

Name Last First Middle			Date of Birth - -		Plan Type (Check one)
Social Security Number - -		Retirement Number			<input type="checkbox"/> School
Address		City	State	Zip	<input type="checkbox"/> State
Home Phone	Work Phone	Employer			<input type="checkbox"/> County
					<input type="checkbox"/> Judges
					<input type="checkbox"/> Patrol
					<input type="checkbox"/> DCP

## Withholding Certificate for Annuity Payments

If you are a new retiree or benefit recipient and you do not complete and return this form, we are required to withhold federal and Nebraska state income taxes as if you are a married individual claiming three exemptions.

### SECTION 1 NEBRASKA RESIDENTS (Fill out ONLY this section.)

Nebraska residents, please check the box to select ONE of the following options (A, B, or C):

- OPTION A: I WANT federal *and* state income tax withheld from my periodic annuity payments, based on the number of exemptions and the marital status I claim below.**

**Total number of exemptions/withholdings claimed:** \_\_\_\_\_

**MARITAL STATUS:**  Single  Married  Married, but withholding at a higher single rate  
(Select ONLY ONE of the above. Note that "Widow" or "Widower" is not a status.)

**IF YOU SELECTED OPTION A: (Optional)**

Note any **ADDITIONAL** (not total) monthly federal withholding: \$ \_\_\_\_\_

Note any **ADDITIONAL** (not total) monthly state withholding: \$ \_\_\_\_\_

Must be a dollar amount.  
No percentages  
or fractions.

- OPTION B: I do NOT want federal **OR** state income tax withheld.**

- OPTION C: I do NOT want federal income tax withheld **BUT** please withhold a flat monthly amount of \$ \_\_\_\_\_ for state income tax.**

### SECTION 2 NON-RESIDENTS OF NEBRASKA (Fill out ONLY this section.)

Complete this section only if you do **NOT** reside in Nebraska. Please check the box to select ONE of the following options (A or B):

- OPTION A: I WANT federal income tax withheld from my periodic annuity payments, based on the number of exemptions and the marital status I claim below.**

**Total number of exemptions/withholdings claimed:** \_\_\_\_\_

**MARITAL STATUS:**  Single  Married  Married, but withholding at a higher single rate  
(Select ONLY ONE of the above. Note that "Widow" or "Widower" is not a status.)

**IF YOU SELECTED OPTION A: (Optional)**

Note any **ADDITIONAL** (not total) monthly federal withholding: \$ \_\_\_\_\_

Must be a dollar amount.  
No percentages or fractions.

- OPTION B: I do NOT want federal income tax withheld.**

Questions regarding your individual tax liability should be directed to your accountant, the Internal Revenue Service and/or the Nebraska Department of Revenue. The Public Employees Retirement Systems staff are not qualified to answer your personal tax questions.

**IMPORTANT:** I realize I am liable for payment of federal income tax on the taxable portion of my annuity and that I may be subject to tax penalties under the estimated tax payment rules if my payment(s) of estimated tax and withholding are not adequate.

I hereby submit this Withholding Certificate regarding how my benefit is to be treated for purposes of federal and Nebraska state income tax withholding.

<p>X <b>Member's Signature</b></p>	<p>DATE</p>
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