

# Guidance for Self-Employed Individuals

## How to file an Unemployment Insurance Claim on New York State Department of Labor's Website

### PERSONAL INFORMATION, PART I

“How many employers have you worked for in the past 18 months?”

In answering this question, count yourself as an employer if you were self-employed.

In the example below, if you had no other employment in the past 18 months, select “One employer” from the drop-down.



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### Personal Information, Part I

Complete the information below to continue the online application for unemployment benefits. When you have finished, click Continue.



First Name	<input type="text"/>	M.I.	<input type="text"/>
Last Name	<input type="text"/>		
Enter any other last name under which you worked during the last 18 months	<input type="text"/>		
Date of Birth	Month <input type="text"/>	Day <input type="text"/>	<input type="text"/> (e.g. 2007)
New York State driver's license or the number of your NYS Non-Driver Photo ID card	<input type="text"/>		
	<input type="checkbox"/> I don't have a NY driver's license or NYS Non-Driver Photo ID card.		
How many employers have you worked for in the past 18 months?	<input type="text" value="One employer"/>		

Do not use your browser's back button as you may lose information. Review your responses at the "Review of Application Responses" section.

## ELIGIBILITY INFORMATION, PART 1

**Question #5.** “Other than part-time work, on-call work, or owning a single-family rental unit, do you have a business or are you engaged in any activity which brings in or may bring in income?”

In answering this question, think of your self-employment as a “business or any activity” and identify whether you are still self-employed or if that still “brings in or may bring in income.”

In the example below, select “No” if you are no longer self-employed or if your self-employment no longer brings in income.

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### Eligibility Information, Part 1

Your answers to the following questions will help us to determine your eligibility for unemployment benefits. When you have finished, click Continue.



<b>1.</b> Did you lose all of your employment in the last 18 months due to <a href="#">lack of work</a> ?	<input type="radio"/> Yes <input type="radio"/> No
<b>→1a.</b> If you answered 'no' to question 1, did you earn more than \$4500 gross pay from your most recent employer?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA
<b>2.</b> In the past 18 months, were you an employee of an <a href="#">educational institution</a> ?	<input type="radio"/> Yes <input type="radio"/> No
<b>→2a.</b> If you answered 'yes' to question 2, are you filing this claim between academic terms or years, or during a customary vacation or holiday recess?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA
<b>→2a 1.</b> If you answered 'yes' to question 2a, have you been given a verbal or written offer of continuing work for an educational institution?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA
<b>3.</b> Are you currently or were you during the past 18 months an <a href="#">officer of a corporation</a> in which you have a financial interest or are involved in any decision-making?	<input type="radio"/> Yes <input type="radio"/> No
<b>4.</b> During the past 18 months, did you work or perform services for a <a href="#">business fully or partly owned by a relative</a> or where a relative is a partner or corporate officer?	<input type="radio"/> Yes <input type="radio"/> No
If you answered 'yes' to question 4, please answer questions 4a and 4b.	
<b>→4a.</b> Do you currently perform any duties for the business or are you involved in any decision making for the business? You must report any work activity when you certify for benefits.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA
<b>→4b.</b> Is the relative's business a sole proprietorship?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA
If you answered 'yes' to question 4b:	
<b>→4b.1</b> Is the relative your spouse?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA
<b>→4b.2</b> Is the relative your parent?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA
<b>5.</b> Other than part-time work, on-call work, or owning a single-family rental unit, do you have a business or are you <a href="#">engaged in any activity</a> which brings in or may bring in income?	<input type="radio"/> Yes <input checked="" type="radio"/> No

**NO**

## MOST RECENT EMPLOYER INFORMATION, PART 1

“The Federal Employer Identification Number (FEIN) is a 9-digit number which can be found on your copy of the W-2 form from the employer.”

“Federal Employer Identification (FEIN):” **Leave blank**

“If you do not know the FEIN, enter your most recent employer’s New York State Employer Registration Number (ER) Number. The ER number is a 7-digit number which can be found on the IA 12.3 Record of Employment form which your employer may have provided you.”

“New York State Employer Registration Number (ER Number)” **Leave blank**



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### Most Recent Employer Information, Part 1

If you know your most recent employer’s Federal Employer Identification Number (FEIN), or New York State Employer Registration Number (ER Number), enter the number in the appropriate field below.



The **Federal Employer Identification Number (FEIN)** is a 9-digit number which can be found on your copy of the W-2 form from the employer.

→Federal Employer Identification Number (FEIN)

Leave blank

← LEAVE BLANK

If you do not know the FEIN, enter your most recent employer’s **New York State Employer Registration Number (ER Number)**. The ER number is a 7-digit number which can be found on the IA 12.3 Record of Employment form which your employer may have provided you.

→New York State Employer Registration Number (ER Number)

Leave blank

← LEAVE BLANK

## MOST RECENT EMPLOYER INFORMATION, PART 2

“Provide the following information about your most recent employer. When you have finished, click Continue.”

“Last Employer Name”

Type “Self-employed”

“Address”

Enter either your business or residential address

“Employer’s telephone number:”

Enter either your business or residential phone number or cell number



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### Most Recent Employer Information, Part 2

Provide the following information about your most recent employer. When you have finished, click Continue.



Last Employer Name	<input type="text" value="Self-employed"/>	
Address (Number and Street)	<input type="text" value="Either your business or residential address"/>	
City	<input type="text" value="anywhere"/>	
State	<input type="text" value="New York"/>	
Zip Code	<input type="text" value="12345"/> + <input type="text"/>	
Employer's telephone number (including area code)	<input type="text" value="Your business or residential phone number or cell number"/>	
What was your first day of work with this employer?	<input type="text" value="April"/> <input type="text" value="14"/> <input type="text" value="2007"/> (e.g. 2007)	
Last day worked 05/12/2019		