

MONTGOMERY COUNTY EMPLOYEE RETIREMENT PLANS

DRSP Exit/RETIREMENT FORMS - Instructions

- 1. **DRSP Distribution Election Form** select where you want your DRSP account distributed. If you are rolling the DRSP 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

**DRSP 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://interactive2.marylandtaxes.gov/WithholdingCalculator

- 3. 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 for federal tax withholding.
 - 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 Dependents
 - 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

DISCONTINUED RETIREMENT SERVICE PROGRAM (DRSP) - PLAN # 22293 (POLICE) DISTRIBUTION ELECTION FORM

| % L | Direct Rollover to an eligible | retirement plan | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|------------|--|--|--|
| | | Full Name of the P | lan | | | | |
| | | Type of Plan | | | | | |
| | | Account Number | | | | | |
| | You MUST ALSO SUBMIT a copy of a Rollover form from the financial institution OR a letter from the financial institution with the name of the plan and account number. | | | | | | |
| Any post-tax portion of your account will be paid to you. | | | | | | | |
| v | | | | | | | |
| I understand that this election is irrevocable and that I am encouraged to seek the advice of a professional tax advisor or financial consultant. I acknowledge that I have read the Special Tax Notice and have been advised of the tax consequences of my distribution. I further understand that my DSRP account must be closed within 60 days of my exiting the program. You should allow 2 to 4 weeks for processing and receipt of your distribution. | | | | | | | |
| DRSP Exit Date: | | I am over age 50_ | YES (circle | NO one) | | | |
| Employee Name | (Print) | SSI | V | | | | |
| Employee Signature | | Dat | e | | | | |
| Montgomery County | Authorized Signer | | e | | | | |
| _ , , | | 2 44 | | I I | | | |

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.

| ccount Number) |
|---------------------------------------------------------------------------------------------------------------------------------------------|
| , |
| heck must be imprinted posit slips or computer he type of bank account then you must include a ficial that includes your |
| eposit my benefit payments within be required to provide corrected in in full force and effect until yourd you and my Financial Institution |
| by Retirement System (MCERS) all dauthorization. |
| |

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 distribution payments as authorized by Section 10-907(b) of the Tax-General Article of the Annotated Code of Maryland. | | | | |
| | | | | |
| 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



Department of the Treasury

Withholding Certificate for Periodic Pension or Annuity Payments

Give Form W-4P to the payer of your pension or annuity payments.

OMB No. 1545-0074

| nternal Revenue Serv | ice Give Form w-4F to the pa | yer or your pension or annuity payments. | | | | |
|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--|--|--|
| Step 1: | (a) First name and middle initial | Last name | (b) Social security number | | | |
| Enter Personal | Address | | | | | |
| Information | City or town, state, and ZIP code | | | | | |
| | (c) Single or Married filing separately Married filing jointly or Qualifying surviving sp Head of household (Check only if you're unmarri | pouse ied and pay more than half the costs of keeping up a home for yo | urself and a qualifying individual.) | | | |
| | os 2–4 ONLY if they apply to you; otherwise to have no federal income tax withheld (if p | e, skip to Step 5. See pages 2 and 3 for more info permitted). | ormation on each step | | | |
| Step 2: Income From a Job | | from a job or more than one pension/annuity, or (a rom a job or a pension/annuity. See page 2 for ex | | | | |
| and/or | Do only one of the following. | | | | | |
| Multiple | (a) Reserved for future use. | | | | | |
| Pensions/ | (b) Complete the items below. | | | | | |
| Annuities (Including a Spouse's Job/ | (i) If you (and/or your spouse) have or from all jobs, plus any income er | ne or more jobs, then enter the total taxable annu- ntered on Form W-4, Step 4(a), for the jobs les Step 4(b), for the jobs. Otherwise, enter "-0-" . | | | | |
| Pension/ Annuity) | (ii) If you (and/or your spouse) have an this one, then enter the total annual | ny other pensions/annuities that pay less annually ual taxable payments from all lower-paying pensions. | | | | |
| | (iii) Add the amounts from items (i) and | d (ii) and enter the total here | \$ | | | |
| | TIP: To be accurate, submit a new Form V withholding since 2021 or this is a new pe | W-4P for all other pensions/annuities if you haven' ension/annuity that pays less than the other(s). Subwithholding since 2019. If you have self-employment | t updated your omit a new Form W-4 for | | | |
| Complete Step Steps 3-4(b) or | | d this pension/annuity pays the most annually. Oth | nerwise, do not complete | | | |
| Step 3: | If your total income will be \$200,000 or les | ss (\$400,000 or less if married filing jointly): | | | | |
| Claim | Multiply the number of qualifying child | ren under age 17 by \$2,000 \$ | | | | |
| Dependent and Other | Multiply the number of other depender | nts by \$500 <u>\$</u> | | | | |
| Credits | Add other credits, such as foreign tax cred | dit and education tax credits \$ | | | | |
| | | other dependents, and other credits and enter the | 3 \$ | | | |
| Step 4 (optional): Other Adjustments | on other income you expect this year | sion/annuity payments). If you want tax withheld that won't have withholding, enter the amount of nterest, taxable social security, and dividends . | | | | |
| | | ductions other than the basic standard deduction, use the Deductions Worksheet on page 3 and | | | | |
| | (c) Extra withholding. Enter any additions | al tax you want withheld from each payment . | 4(e) \$ | | | |
| | (d) No taxes withheld from your pens | - | | | | |
| Step 5: | | | | | | |
| Sign Here | Your signature (This form is not valid unless | s you sign it.) Dat | re | | | |
| | | | · | | | |

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)(ii), \$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 | 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 | | \$ |
| 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.