

# Nebraska Nonresident Employee Certificate

## for Allocation of Withholding Tax

**FORM  
9N**

Employee's Name			Percent Subject to Withholding	Social Security Number	
Home Address (Number and Street, or Rural Route and Box Number)			Employer's Name		
City, Town, or Post Office	State	Zip Code			

Under penalties of perjury, I declare that I reside at the address shown above. I estimate that the above percentage of my compensation from the employer with whom I file this certificate is for services subject to Nebraska income tax withholding. I will notify my employer by filing another Form 9N within ten days of any substantial change in the proportion of my services subject to Nebraska income tax withholding.

**I also understand that a nonresident individual who provides false information on Form 9N or an employer who knowingly uses such false information may be penalized. Furthermore, penalty may be imposed if the false information results in an amount withheld of less than seventy-five percent of the employee's tax liability on such wages. This penalty may equal the total tax evaded, and an additional penalty of up to \$1,000 may be imposed.**

**sign  
here**

Signature of Employee

Date

**Employee:** File this certificate with your employer. **Do not** send it to the Nebraska Department of Revenue.

**Employer:** Retain this certificate with your withholding tax records. You may withhold on the basis of this certificate, but you must make any necessary adjustments during the year so that the proper amount is withheld from the employee. The percentage indicated on Form 9N **does not** determine the amount of Nebraska wages or other compensation to be reported on Form W-2.

**Visit our Web site: [www.revenue.ne.gov](http://www.revenue.ne.gov), or call 1-800-742-7474 (toll free in NE and IA) or 1-402-471-5729.**