



Salem Contributory Retirement Board

20 Central Street, Suite 110

Salem, MA 01970

Phone number (978) 745-8983 * Fax number (978) 745-4216

SUBSTITUTE W-4P TAX FORM

Your monthly retirement allowance is taxable on the federal level and as long as you live in Massachusetts or one of fifteen other states, it is not taxable on the state level. Use this form to indicate how you would like your federal tax withheld. How you indicate you would like your federal tax withheld will remain in effect until you change it with the Plymouth County Retirement Association by completing a new Substitute W-4P Tax Form.

Name _____ SS# XXX - XX - _____

Address _____

City _____ State _____ Zip _____

Home Phone(_____) _____ - _____ Cell Phone(_____) _____ - _____

E-mail _____

PLEASE CHECK ONE ONLY

I do **not** want any federal income taxes to be withheld from my check. If elected, I acknowledge that I am responsible for payment of estimated taxes and may be subject to tax penalties under the IRS's estimated tax rules.

I want federal income taxes withheld based on the IRS tax tables and the marital status and the number of exemptions claimed. I understand that the amount of taxes may change if the IRS tax tables are adjusted. Please complete the rest of this section.

Single Married Married, but withhold at a higher single rate

Number of exemptions claimed

Additional amount to be withheld (if any) \$

I want my federal income taxes withheld in a flat amount per month \$

Applicant's Signature _____ **Date** _____