



Sacramento County Employees' Retirement System
 980 9th Street, Suite 1900
 Sacramento, CA 95814
 Phone: (916) 874-9119
 Fax: (916) 874-6060
 Web: www.scers.org

TAX WITHHOLDING

Dear Retiree:

Your retirement allowance may be subject to income tax withholding. This form is used to determine your Federal and California (CA) State income tax withholding amount. Without this form on file, tax will be withheld as if you were married and claiming three exemptions.

Although SCERS is required to send a "Tax Withholding" form annually, a "Tax Withholding" form can be requested at any time during the year. Your tax withholding status will remain in effect until another "Tax Withholding" form is received.

NEW RETIREES Complete and return this form to SCERS at the address above.

EXISTING RETIREES Do not return this form if you want your current withholding form to remain in effect.

RETIREES WITH MULTIPLE ACCOUNTS Complete a separate form if a different filing status and/or exemption applies to each account. Indicate which account this form applies to: Retiree Beneficiary Ex-spouse

FEDERAL TAX WITHHOLDING (Indicate your filing status, number of exemptions and select one option)

FILING STATUS Married or Single with _____ Exemptions

- Withhold Federal income tax based on the tax tables for the filing status indicated.
- Withhold Federal income tax based on the tax tables for the filing status indicated above plus an additional amount of \$_____ per month.
- Withhold \$_____ per month for Federal income tax.
- Do not withhold Federal income tax.

CA STATE TAX WITHHOLDING (Indicate your filing status, number of exemptions and select one option)

FILING STATUS Married or Single with _____ Exemptions

- Withhold CA State income tax based on the tax tables for the filing status indicated above.
- Withhold CA State income tax based on the tax tables for the filing status indicated above plus an additional amount of \$_____ per month.
- Withhold \$_____ per month for CA State income tax.
- Do not withhold CA State income tax.

**NON-CALIFORNIA RESIDENTS
MAY WAIVE CA STATE TAX**

I have reviewed the information on this form and submit this statement of income tax withholding on my retirement allowance. I understand this election will remain in effect until I change it. **I understand that I may be responsible for any tax liability and/or penalties if my withholding and estimated tax payments are not sufficient.**

Print Name: _____ Social Sec. No: _____ - _____ - _____

Address: _____ City _____ State _____ Zip Code _____

Signature: _____ Date: _____ Phone No.: (_____) _____