Scroll down to complete Form NYS-1-MN

Tab between entry areas and click on the check boxes to mark and unmark them.

This form is set up for either printing on two separate sheets of paper, or two-sided printing.

Scroll down to complete the back of Form NYS-1-MN

Cut on the dotted lines before filing this form.

Withholding identification number	1	New York State tax withheld	
Employer's legal name:		New York City tax withheld	
		Yonkers tax withheld	
A Last payroll date – Enter date of last payroll covered by this return (MMDDYY) B If you permanently ceased paying wages,		Total withheld (add lines 1, 2, & 3)	
		Credit claimed	
enter date of final payroll (MMDDYY) C Mark an X in the box for additional payment	6	Total tax due (line 4 minus line 5)	
I certify that this information is to the best of my knowledge and belief true, correct, and	complete.		
Taxpayer's signature Taxpayer's name (print or type)	Date	Telephone number

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Cut on dotted lines before filing this form.

	. — — — -			NYS-1-MN (1/10) (back)			
aid preparer: If you are using a paid preparer or Preparer's signature	payroll service, have the payroll service, h	Date	Mark an X if self-employed	Preparer's SSN or PTIN			
reparer's firm name (or preparer's name, if self-employed)	Address		1 2 2 1 1 2 2	Preparer's EIN			
Payroll service's name			Payroll service's EIN				
Make check payable to NYS Income Tax and mail to: NYS TAX DEPARTMENT, PROCESSING UNIT PO BOX 4111, BINGHAMTON NY 13902-4111		Taxpayer's business name					
		c/o at	attn (if applicable, mark either box and enter name)				
f you are a PrompTax participant and you are filing a paper return, nail your return and payment to: PROMPTAX. NYS TAX DEPARTMENT.		Number and str	Number and street or PO box				
O BOX 4131, BINGHAMTON NY 13902	-4131	City		State ZIP code			
ew employer or address change: Enter at rig ddress at which you will receive withholding tan and notices. For other changes, see instructions	x forms If the address			r, mark an X in the <i>c/o</i> box, , and mark an X in this box			