

## INSTRUCTIONS

This State Tax Withholding Form should be completed when there is a mandatory withholding requirement of your state. Your completed form can be returned to the AFTRA Retirement Fund using any of the following:



### By Portal

1. Scan or save a copy of the completed form to your device.  
Acceptable formats: .jpeg, .pdf, .png, .tiff.
2. Select choose file(s) and upload the completed form.
3. Confirm that the attachment is shown in your inquiry.
4. Submit your inquiry.

You will receive a confirmation email that your inquiry was submitted successfully.



By Mail

AFTRA Retirement Fund  
Retirement Services Dept.  
1411 Broadway, Suite 1850  
New York, NY 10018-3496



By Email

retirement@aftraretirement.org



By Fax

(212) 499-4928

## PARTICIPANT INFORMATION

### Legal Name

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Address Line 1: \_\_\_\_\_ Apt/Unit/Suite/Floor: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ ZIP Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone No.: (XXX) XXX-XXXX \_\_\_\_\_ Cell No.: (XXX) XXX-XXXX \_\_\_\_\_

Email Address: \_\_\_\_\_

## STATE INCOME TAX WITHHOLDING

### State tax is mandatory for the following states when there is Federal Tax Election:

Arkansas, Connecticut, Delaware, Iowa, Kansas, Maine, Maryland, Massachusetts, Mississippi, Nebraska, North Carolina, Oklahoma, Vermont, Virginia, and Washington DC.

### State tax is mandatory when there is a Federal Tax Election for the following states:

California, Connecticut, Georgia, Michigan, and Oregon.

Withholding State: \_\_\_\_\_

### Please check the appropriate box:

A.  Please check here if you **do not want** any state income tax withheld from your pension or annuity.

B.  Fixed monthly dollar amount: \$ \_\_\_\_\_

C.  Please calculate and withhold:

Marital Status:  Single  Married Number of allowances: \_\_\_\_\_ Additional amount (if any) \$ \_\_\_\_\_

Please contact your tax or legal adviser to determine your income tax withholding requirements. If you reside in a state that has mandatory withholdings and you have chosen not to withhold state taxes from your monthly benefit, you will be responsible for paying the mandatory taxes directly to that state.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_