



SALEM CONTRIBUTORY RETIREMENT BOARD

Withholding Preference Certificate for Pension or Annuity Payments

Recipient Information

Name: _____

Address: _____

Please Check Only One

- 1) I do not wish to have federal tax payments withheld from my benefit. I am aware that I am liable for payment of federal income tax assessed on the taxable portion of my benefit and that I may be subject to penalties under the estimated tax payment rules if my payments of estimated tax and withholdings are not adequate

- 2) The following exemptions are being claimed and I wish to have federal tax payments withheld from my benefit based on calculations performed by the Salem Contributory System benefit administration software, which calculates federal tax payments in accordance with federal income brackets, and assumes that the income represented by my benefit represents my total household income:

Marital Status: Single Married Married (but withholding as "Single")

Total Exemptions Claimed: 0 1 2 3 4

- 3) I would like to have monthly federal tax payments withheld on my behalf in the amount of: \$

Signature

Signature of Benefit Recipient: _____ Date: _____