York Withholding Allowance Certificate' link is as follows:

Form Description
New York Withholding Allowance Certificate

5. A **Warning** message will appear. Click **OK** to continue.



6. **New York Withholding Allowance Certificate** will download. At the bottom of the page, select **Open** to open file.



7. **IT-2104 Withholding Certificate PDF** will open. Please note that Employee Information, such as name, address, and social security number, will automatically populate based on your current HR information in PeopleSoft. Instructions on how to complete the form are on **the bottom of the page**.

Form IT-2104:2020:Employee's Withholding Allowance Certificate:it2104 - Adobe Acrobat Reader DC

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Home Tools Form IT-2104:2020... x

Tools

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**NEW YORK STATE** Department of Taxation and Finance **IT-2104**  
**2020** Employee's Withholding Allowance Certificate  
New York State • New York City • Yonkers

First name and middle initial JANE		Last name EMPLOYEE	Your Social Security number
Permanent home address (business and school or rural route)		Apartment number	Single or head of household <input type="checkbox"/> Married <input type="checkbox"/>
City, village, or post office		State	ZIP code
Are you a resident of New York City? Yes <input type="checkbox"/> No <input type="checkbox"/>		Note: If married but legally separated, mark an X in the Single or Head of household box.	
Are you a resident of Yonkers? Yes <input type="checkbox"/> No <input type="checkbox"/>			

Complete the worksheet on page 4 before making any entries.

1 Total number of allowances you are claiming for New York State and Yonkers, if applicable (from line 20)	1
2 Total number of allowances for New York City (from line 35)	2

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

3 New York State amount	3
4 New York City amount	4
5 Yonkers amount	5

I certify that I am entitled to the number of withholding allowances claimed on this certificate.

Employee's signature JANE EMPLOYEE	Date 10-21-2020
---------------------------------------	--------------------

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. **Submit**

Employer: Keep this certificate with your records.

Mark an X in box A and/or box B to indicate why you are sending a copy of this form to New York State (see instructions):

A Employee claimed more than 14 exemption allowances for NYS ☐ A ☐

B Employee is a new hire or a rehire ... B ☐ First date employee performed services for pay (mm-dd-yyyy) (see instr.):

Are dependent health insurance benefits available for this employee? Yes ☐ No ☐

If Yes, enter the date the employee qualifies (mm-dd-yyyy):

Employer's name and address (Employer: complete this section only if you are sending a copy of this form to the NYS Tax Department.) NYC Health & Hospitals CORP SERVICES, BLDG #4, 11TH FL BRONX, NY 10461	Employer identification number 132656001
--	---

**Instructions**

**Changes effective for 2020**  
Form IT-2104 has been revised for tax year 2020. 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 2020 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 do 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 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 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.



- Complete all necessary information on the form. When you are done, click on the green **Submit** button in the middle of the form.

Complete the worksheet on page 4 before making any entries.

1 Total number of allowances you are claiming for New York State and Yonkers, if applicable (from line 20) .....	1	2
2 Total number of allowances for New York City (from line 35) .....	2	

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

3 New York State amount .....	3	2.00
4 New York City amount .....	4	
5 Yonkers amount .....	5	

I certify that I am entitled to the number of withholding allowances claimed on this certificate.

Employee's signature: JANE EMPLOYEE Date: 10-21-2020

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.

Submit

- A **Windows Security** prompt will appear. Enter your PeopleSoft User ID and password. This will serve as your signature. **User ID must be entered in all CAPS.**

Windows Security

AcroRd32

The server hcmsdevwb01.nychhc.org is asking for your user name and password.

That server also reports: "PeopleSoft Enterprise PeopleTools".

Warning: Your user name and password will be sent using basic authentication on a connection that isn't secure.

EMPLOYEEJ2

.....

OK Cancel



10. After a few moments, if all information is entered correctly, a **Successful** message will appear, along with a copy of the **completed Employee Withholding Allowance Certificate**. You can save the PDF to your computer or print a copy for your records.

*The changes you have made to your Employee Withholding Allowance Certificate have been successfully submitted on 2020-10-21. You can scroll to the next page to view your saved data or print/save a copy of this document for your records.*

*Please be advised when you close this document the original PDF document remains open for your reference. To exit the application process, you will need to close both the original and the updated PDF documents.*

*If you need to make additional changes, you must navigate back to the Tax Withholding Forms page and begin the process again.*

11. Your New York Withholding information is now updated and will be reflected in the Tax Withholding page in PeopleSoft. **Please allow 1-2 pay periods for changes to display on your paystub.**

<ul style="list-style-type: none"> <li>Paychecks</li> <li><b>Tax Withholding</b></li> <li>Employment Verification Letter</li> <li>Pay Advice Distribution Option</li> <li>W-4 Tax Information</li> <li>Direct Deposit</li> <li>IT_2104 Tax Form</li> <li>View W-2/W-2c Forms</li> <li>W-2/W-2c Consent</li> </ul>	<p><b>Tax Withholding</b></p> <p>Company NYC Health &amp; Hospitals</p> <p>Status Active</p> <table border="1"> <thead> <tr> <th>Form Type</th> <th>Jurisdiction</th> <th colspan="2">Withholding Details</th> </tr> </thead> <tbody> <tr> <td>Federal</td> <td>Federal</td> <td>Tax Status: Single</td> <td>Withholding Allowances: 1</td> </tr> <tr> <td></td> <td></td> <td>Additional Amount: 0.00</td> <td>Additional Allowances: &gt;</td> </tr> <tr> <td></td> <td></td> <td>Additional Percentage:</td> <td>Other</td> </tr> <tr> <td>State</td> <td>New York</td> <td>Tax Status: Married</td> <td>Withholding Allowances: 1</td> </tr> <tr> <td></td> <td></td> <td>Additional Amount: 0.00</td> <td>Additional Allowances: &gt;</td> </tr> <tr> <td></td> <td></td> <td>Additional Percentage:</td> <td>Other</td> </tr> </tbody> </table>	Form Type	Jurisdiction	Withholding Details		Federal	Federal	Tax Status: Single	Withholding Allowances: 1			Additional Amount: 0.00	Additional Allowances: >			Additional Percentage:	Other	State	New York	Tax Status: Married	Withholding Allowances: 1			Additional Amount: 0.00	Additional Allowances: >			Additional Percentage:	Other
Form Type	Jurisdiction	Withholding Details																											
Federal	Federal	Tax Status: Single	Withholding Allowances: 1																										
		Additional Amount: 0.00	Additional Allowances: >																										
		Additional Percentage:	Other																										
State	New York	Tax Status: Married	Withholding Allowances: 1																										
		Additional Amount: 0.00	Additional Allowances: >																										
		Additional Percentage:	Other																										