W-2 DUPLICATE / CORRECTION REQUEST FORM

INSTRUCTIONS: FILL OUT THE SECTIONS BELOW

DUPLICATE COPY: Sections 1,2,4 **CORRECTIONS: Sections 1,2,3,4**

Section 1 ( ) Mayoral / CUNY ( ) DoEd ( ) NYCHA **Please Check One:** ( ) Duplicate ( ) Correction

PAYROLL NO: AGENCY NAME: W-2 COORDINATOR NAME: AGENCY TELEPHONE NUMBER:

Section 2 EMPLOYEE INFORMATION PLEASE PRINT ALL INFORMATION

MAILING ADDRESS: ☐ CHECK HERE IF THIS IS AN AGENCY ADDRESS

EMPLOYEE SOCIAL SECURITY NUMBER: STREET APT #:

NAME FIRST: MI: CITY STATE ZIP:

LAST: DAY TEL. #: (MANDATORY FOR DoEd EMPLOYEES)

Section 3 REASON FOR W-2 CORRECTION REQUEST: (check appropriate box)

( ) WRONG NAME (INCLUDE COPY OF SS CARD)
( ) WRONG SSN (INCLUDE COPY OF SS CARD)
( ) DeCAP/HCFSA
( ) LEGAL SERVICE FRINGE
( ) AUTO/PARKING FRINGE
( ) LoDI
( ) RETIREMENT PLAN "X"
( ) 3RD PARTY SICK PAY
( ) DOMESTIC PARTNER
( ) LATE CHECK REFUND
( ) NON-RESIDENT VISA
( ) SS DISABILITY AWARD
( ) OTHER

ATTACHED SUPPORTING DOCUMENTS FOR W-2c CORRECTION REQUESTS INCLUDE:

( ) PHOTOCOPY OF SS CARD
( ) FORM F09C (CHECK REFUND)
( ) DOMESTIC PARTNER CORRECTION FORM
( ) SS DISABILITY AWARD CERTIFICATE
( ) FORM A-227 (PDN)
( ) DEATH CERTIFICATE
( ) LoDI CORRECTION FORM
( ) FORM 1099R (RETIREES ONLY)
( ) NON-RESIDENT VISA

Section 4 TAX YEAR REQUESTED

YR._____

☐ **3RD PARTY DISABILITY**

One Year Per Form

☐ **1127 STATEMENT**

Fax or mail form and supporting documentation to:

FAX: (212) 669-4928

WWW.NYC.GOV/PAYROLL

OFFICE OF PAYROLL ADMINISTRATION
W-2 ADJUSTMENT UNIT
1 CENTRE STREET - ROOM 200 NORTH
NEW YORK, NEW YORK 10007

FOR OPA USE ONLY

CONTROL NO:
02_____

Wages, other compensation	Federal income tax withheld
Social security wages	Social security tax withheld
Medicare wages and tips	Medicare tax withheld
Advance EIC Payment	Dependent care benefits
Pension (IRC414H)	Line-of-Duty Injury
TDA	IRC125 / IRC132 / TAXABLE FRINGE
State income tax / Locality name	Local wages / Local income tax

DATE PROCESSED	INITIALS
WAIVER (SECTION 1127)	OTHER
State: NY	State Wages

W2form Duplicate 2002 (rev. 12/27/2002)