## TEXAS EMERGENCY SERVICES RETIREMENT SYSTEM



## **Federal Income Tax Withholding Certificate**

I have reviewed the information below and hereby submit this statement of preference regarding how my benefit is to be treated for purposes of federal income tax withholding. I understand that this withholding preference will apply to the taxable portion of the money I receive on a monthly basis from TESRS.

NAME		SOCIAL SECURITY NO.	
ADDRESS		CITY STATE ZIP	
Select One of	f the Following Options:		
1.	I do not wish to have any federal income tax withheld from my benefit. I understand that I am liable for the payment of federal income tax on the taxable portion of my benefit 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.		
2.	The allowances and marital status below are being claimed and I wish to have TESRS withhold federal income tax, if any, from my MONTHLY benefit the amount as determined by and in accordance with the tax tables, marital status, and allowances claimed.		
3.		Y only if this amount is greater than what would be withheld tax tables. Otherwise, withhold in accordance with the tax ta	
If you selected 2 or 3 above, the following section must be completed:  Allowances Claimed:  Marital Status:			
Allowalices	1 for yourself 1 for your spouse Other  Total Allowances Claimed	Marital Status:  Married Single Married but withholding at higher single rate	
<ol> <li>Withhold</li> <li>Base with</li> <li>Provide y</li> </ol> Alternatives As a benefit re <ol> <li>You may</li> <li>You may</li> <li>You may</li> <li>you may</li> <li>specific a and allow</li> <li>An election time. If you withheld funder the</li> <li>This TES</li> </ol> Failure to File If you do not file	Available to People Who Are Receiving Benefits ecipient, the following alternatives are available to you specify that you do not want federal tax withheld from complete the "Allowances Claimed" section and select the withheld based upon federal tax tables. complete the "Allowances Claimed" section, select the mount will be withheld provided it exceeds the amount rances claimed. Otherwise, the amount required by the or of any one of the alternatives will remain in effect upon the estimated tax rules if your withholding and estimated RS form is a substitute for IRS Form W-4P, which car the this Certificate with TESRS is required to large enough to require federal tax withholding and estimated tax rules if your sectificate, TESRS is required to surpression of the alternative certificate, TESRS is required to surpression of the provided in the provided in the provided tax rules if your withholding and estimated the provided in the p	eference selection.  I: In your benefit by selecting Item 1 above. In your benefit by selecting Item 1 above. It Item 2 which will require TESRS to determine the amount yellow and specify the amount you would like to have withhelt that must be withheld based upon the tax tables, marital status, and allowances claimed will be wantil you revoke it. You may revoke or change your election a payments, or if you do not have enough federal income tayment of the applicable federal income tax. You may incur put tax payments are not sufficient.	ld. The status, withheld. at any ax penalties
Signature		Date	
X			