

MONTGOMERY COUNTY EMPLOYEE RETIREMENT PLANS

Group E DROP Exit/RETIREMENT FORMS - Instructions

- 1. **DROP Distribution Election Form** select where you want your DROP account distributed. If you are rolling the DROP account to another financial institution, you <u>MUST ALSO SUBMIT</u> a copy of a Rollover form from the financial institution OR a letter from the financial institution confirming the following:
 - Full Name of the Plan (the name of the financial institution the check should be made payable)
 - Type of Plan (e.g. Deferred Compensation, IRA)
 - Your Name
 - Your Account Number
 - **DROP distributions will be mailed to your home address for you to either deposit or to forward to the financial institution.
- 2. MD State tax withholding MW507P complete only if you reside or claim residency in Maryland*.
 - Section A should be left blank
 - Section B MD requires that you enter a <u>flat dollar amount</u> in Section B.

The link below may assist you in completing Section B.

https://interactive.marylandtaxes.com/business/calculators/WHCalc2022.asp

- *MCERP does not withhold taxes for any state other than Maryland. If you reside or claim residency outside of MD, you will need to contact the state in which you live and make arrangements to pay your state taxes.
- 3. **Federal tax withholding W4-P** complete <u>ONLY IF</u> you wish to change your current withholdings. Your current withholdings can be located at the bottom of your pay slip under Tax Withholding Information.
 - Step 1 Enter your personal information.
 - Step 2 Complete only if you have income from another job, receive more than one pension or if your spouse receives income.
 - Step 3 N/A
 - Step 4:
 - (c) Extra withholdings
 - (d) No taxes withheld
- 4. **Direct Deposit Form** complete <u>ONLY IF</u> you wish to have your monthly pension deposited to a different account than where your current paycheck is being deposited.
 - Attached a VOIDED check <u>or</u> letter from the bank which includes your name, account type, account number and bank routing number.
 - Only ONE bank can be selected.



MONTGOMERY COUNTY EMPLOYEE RETIREMENT PLANS

DEFERRED RETIREMENT OPTION PLAN (DROP) - PLAN #51485 (MCGEO) DISTRIBUTION ELECTION FORM

	n eligible retirement plan			
	Full Name of the Pl	an		
	Type of Plan			
	Account Number			
	AIT a copy of a Rollover form fastitution with the name of the p			OR a
Any post-tax portion of	your account will be paid to y	ou.		
will be subject to the	to me. I understand that the tax e mandatory 20% Federal incomany state tax withholding.	-	•	
professional tax advisor or financial co Notice and have been advised of the tax ny DSRP account must be closed with	onsultant. I acknowledge that x consequences of my distribu in 60 days of my exiting the p	I have read ition. I fur	the Special Tax ther understand	l that
I understand that this election is irrevolute professional tax advisor or financial convoice and have been advised of the tax my DSRP account must be closed with weeks for processing and receipt of you DROP Exit Date:	onsultant. I acknowledge that x consequences of my distribution 60 days of my exiting the pur distribution.	I have read ition. I fur rogram. Yo	the Special Ta ther understand ou should allow	l that
professional tax advisor or financial co Notice and have been advised of the tax my DSRP account must be closed with weeks for processing and receipt of you	onsultant. I acknowledge that x consequences of my distribu in 60 days of my exiting the p	I have read ition. I fur rogram. Yo YES	the Special Tax ther understand	l that
Professional tax advisor or financial convolute and have been advised of the tax my DSRP account must be closed with weeks for processing and receipt of you DROP Exit Date:	onsultant. I acknowledge that x consequences of my distribution 60 days of my exiting the pur distribution.	I have read ition. I fur rogram. Yo YES (circl	the Special Tar ther understand ou should allow NO	l that
professional tax advisor or financial co Notice and have been advised of the tax my DSRP account must be closed with weeks for processing and receipt of you DROP Exit Date:	onsultant. I acknowledge that x consequences of my distribution for the pur distribution. I am over age 50	I have read ition. I fur rogram. Your YES (circle	the Special Tar ther understand ou should allow NO	l that
Professional tax advisor or financial convolute and have been advised of the tax my DSRP account must be closed with weeks for processing and receipt of you DROP Exit Date: Employee Name (Print)	onsultant. I acknowledge that x consequences of my distribution for the pur distribution. I am over age 50	I have read ition. I fur rogram. Your YES (circle	the Special Tar ther understand ou should allow NO	l that

Montgomery County Employees' Retirement System (MCERS)

Electronic Direct Deposit Authorization Form – Benefit Payments

I hereby make the following requests and authorizations relating to my benefit payments from the Montgomery County Employees' Retirement System: (1) I request and authorize you to initiate credit entries to my Account indicated below; (2) I request and authorize you to initiate debit entries and adjustments for any credit entries made in error to the Account; and (3) I request and authorize the Financial Institution named below to credit and/or debit any such entries to the Account.

1.	Participant Name			
		(Fu	ull Name)	
2.	Social Security Number			
3.	Participant Home Address			
		(Ci	ity, State and Zip Code)	_
4.	Daytime Phone Number			
5.	Financial Institution's Name			
6.	Account Type C	hecking Saving	g Other	
7.	Basic Information	(Bank Routing Number)	(Account Number)	
	with the name and addrogenerated Direct Deposit elected is other than che	ess. We cannot acce Authorization forms cking, or if you only had bank statement, s	account only). This check must be imprest starter checks, deposit slips or compared from your bank. If the type of bank accompared by a bank official that includes sting number.	outer count ude a
I una 30 cinfor have a re	with the name and addregenerated Direct Deposite elected is other than cheletter from the bank, or name, address, bank according to the days of your receipt of this form. It is mation by completing a new form the received written notification of its asonable opportunity to act on it.	Authorization forms cking, or if you only has bank statement, so ount number and rout discrepancy or other unusual In the event of a discrepant. The authority granted by stermination in such time and hereby discharge from More	ept starter checks, deposit slips or comp from your bank. If the type of bank acc have starter checks, then you must includes signed by a bank official that includes	nts within corrected until you nstitution

PLEASE RETURN THE COMPLETED FORM, ALONG WITH A COPY OF A VOIDED CHECK OR OTHER DOCUMENTATION AS DESCRIBED ABOVE, TO:

Montgomery County Employee Retirement Plans 101 Monroe Street, 6th floor Rockville, MD 20850 Phone: (240) 777-8230 Fax: (240) 306.1389

Please keep a copy of this form for your records

MW 507P

Comptroller of Maryland Revenue Administration Division 110 Carroll Street Annapolis, Maryland 21411-0001

Maryland Income Tax Withholding for Annuity, Sick Pay and Retirement Distributions

Type or print full name	Social Security number
Home address (number & street)	
City, state and zip code	
A. Contract claim or identification number	N/A
B. Enter the amount withheld from each annuity, sick pay or retirement	
distribution payment	\$
I request voluntary income tax withholding from any annuity, sick pay or retirement by Section 10-907(b) of the Tax-General Article of the Annotated Code of Maryla	
COM/RAD 044 11-49 (Signature)	(Date)

Instructions

Who may file – Any recipient of an annuity, sick pay or retirement distribution payment may file this form to have Maryland income tax withheld from each payment. However, the annuity must be payable over a period longer than one year.

Sick pay – The term "sick pay" means any amount which is paid to an employee pursuant to a plan to which the employer is a party and constitutes remuneration or a payment in lieu of remuneration for any period during which the employee is temporarily absent from work on account of sickness or personal injuries.

Where and how to file – File this form with the payer of your annuity, sick payment or retirement distribution. Enter in item B of page 1, the whole dollar amount that you wish withheld from each annuity or sick pay payment. The amount must not be less than \$5 a month for annuities and retirement distributions and at least \$2 per daily payment in the case of sick pay.

You may find it convenient to request an amount to be withheld which will reduce your year-end tax balance on your individual Maryland tax return to an amount of \$500 or less and thus avoid having to file an individual Declaration of Estimated Tax (Form 502D or 502 DEP).

You may use the worksheet provided with the declaration as a guide in estimating your income tax liability.

Duration of withholding request – Your request for voluntary withholding will remain in effect until you terminate it.

How to terminate a withholding request – You may terminate, at any time, your request for voluntary withholding by giving your payers a written termination notice.

Statement of income tax withheld – At the close of the year, your payer will furnish you with a Form 1099 or other appropriate form showing the gross amount of annuity or sick pay payments and the total amount deducted and withheld as tax during the calendar year.

Do not mail this form to the Maryland Revenue Administration Division

Return to: Montgomery County Employee Retirement Plans

101 Monroe Street, 6th Floor Rockville, MD 20850

Phone: 240-777-8230 Fax: 240-306-1389 Please keep a copy of this form for your records



Withholding Certificate for Periodic Pension or Annuity Payments

OMB No. 1545-0074

2023

Department of the Treasury Internal Revenue Service Give Form W-4P to the payer of your pension or annuity payments.

Step 1:	(a) First name and	middle initial	Last name		(b) Soc	cial security number
Enter						
Personal	Address					
nformation	City or town, state,	and ZIP code				
ŀ	(c) Single or I	Married filing separately				
			anouno.			
	=	ling jointly or Qualifying surviving	ried and pay more than half the costs of keep	na un a hama far un	woolf one	La avalifika individual \
	nead of fic	Duseriold (Check only if you're driffiar	ned and pay more than han the costs of keep	ing up a nome for you	ursen and	ra qualifying individual.)
		they apply to you; otherwisderal income tax withheld (if	<mark>e, skip to Step 5.</mark> See pages 2 and permitted).	d 3 for more info	ormatio	n on each step
Step 2:	Complete thi	s step if you (1) have income	from a job or more than one pensi	on/annuity, or (2	2) are m	narried filing
ncome From a Job	jointly and yo		rom a job or a pension/annuity. Se	e page 2 for ex	amples	s on how to
and/or	Do only one	of the following.				
Multiple	_	I for future use.				
Pensions/	. ,	e the items below.				
Annuities	, ,			-l 4bl		
Including a Spouse's Job/	from	all jobs, plus any income e	ne or more jobs, then enter the tot ntered on Form W-4, Step 4(a), Step 4(b), for the jobs. Otherwise,	for the jobs les		\$
Pension/ Annuity)	this o	ne, then enter the total and	any other pensions/annuities that paual taxable payments from all low	ver-paying pens	sions/	\$
	(iii) Add t	he amounts from items (i) an	d (ii) and enter the total here			<u> </u>
			W-4P for all other pensions/annuiti		•	
	withholding s	since 2021 or this is a new p	ension/annuity that pays less than t vithholding since 2019. If you have	he other(s). Sub	mit a n	ew Form W-4 for
Complete Ste Steps 3-4(b) o		s form only if (b)(i) is blank ar	d this pension/annuity pays the mo	ost annually. Oth	nerwise	, do not complete
Step 3:	If your total in	ncome will be \$200,000 or le	ss (\$400,000 or less if married filing	g jointly):		
Claim	Multiply t	he number of qualifying child	Iren under age 17 by \$2,000 <u>\$</u>			
Dependent and Other	Multiply t	he number of other depende	nts by \$500 <u>\$</u>			
Credits	Add other cre	edits, such as foreign tax cre	dit and education tax credits \$			
	Add the amo total here .		other dependents, and other credit			\$
Step 4 optional): Other	on other	income you expect this year	sion/annuity payments). If you wa that won't have withholding, ente nterest, taxable social security, and	r the amount of		\$
Adjustments	and want		eductions other than the basic stan g, use the Deductions Worksheet 			\$
	(c) Extra wit	thholding. Enter any addition	nal tax you want withheld from eac l	h payment .	4(e)	\$
		es withheld from your per	•			
Step 5:						
Sign						
Here	Your signature	e (This form is not valid unles	ss vou sian it.)	Dat	e	
	2 3.9					

Form W-4P (2023) Page **2**

General Instructions

Section references are to the Internal Revenue Code.

Future developments. For the latest information about any future developments related to Form W-4P, such as legislation enacted after it was published, go to www.irs.gov/FormW4P.

Purpose of form. Complete Form W-4P to have payers withhold the correct amount of federal income tax from your periodic pension, annuity (including commercial annuities), profit-sharing and stock bonus plan, or IRA payments. Federal income tax withholding applies to the taxable part of these payments. Periodic payments are made in installments at regular intervals (for example, annually, quarterly, or monthly) over a period of more than 1 year. Don't use Form W-4P for a nonperiodic payment (note that distributions from an IRA that are payable on demand are treated as nonperiodic payments) or an eligible rollover distribution (including a lump-sum pension payment). Instead, use Form W-4R, Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions, for these payments/distributions. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

Choosing not to have income tax withheld. You can choose not to have federal income tax withheld from your payments by writing "No Withholding" on Form W-4P in the space below Step 4(c). Then, complete Steps 1a, 1b, and 5. Generally, if you are a U.S. citizen or a resident alien, you are not permitted to elect not to have federal income tax withheld on payments to be delivered outside the United States and its territories.

Caution: If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. If your tax situation changes, or you chose not to have federal income tax withheld and you now want withholding, you should submit a new Form W-4P.

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you (or you and your spouse) receive. If you do not have a job and want to pay these taxes through withholding from your payments, you should enter the self-employment income in Step 4(a). Then compute your self-employment tax, divide that tax by the number of payments remaining in the year, and include that resulting amount per payment in Step 4(c). You can also add half of the annual amount of self-employment tax to Step 4(b) as a deduction. To calculate self-employment tax, you generally multiply the self-employment income by 14.13% (this rate is a quick way to figure your self-employment tax and equals the sum of the 12.4% social security tax and the 2.9% Medicare tax multiplied by 0.9235). See Pub. 505 for more information, especially if your self-employment income multiplied by 0.9235 is over \$160,200.

Payments to nonresident aliens and foreign estates. Do not use Form W-4P. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

Tax relief for victims of terrorist attacks. If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, write "No Withholding" in the space below Step 4(c). See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

Specific Instructions

Step 1(c). Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

Step 2. Use this step if you have at least one of the following: income from a job, income from more than one pension/annuity, and/or a spouse (if married filing jointly) that receives income from a job/pension/annuity. The following examples will assist you in completing Step 2.

Example 1. Bob, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Bob also has a job that pays \$25,000 a year. Bob has no other pensions or annuities. Bob will enter \$25,000 in Step 2(b)(i) and in Step 2(b)(iii).

If Bob also has \$1,000 of interest income, which he entered on Form W-4, Step 4(a), then he will instead enter \$26,000 in Step 2(b)(i) and in Step 2(b)(iii). He will make no entries in Step 4(a) on this Form W-4P.

Example 2. Carol, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Carol does not have a job, but she also receives another pension for \$25,000 a year (which pays less annually than the \$50,000 pension). Carol will enter \$25,000 in Step 2(b)(ii) and in Step 2(b)(iii).

If Carol also has \$1,000 of interest income, then she will enter \$1,000 in Step 4(a) of this Form W-4P.

Example 3. Don, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Don does not have a job, but he receives another pension for \$75,000 a year (which pays more annually than the \$50,000 pension). Don will not enter any amounts in Step 2.

If Don also has \$1,000 of interest income, he won't enter that amount on this Form W-4P because he entered the \$1,000 on the Form W-4P for the higher paying \$75,000 pension.

Example 4. Ann, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Ann also has a job that pays \$25,000 a year and another pension that pays \$20,000 a year. Ann will enter \$25,000 in Step 2(b)(i), \$20,000 in Step 2(b)(ii), and \$45,000 in Step 2(b)(iii).

If Ann also has \$1,000 of interest income, which she entered on Form W-4, Step 4(a), she will instead enter \$26,000 in Step 2(b)(i), leave Step 2(b)(ii) unchanged, and enter \$46,000 in Step 2(b)(iii). She will make no entries in Step 4(a) of this Form W-4P.

If you are married filing jointly, the entries described above do not change if your spouse is the one who has the job or the other pension/annuity instead of you.



Multiple sources of pensions/annuities or jobs. If you (or if married filing jointly, you and/or your spouse) have a job(s), do NOT complete Steps 3 through 4(b)

on Form W-4P. Instead, complete Steps 3 through 4(b) on the Form W-4 for the job. If you (or if married filing jointly, you and your spouse) do not have a job, complete Steps 3 through 4(b) on Form W-4P for **only** the pension/annuity that pays the most annually. Leave those steps blank for the other pensions/annuities.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. Including these credits will increase your payments and reduce the amount of any refund you may receive when you file your tax return.

Form W-4P (2023) Page **3**

Specific Instructions (continued)

Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include amounts from any job(s) or pension/annuity payments. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your pension, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 6, if you expect to claim deductions other than the basic standard deduction on your 2023 tax return and want to reduce your withholding to account for these deductions.

This includes itemized deductions, the additional standard deduction for those 65 and over, and other deductions such as for student loan interest and IRAs.

Step 4(c). Enter in this step any additional tax you want withheld from **each payment**. Entering an amount here will reduce your payments and will either increase your refund or reduce any amount of tax that you owe.

Note: If you don't give Form W-4P to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer will withhold tax from your payments as if your filing status is single with no adjustments in Steps 2 through 4. For payments that began before 2023, your current withholding election (or your default rate) remains in effect unless you submit a new Form W-4P.

	Step 4(b) - Deductions Worksheet (Keep for your records.)		
1	Enter an estimate of your 2023 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income	1	\$
2	Enter: • \$27,700 if you're married filing jointly or a qualifying surviving spouse • \$20,800 if you're head of household • \$13,850 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	If line 3 equals zero, and you (or your spouse) are 65 or older, enter: • \$1,850 if you're single or head of household. • \$1,500 if you're married filing separately. • \$1,500 if you're a qualifying surviving spouse or you're married filing jointly and one of you is under age 65. • \$3,000 if you're married filing jointly and both of you are age 65 or older. Otherwise, enter "-0-". See Pub. 505 for more information	4	s
5	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	5	\$
6	Add lines 3 through 5. Enter the result here and in Step 4(b) on Form W-4P	6	

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request federal income tax withholding from pension or annuity payments based on your filing status and adjustments; (b) request additional federal income tax withholding from your pension or annuity payments; (c) choose not to have federal income tax withheld, when permitted; or (d) change a previous Form W-4P. To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may

also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.