

Wyoming Retirement System FEDERAL INCOME TAX WITHHOLDING

Name: _____ Social Security #: _____

Address: _____

City: _____ State: _____ Zip: _____

Check box if new address

- I am retiring soon. My INITIAL withholding is as follows; **OR**
- I am already retired. Please CHANGE my current withholding as follows:

Please check the box(es) that apply to your tax status

1. I want to have WRS calculate my withholding based on current IRS tax tables. I realize that even though I have chosen this option, my monthly benefit may not be subject to taxation.
 - Filing Status (*please circle one*)Married or Single
 - Exemptions Claimed (*please circle one*) 0 1 2 3 4 5 6 7 8 9 10
2. Withhold \$ _____ per month IN ADDITION to the amount I am currently having withheld.
3. Withhold \$ _____ of my taxable benefit each month (TOTAL amount)
4. Withhold _____ % (percent) of my taxable benefit each month.
5. I do NOT want federal withholding tax deducted from my retirement benefit. I understand I am liable for the payment of federal income tax on the taxable portion of my benefit. If my payments of estimated tax are not adequate, I understand I may be subjected to tax penalties under the estimated tax payment rules.

Signature X _____ **Date** _____

- Each January you will receive a 1099-R form (Distributions from Retirement Plans) for federal income tax purposes.
- You may update your tax information anytime by **written** instruction to the Wyoming Retirement System. If you are making a change, please return this form by the 20th of any month.

WRS Office Use Only
Entered: _____ Verified: _____