



State Income Tax Withholding Election Notice for Qualified Pension and Annuity Payments

Instructions: Find your state of residence and complete the form as directed. If you do not want state income tax withheld, please check the box below and return this form. Please be sure to sign and complete the Personal Information section.

By checking this box, I elect not to have state income tax withheld from my pension or annuity payments.

1. VOLUNTARY TAX WITHHOLDING STATES

Residents of Alabama, Colorado, Indiana, Missouri (must be at least \$10.00), **Montana, New Jersey** (must be at least \$10.00), **New Mexico** (must be at least \$10.00), **Illinois, Mississippi** (must be at least 5%; mandatory for early distributions), **New York** (must be at least \$5.00), **Louisiana, North Dakota, Pennsylvania, Rhode Island, West Virginia, Wisconsin** (must be at least \$5.00)
If you want state income tax withheld from your pension or annuity payment, and you reside in one of the states listed above, please indicate a flat amount \$ _____ or whole percent _____ %.

Arizona residents: If you are receiving a non-periodic payment, or a distribution from an IRA or SEP, state income tax withholding is not applicable. If you are receiving periodic pension or annuity payments and you want state income taxes withheld, please select one of the following:
 0.8% 1.3% 1.8% 2.7% 3.6% 4.2% 5.1% of the taxable amount of the distribution.
Additional Amount (if any)\$ _____

Idaho and Utah residents: If you want state income tax withheld, complete the following:
Marital Status (check one): Single Married Married, but withhold at higher Single rate
Number of Exemptions _____
Additional Amount (if any) \$ _____

Kentucky and South Carolina residents: If you want state income tax withheld, select one of the following two options:
1. Number of exemptions you are claiming _____ and additional amount you want withheld per payment (if any) \$ _____ **OR**
2. Flat amount \$ _____ or whole percent _____ % to withhold from each payment.

Ohio residents: If you want state income tax withheld, select one of the following two options:
1. I want state income tax withheld, based on the following number of exemptions _____ **OR**
2. I want state tax withheld in the following flat amount \$ _____ or whole percent _____ %. (If you are receiving a nonperiodic payment, withholding must be at least 3.5% of the distribution.)

III. PERSONAL INFORMATION – Must be Completed

First Name:	MI:	Last Name:	Social Security Number:
Street Address:			Apartment Number:
City:		State:	Zip Code:
Signature:			Date: