

Maryland Race Track Employees Pension Fund

911 Ridgebrook Road
Sparks, Maryland 21152-9451
Telephone: (410) 683-6500
(800) 638-2972
www.associated-admin.com

NOTE: THESE FORMS MUST BE RETURNED REGARDLESS OF WHETHER OR NOT WITHHOLDINGS ARE ELECTED

PENSION FEDERAL TAX WITHHOLDING FORM

WHO MAY FILE:

Recipients of Pensions or Annuities may file this form to request that Federal income tax be withheld from each monthly pension payment. Your request for withholding is voluntary. "This is a substitute for the IRS Form W-4P Withholding Certificate for Pension or Annuity Payments."

COMPLETING AND FILING THIS FORM:

1. Complete Section A.
2. Complete Section B. Enter the amount you want withheld from each payment. The Amount:
 - (1) Must be in **whole dollars** (example: \$35.00 Not \$34.50)
 - (2) Must NOT be less than \$5.00 per month.
 - (3) Must NOT reduce the net amount of your pension/annuity payment to less than \$10.00.
 - (4) If no withholdings are requested, enter zero (0) and return form.

Caution: You may be subject to a penalty if your tax payments during the year are not at least 80% of the actual tax liability as shown on your Form 1040A. You pay tax during the year through withholding or estimated tax payments or both. To avoid the penalty make sure you have enough tax withheld or file Form 1040-ES, Declaration of Estimated Tax for Individuals.

STATEMENT OF INCOME TAX WITHHELD:

Annuity or Pension – You will receive a Form 1099-R, Distributions from pension, annuities, retirement or profit sharing plans, IRA's, insurance contracts, etc. by January 31 of the next year. The form will show the gross amount of pension or annuity payments and the total income tax withheld during the calendar year. If you receive a pension or an annuity, and you meet the minimum requirement for filing a Federal tax return, you must file Form 1040, not Form 1040A.

ANNUITANT'S REQUEST FOR FEDERAL INCOME TAX WITHHOLDING **PENSION**

Section A.

Type or Print Full Name

Social Security Number

Home Address (Number and Street)

City State Zipcode

Section B.

Enter the amount to be withheld from each annuity/pension payment.....\$_____

I request voluntary income tax withholding from my annuity/pension payments as authorized by Section 3402(o) of the Internal Revenue Code.

Signature of Annuitant

Date