



THE CITY OF BALTIMORE
 EMPLOYEES' AND ELECTED OFFICIALS'
 RETIREMENT SYSTEMS

7 East Redwood Street -- 13th Floor
 Baltimore, Maryland 21202-3470
 Phone 443-984-3200
 Fax 410-528-8428

FORM W-4P WITHHOLDING CERTIFICATE

INSTRUCTIONS

- Use this form to tell the Employees' and Elected Officials' Retirement System ("ERS") how much state and federal tax to withhold from each monthly benefit payment.
- Select **one** of three options. You may only choose one.
- Option 1 is to have **\$0 in taxes withheld** from your monthly payment.
- Option 2 is to have **ERS calculate your tax withholding**. Indicate your marital status and number of exemptions.
 - You may **also** have ERS withhold extra money in addition to ERS's calculation. Write \$0 if you do not want ERS to withhold extra money.
- Option 3 is to **tell ERS how much** you want withheld. This option is available for Maryland state taxes only.
- **Please submit at least 30 days before the effective date.**

Social Security Number	Last Name	First Name	Middle Initial
		Federal	State
<input type="checkbox"/> 1. I elect not to have taxes withheld from my monthly pension.			
<input type="checkbox"/> 2. I want the taxes from my monthly pension to be calculated using the number of exemptions and marital status listed here. <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married but withhold at higher single rate I also want an additional amount withheld from my monthly pension.		# Exemptions	# Exemptions
		\$ _____	\$ _____
<input type="checkbox"/> 3. I want the following flat amount of money taken from my monthly pension.			\$ _____
<input type="checkbox"/> Check if this is a change of address.	Signature		Date
	Address		Phone
	City	State	Zip

FOR ERS USE ONLY
 PENSION # _____
 DATE RECEIVED _____