

**ANNUITY FUND EARLY WITHDRAWAL APPLICATION**

NAME: \_\_\_\_\_

Last

First

Middle

ADDRESS: \_\_\_\_\_

Street

City/State

Zip

Phone No.

BIRTH DATE: \_\_\_\_\_ SS# \_\_\_\_\_ SEX \_\_\_\_\_

BENEFICIARY: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

**RETURN EVIDENCE OF CORRECT DATE OF BIRTH:** Attach at least two of the following types of evidence to substantiate date of birth and photo ID. The types of evidence are listed in order of preference and the most preferred types available should be used:

- |                               |  |
|-------------------------------|--|
| 1. Official Birth Certificate | 4. Photo ID (copy of Drivers License)                |
| 2. Certificate of Baptism     | 5. Naturalization Certificates or Immigration Papers |
| 3. Hospital Birth Records     | 6. Church Record of Birth                            |

**BENEFITS OFFICE STAFF CERTIFICATION**

*Office use Only*  
To the best of our knowledge the evidence of birth and employment records are genuine, we therefore certify the eligibility of the applicant.

AMOUNT OF ANNUITY: \_\_\_\_\_ PREPAID INTEREST: \_\_\_\_\_

TAXES WITHHELD: \_\_\_\_\_ INTEREST CHECK NO: \_\_\_\_\_

CHECK AMOUNT: \_\_\_\_\_ CHECK NO: \_\_\_\_\_ DATE: \_\_\_\_\_

ANNUITY STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**CERTIFICATION**

I hereby certify that the information listed above is true and correct. I also understand all withdrawals of funds shall be subject to applicable taxes, and does not require reimbursement to the Annuity Fund.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**CHECK AND INITIAL WITHDRAWAL OPTION ON BACK OF THIS APPLICATION**

**Spouses Signature:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**I HEREBY CONSENT TO THE OPTION CHOSED BY MY SPOUSE AS INDICATED ON BACK**

**\*\*\*\* Marriage License Required \*\*\*\***

**NOTARY SIGNATURE & SEAL** \_\_\_\_\_ **DATE** \_\_\_\_\_

We hereby authorize payment of the Annuity above set forth to this applicant

\_\_\_\_\_ DATE \_\_\_\_\_

UNION TRUSTEE

\_\_\_\_\_ DATE \_\_\_\_\_

EMPLOYER TRUSTEE

**(OVER)**

**DISTRICT COUNCIL 21 ANNUITY FUND  
EARLY WITHDRAWAL OPTIONS**

**Initial one of the following**



**PLEASE INITIAL THE REASON FOR THE WITHDRAWAL AND PROVIDE THE NECESSARY DOCUMENTATION:**

1. **TUITION** – for a dependent child to an **Accredited** educational institution (beyond high school on a full time basis, including room and board. **Child's birth certificate and tuition bills must be submitted with this form.** ( )
  
2. **PURCHASE OF A RESIDENCE** – for the purchase of a home, condominium or apartment in which the member intends to establish a legal residence. **Please include the following:** Agreement of Sale, Mortgage Commitment or Bank and or Settlement papers. The check will be made payable to you and the Title Company. ( )
  
3. **FUNERAL EXPENSES** – due to the death of your spouse, child, dependent, grandchild or parent, or the parent of your spouse. **All bills must accompany this form.** ( )
  
4. **EVICTION, FORECLOSURE AND TAX LIEN** – effective January 1, 2015, you will be permitted to receive no more than **one hardship distribution for Residential Expenses during any twelve-month period**, which is measured from the date of your last hardship distribution for Residential Expenses. **All bills must accompany this form. A copy of your lease agreement is required to be returned with your notarized eviction notice.** ( )
  
5. **MEDICAL EXPENSES** – certain medical expenses of you, your spouse, or your dependents that are not otherwise reimbursable under a group health plan covering you, your spouse, or your dependents. **All bills must accompany this form.** ( )
  
6. **DAMAGE REPAIR** – expenses for the repair of damage to your principal residence that would qualify you for a casualty loss deduction under the Internal Revenue Code. **All bills must accompany this form.** ( )
  
7. **50% DISTRIBUTION** – effective January 1, 2015, you may request a distribution up to fifty percent (50%) of your account under the Plan **once in any thirty-six month period**, which is measured from the date of your last in-service distribution. In addition, effective January 1, 2015, 50% in-service distributions will be limited to \$50,000.00 (before withholding), even if that represents less than 50% of your account balance. For purposes of such a distribution, amounts that have been in your account for fewer than twenty-four (24) months are not eligible for distribution.

NET CHECK AMOUNT \$ \_\_\_\_\_ ( )

**MEMEBERS MAY WITHDRAWAL UP TO 50% OF THE BEGINNING ANNUITY FUND  
BALANCE AT THE DISCRETION OF THE FUND'S TRUSTEES**



**PARTICIPANT SIGNATURE** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Please return to:**

**District Council 21 Benefits Office  
2980 Southampton Road  
Philadelphia, PA 19154**

**Participant Consent:**

I have read the annuity application and under penalty of perjury, I confirm all information provided and choose to receive a Withdrawal Distribution.

\_\_\_\_\_  
**Participant Signature**

**SWORN TO AND SUBSCRIBED BEFORE ME THIS** \_\_\_\_\_ **DAY**

**OF** \_\_\_\_\_ **20** \_\_\_\_\_

\_\_\_\_\_  
**NOTARY PUBLIC**

**Spousal Consent :**

I state under penalty of perjury that I am the spouse of the above named Participant, I have read the Withdrawal Application form and I understand that by signing this agreement, I may receive less money in the event of my spouses' death before a full distribution of the Annuity Plan Account and that I do not have to sign this agreement. I am signing this agreement voluntarily.

\_\_\_\_\_  
**Spouse Signature**

**SWORN TO AND SUBSCRIBED BEFORE ME THIS** \_\_\_\_\_ **DAY OF**

\_\_\_\_\_ **20** \_\_\_\_\_.

\_\_\_\_\_  
**NOTARY PUBLIC**



**DISTRICT COUNCIL No. 21**  
**INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES**

2980 SOUTHAMPTON-BYBERRY ROAD • PHILADELPHIA, PA 19154-1297

*Benefit Funds*

(215) 934-5130  
(215) 698-0978  
1 800-252-7252  
FAX (215) 934-5418

MICHAEL R. PREVITERA  
*Fund Administrator*

TO THE ANNUITY TRUSTEE:

I, \_\_\_\_\_ HEREBY CERTIFY THAT I AM NOT MARRIED, AND

**(Please Print)**

WAS NOT MARRIED DURING THE TIME OF CONTRIBUTIONS TO THIS  
ANNUITY PLAN.

\_\_\_\_\_  
**(Please Sign and have Notarized)**

I WAS MARRIED DURING THE TIME OF CONTRIBUTIONS HOWEVER, I HAVE  
SINCE BEEN DIVORCED.

A COPY OF DIVORCE DEGREE AND PROPERTY SETTLEMENT RELATED DOCUMENTS MUST BE  
SUBMITTED

\_\_\_\_\_  
**(Please Sign and have Notarized)**

**SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF**  
**\_\_\_\_\_ 20\_\_\_\_\_.**

\_\_\_\_\_  
**NOTARY PUBLIC**

**THIS DOCUMENT MUST BE NOTARIZED**



**DISTRICT COUNCIL No. 21**  
**INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES**

*Benefit Funds*

2980 SOUTHAMPTON-BYBERRY ROAD • PHILADELPHIA, PA 19154-1297

(215) 934-5130  
(215) 698-0978  
1 800-252-7252  
FAX (215) 934-5418

MICHAEL R. PREVITERA  
*Fund Administrator*

**EARLY WITHDRAWAL ANNUITY RESIDENCE PURCHASE AFFIDAVIT**

TO THE ANNUITY TRUSTEE:

AFTER THE COMPLETION OF THE ATTACHED AGREEMENT OF SALE,

I \_\_\_\_\_ HEREBY CERTIFY THAT MY PRIMARY AND LEGAL  
RESIDENCE AS OF \_\_\_\_\_ WILL BE AS FOLLOWS:

\_\_\_\_\_  
**Address** **City** **State** **Zip**

\_\_\_\_\_  
**Please Sign**

\_\_\_\_\_  
**Please Print**

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF  
\_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
**NOTARY PUBLIC**

**THIS DOCUMENT MUST BE NOTARIZED**





**Withholding Certificate for  
 Pension or Annuity Payments**

**2017**

**Purpose.** Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of federal income tax to withhold from your payment(s). You also may use Form W-4P to choose (a) not to have any federal income tax withheld from the payment (except for eligible rollover distributions or for payments to U.S. citizens to be delivered outside the United States or its possessions) or (b) to have an additional amount of tax withheld.

Your options depend on whether the payment is periodic, nonperiodic, or an eligible rollover distribution, as explained on pages 3 and 4. Your previously filed Form W-4P will remain in effect if you don't file a Form W-4P for 2017.

**What do I need to do?** Complete lines **A** through **G** of the **Personal Allowances Worksheet**. Use the additional worksheets on page 2 to further adjust your withholding allowances for itemized deductions, adjustments to income, any additional standard deduction, certain credits, or multiple pensions/more-than-one-income situations. If you don't want any federal income tax withheld (see *Purpose*, earlier), you can skip the worksheets and go directly to the Form W-4P below.

**Sign this form.** Form W-4P is not valid unless you sign it.  
**Future developments.** For the latest information about Form W-4P, such as legislation enacted after we release it, go to [www.irs.gov/w4p](http://www.irs.gov/w4p).

**Personal Allowances Worksheet (Keep for your records.)**

**A** Enter "1" for **yourself** if no one else can claim you as a dependent . . . . . **A** \_\_\_\_\_

**B** Enter "1" if:   
 { • You're single and have only one pension; or   
 • You're married, have only one pension, and your spouse has no income subject to withholding; or   
 • Your income from a second pension or a job or your spouse's pension or wages (or the total of all) is \$1,500 or less. } . . . . . **B** \_\_\_\_\_

**C** Enter "1" for your **spouse**. But, you may choose to enter "-0-" if you're married and have either a spouse who has income subject to withholding or more than one source of income subject to withholding. (Entering "-0-" may help you avoid having too little tax withheld.) . . . . . **C** \_\_\_\_\_

**D** Enter the number of **dependents** (other than your spouse or yourself) you will claim on your tax return . . . . . **D** \_\_\_\_\_

**E** Enter "1" if you will file as **head of household** on your tax return . . . . . **E** \_\_\_\_\_

**F** **Child Tax Credit** (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information.   
 • If your total income will be less than \$70,000 (\$100,000 if married), enter "2" for each eligible child; then **less** "1" if you have two to four eligible children or **less** "2" if you have five or more eligible children.   
 • If your total income will be between \$70,000 and \$84,000 (\$100,000 and \$119,000 if married), enter "1" for each eligible child . . . . . **F** \_\_\_\_\_

**G** Add lines A through F and enter total here. (**Note:** This may be different from the number of exemptions you claim on your tax return.) ► **G** \_\_\_\_\_

For accuracy, complete all worksheets that apply.   
 { • If you plan to **itemize or claim adjustments to income** and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.   
 • If you're **single and have more than one source of income subject to withholding** or are **married and you and your spouse both have income subject to withholding** and your combined income from all sources exceeds \$50,000 (\$20,000 if married), see the **Multiple Pensions/More-Than-One-Income Worksheet** on page 2 to avoid having too little tax withheld.   
 • If **neither** of the above situations applies, **stop here** and enter the number from line G on line 2 of Form W-4P below.

Separate here and give Form W-4P to the payer of your pension or annuity. Keep the top part for your records.

**Withholding Certificate for  
 Pension or Annuity Payments**

**2017**

► For Privacy Act and Paperwork Reduction Act Notice, see page 4.

Your first name and middle initial	Last name	Your social security number
Home address (number and street or rural route)		Claim or identification number (if any) of your pension or annuity contract
City or town, state, and ZIP code		

**Complete the following applicable lines.**

**1** Check here if you **do not want any** federal income tax withheld from your pension or annuity. (Do not complete line 2 or 3.) ►

**2** Total number of allowances and marital status you are claiming for withholding from each **periodic** pension or annuity payment. (You also may designate an additional dollar amount on line 3.) . . . . . ► \_\_\_\_\_  
**Marital status:**  Single  Married  Married, but withhold at higher Single rate. (Enter number of allowances.)

**3** Additional amount, if any, you want withheld from each pension or annuity payment. (**Note:** For periodic payments, you cannot enter an amount here without entering the number (including zero) of allowances on line 2.) . . . . . ► \$ \_\_\_\_\_

Your signature ► \_\_\_\_\_ Date ► \_\_\_\_\_

### Deductions and Adjustments Worksheet

**Note:** Use this worksheet *only* if you plan to itemize deductions or claim certain credits or adjustments to income.

- 1 Enter an estimate of your 2017 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% of your income, and miscellaneous deductions. For 2017, you may have to reduce your itemized deductions if your income is over \$313,800 and you're married filing jointly or you're a qualifying widow(er); \$287,650 if you're head of household; \$261,500 if you're single, not head of household and not a qualifying widow(er); or \$156,900 if you're married filing separately. See Pub. 505 for details . . . . . **1** \$ \_\_\_\_\_
- 2 Enter: 

{	\$12,700 if married filing jointly or qualifying widow(er)	}	. . . . .	<b>2</b>	\$	
\$9,350 if head of household						
\$6,350 if single or married filing separately						

 . . . . .
- 3 **Subtract** line 2 from line 1. If zero or less, enter "-0-" . . . . . **3** \$ \_\_\_\_\_
- 4 Enter an estimate of your 2017 adjustments to income and any additional standard deduction (see Pub. 505) . . . . . **4** \$ \_\_\_\_\_
- 5 **Add** lines 3 and 4 and enter the total. (Include any credit amounts from the *Converting Credits to Withholding Allowances for 2017 Form W-4* worksheet in Pub. 505.) . . . . . **5** \$ \_\_\_\_\_
- 6 Enter an estimate of your 2017 income not subject to withholding (such as dividends or interest) . . . . . **6** \$ \_\_\_\_\_
- 7 **Subtract** line 6 from line 5. If zero or less, enter "-0-" . . . . . **7** \$ \_\_\_\_\_
- 8 **Divide** the amount on line 7 by \$4,050 and enter the result here. Drop any fraction . . . . . **8** \_\_\_\_\_
- 9 Enter the number from the **Personal Allowances Worksheet**, line G, page 1 . . . . . **9** \_\_\_\_\_
- 10 **Add** lines 8 and 9 and enter the total here. If you use the **Multiple Pensions/More-Than-One-Income Worksheet**, also enter this total on line 1 below. Otherwise, **stop here** and enter this total on Form W-4P, line 2, page 1 . . . . . **10** \_\_\_\_\_

### Multiple Pensions/More-Than-One-Income Worksheet

**Note:** Complete *only* if the instructions under line G, page 1, direct you here. This applies if you (and your spouse if married filing jointly) have more than one source of income subject to withholding (such as more than one pension, or a pension and a job, or you have a pension and your spouse works).

- 1 Enter the number from line G, page 1 (or from line 10 above if you used the **Deductions and Adjustments Worksheet**) . . . . . **1** \_\_\_\_\_
- 2 Find the number in **Table 1** below that applies to the **LOWEST** paying pension or job and enter it here. **However**, if you're married filing jointly and the amount from the highest paying pension or job is \$65,000 or less, do not enter more than "3" . . . . . **2** \_\_\_\_\_
- 3 If line 1 is **more than or equal to** line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4P, line 2, page 1. **Do not** use the rest of this worksheet . . . . . **3** \_\_\_\_\_

**Note:** If line 1 is **less than** line 2, enter "-0-" on Form W-4P, line 2, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.

- 4 Enter the number from line 2 of this worksheet . . . . . **4** \_\_\_\_\_
- 5 Enter the number from line 1 of this worksheet . . . . . **5** \_\_\_\_\_
- 6 **Subtract** line 5 from line 4 . . . . . **6** \_\_\_\_\_
- 7 Find the amount in **Table 2** below that applies to the **HIGHEST** paying pension or job and enter it here **7** \$ \_\_\_\_\_
- 8 **Multiply** line 7 by line 6 and enter the result here. This is the additional annual withholding needed . . . . . **8** \$ \_\_\_\_\_
- 9 **Divide** line 8 by the number of pay periods remaining in 2017. For example, divide by 12 if you're paid every month and you complete this form in December 2016. Enter the result here and on Form W-4P, line 3, page 1. This is the additional amount to be withheld from each payment . . . . . **9** \$ \_\_\_\_\_

**Table 1**

**Table 2**

Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from <b>LOWEST</b> paying job or pension are—	Enter on line 2 above	If wages from <b>LOWEST</b> paying job or pension are—	Enter on line 2 above	If wages from <b>HIGHEST</b> paying job or pension are—	Enter on line 7 above	If wages from <b>HIGHEST</b> paying job or pension are—	Enter on line 7 above
\$0 - \$7,000	0	\$0 - \$8,000	0	\$0 - \$75,000	\$610	\$0 - \$38,000	\$610
7,001 - 14,000	1	8,001 - 16,000	1	75,001 - 135,000	1,010	38,001 - 85,000	1,010
14,001 - 22,000	2	16,001 - 26,000	2	135,001 - 205,000	1,130	85,001 - 185,000	1,130
22,001 - 27,000	3	26,001 - 34,000	3	205,001 - 360,000	1,340	185,001 - 400,000	1,340
27,001 - 35,000	4	34,001 - 44,000	4	360,001 - 405,000	1,420	400,001 and over	1,600
35,001 - 44,000	5	44,001 - 70,000	5	405,001 and over	1,600		
44,001 - 55,000	6	70,001 - 85,000	6				
55,001 - 65,000	7	85,001 - 110,000	7				
65,001 - 75,000	8	110,001 - 125,000	8				
75,001 - 80,000	9	125,001 - 140,000	9				
80,001 - 95,000	10	140,001 and over	10				
95,001 - 115,000	11						
115,001 - 130,000	12						
130,001 - 140,000	13						
140,001 - 150,000	14						
150,001 and over	15						

## Additional Instructions

Section references are to the Internal Revenue Code.

**When should I complete the form?** Complete Form W-4P and give it to the payer as soon as possible. Get Pub. 505, Tax Withholding and Estimated Tax, to see how the dollar amount you're having withheld compares to your projected total federal income tax for 2017. You also may use the IRS Withholding Calculator at [www.irs.gov/individuals](http://www.irs.gov/individuals) for help in determining how many withholding allowances to claim on your Form W-4P.

**Multiple pensions/more-than-one-income.** To figure the number of allowances that you may claim, combine allowances and income subject to withholding from all sources on one worksheet. You may file a Form W-4P with each pension payer, but don't claim the same allowances more than once. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4P for the highest source of income subject to withholding and zero allowances are claimed on the others.

**Other income.** If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Get Form 1040-ES and Pub. 505 at [www.irs.gov/formspubs](http://www.irs.gov/formspubs).

If you have income from wages, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or Form W-4P.

**Note:** Social security and railroad retirement payments may be includible in income. See Form W-4V, Voluntary Withholding Request, for information on voluntary withholding from these payments.

## Withholding From Pensions and Annuities

Generally, federal income tax withholding applies to the taxable part of payments made from pension, profit-sharing, stock bonus, annuity, and certain deferred compensation plans; from individual retirement arrangements (IRAs); and from commercial annuities. The method and rate of withholding depend on (a) the kind of payment you receive; (b) whether the payments are to be delivered outside the United States or its possessions; and (c) whether the recipient is a nonresident alien individual, a nonresident alien beneficiary, or a foreign estate. Qualified distributions from a Roth IRA are nontaxable and, therefore, not subject to withholding. See page 4 for special withholding rules that apply to payments to be delivered outside the United States and payments to foreign persons.

Because your tax situation may change from year to year, you may want to refigure your withholding each year. You can change the amount to be withheld by using lines 2 and 3 of Form W-4P.

**Choosing not to have income tax withheld.** You (or in the event of death, your beneficiary or estate) can choose not to have federal income tax withheld from your payments by using line 1 of Form W-4P. For an estate, the election to have no income tax withheld may be made by the executor or personal representative of the decedent. Enter the estate's employer identification number (EIN) in the area reserved for "Your social security number" on Form W-4P.

You may not make this choice for eligible rollover distributions. See *Eligible rollover distribution—20% withholding* on page 4.

**Caution:** There are penalties for not paying enough federal income tax during the year, either through withholding or estimated tax payments. New retirees, especially, should see Pub. 505. It explains your estimated tax requirements and describes penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.

**Periodic payments.** Withholding from periodic payments of a pension or annuity is figured in the same manner as withholding from wages. Periodic payments are made in installments at regular intervals over a period of more than 1 year. They may be paid annually, quarterly, monthly, etc.

If you want federal income tax to be withheld, you must designate the number of withholding allowances on line 2 of Form W-4P and indicate your marital status by checking the appropriate box. Under current law, you can't designate a specific dollar amount to be withheld. However, you can designate an additional amount to be withheld on line 3.

If you don't want any federal income tax withheld from your periodic payments, check the box on line 1 of Form W-4P and submit the form to your payer. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 4.

**Caution:** If you don't submit Form W-4P to your payer, the payer must withhold on periodic payments as if you're married claiming three withholding allowances. Generally, this means that tax will be withheld if your pension or annuity is at least \$1,720 a month.

If you submit a Form W-4P that doesn't contain your correct social security number (SSN), the payer must withhold as if you're single claiming zero withholding allowances even if you checked the box on line 1 to have no federal income tax withheld.

There are some kinds of periodic payments for which you can't use Form W-4P because they're already defined as wages subject to federal income tax withholding. These payments include retirement pay for service in the U.S. Armed Forces and payments from certain nonqualified deferred compensation plans and deferred compensation plans described in section 457 of tax-exempt organizations. Your payer should be able to tell you whether Form W-4P applies.

For periodic payments, your Form W-4P stays in effect until you change or revoke it. Your payer must notify you each year of your right to choose not to have federal income tax withheld (if permitted) or to change your choice.

**Nonperiodic payments—10% withholding.** Your payer must withhold at a flat 10% rate from nonperiodic payments (but see *Eligible rollover distribution—20% withholding* on page 4) **unless** you choose not to have federal income tax withheld. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. You can choose not to have federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct SSN) to your payer and checking the box on line 1. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 4. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. You can't use line 2 for nonperiodic payments. But you may use line 3 to specify an additional amount that you want withheld.

**Caution:** If you submit a Form W-4P that doesn't contain your correct SSN, the payer can't honor your request not to have income tax withheld and must withhold 10% of the payment for federal income tax.



**Eligible rollover distribution—20% withholding.** Distributions you receive from qualified pension or annuity plans (for example, 401(k) pension plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over tax free to an IRA or qualified plan are subject to a flat 20% federal withholding rate. The 20% withholding rate is required, and you can't choose not to have income tax withheld from eligible rollover distributions. Don't give Form W-4P to your payer unless you want an additional amount withheld. Then, complete line 3 of Form W-4P and submit the form to your payer.

**Note:** The payer won't withhold federal income tax if the entire distribution is transferred by the plan administrator in a direct rollover to a traditional IRA or another eligible retirement plan (if allowed by the plan), such as a qualified pension plan, governmental section 457(b) plan, section 403(b) contract, or tax-sheltered annuity.

Distributions that are (a) required by law, (b) one of a specified series of equal payments, or (c) qualifying "hardship" distributions are **not** "eligible rollover distributions" and aren't subject to the mandatory 20% federal income tax withholding. See Pub. 505 for details. See also *Nonperiodic payments—10% withholding* on page 3.

**Tax relief for victims of terrorist attacks.** For tax years ending after September 10, 2001, disability payments for injuries incurred as a direct result of a terrorist attack directed against the United States (or its allies), whether outside or within the United States, aren't included in income. You may check the box on line 1 of Form W-4P and submit the form to your payer to have no federal income tax withheld from these disability payments. However, you must include in your income any amounts that you received or you would've received in retirement had you not become disabled as a result of a terrorist attack. See Pub. 3920, *Tax Relief for Victims of Terrorist Attacks*, for more details.

### Changing Your "No Withholding" Choice

**Periodic payments.** If you previously chose not to have federal income tax withheld and you now want withholding, complete another Form W-4P and submit it to your payer. If you want federal income tax withheld at the rate set by law (married with three allowances), write "Revoked" next to the checkbox on line 1 of the form. If you want tax withheld at any different rate, complete line 2 on the form.

**Nonperiodic payments.** If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to the checkbox on line 1 and submit Form W-4P to your payer.

### Payments to Foreign Persons and Payments To Be Delivered Outside the United States

Unless you're a nonresident alien, withholding (in the manner described above) is required on any periodic or nonperiodic payments that are to be delivered to you outside the United States or its possessions. You can't choose not to have federal income tax withheld on line 1 of Form W-4P. See Pub. 505 for details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% federal withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding even if no tax treaty applies. See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*, and Pub. 519, *U.S. Tax Guide for Aliens*, for details. A foreign person should submit Form W-8BEN, *Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding*, to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's taxpayer identification number (TIN).

### Statement of Federal Income Tax Withheld From Your Pension or Annuity

By January 31 of next year, your payer will furnish a statement to you on Form 1099-R, *Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.*, showing the total amount of your pension or annuity payments and the total federal income tax withheld during the year. If you're a foreign person who has provided your payer with Form W-8BEN, your payer instead will furnish a statement to you on Form 1042-S, *Foreign Person's U.S. Source Income Subject to Withholding*, by March 15 of next year.

### Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request federal income tax withholding from periodic pension or annuity payments based on your withholding allowances and marital status, (b) request additional federal income tax withholding from your pension or annuity, (c) choose not to have federal income tax withheld, when permitted, or (d) change or revoke a previous Form W-4P. To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.