



**FEDERAL INCOME TAX Substitute Form W-4P**  
**Withholding Certificate for Pension or Annuity Payment**

**SECTION 1 - RETIREE INFORMATION**

RETIREMENT PLAN TYPE (Mark X in Appropriate Box)

- |                          |   |                          |   |
|--------------------------|---|--------------------------|---|
| <input type="checkbox"/> | Employees' Retirement System (ERS)                | <input type="checkbox"/> | Georgia Judicial Retirement System (GJRS) |
| <input type="checkbox"/> | Public School Employees Retirement System (PSERS) | <input type="checkbox"/> | Georgia Military Pension Fund (GMPF)      |
| <input type="checkbox"/> | Georgia Legislative Retirement System (LRS)       | <input type="checkbox"/> | Georgia Defined Contribution Plan (GDGP)  |

Name: \_\_\_\_\_ SSN: --  
(Last) (First) (MI) (Maiden)

Daytime Phone Number: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

**SECTION 2 - TAX OPTIONS**

**INSTRUCTIONS:**

- A. Indicate the appropriate tax options.  
 B. Caution: Specific questions regarding the withholding of Federal income tax should be directed to the person who prepares your return or to the Internal Revenue Service (IRS). The toll free number for IRS is 1-800-829-1040. Remember that there are penalties for not paying enough tax during the year, either through withholding or estimated tax payments. Pub. 505 (available from IRS) explains the estimated tax requirements and penalties in detail.

**FILING STATUS:** \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Married at the Higher Single Rate

**EXEMPTIONS:** I claim \_\_\_\_\_ total dependents/ exemptions/allowances

**SECTION 3 - WITHHOLDING OPTIONS**

**INSTRUCTIONS:**

- A. Please refer to the instructions on page 2 of this form, then choose all that apply.  
 B. Federal Income Tax will be withheld from any benefits you receive from this system using minimum tax tables unless you elect NOT to have the tax withheld.

- \_\_\_\_ 1. Do **NOT** withhold Federal income tax from my monthly benefit. (Do not complete lines 2 or 3.)
- \_\_\_\_ 2. Withhold from each monthly benefit payment an amount to be figured using the filing status and the number of exemptions I listed above.
- \_\_\_\_ 3. Withhold the following additional amount from each monthly benefit payment: \$ \_\_\_\_\_.  
 NOTE: Choose only if line 2 is completed.

**SECTION 4 - SIGNATURE**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ERSGA USE ONLY**

Retirement Number: \_\_\_\_\_ Date Verified: \_\_\_\_\_ Initials: \_\_\_\_\_

**FEDERAL INCOME TAX**  
Withholding Certificate for Pension or Annuity Payments

SECTION 3 INSTRUCTIONS

1. Choose this option if you do not want any tax withheld from your benefit check.
2. Choose this option if you wish to withhold taxes based on Internal Revenue Service tax tables using the filing status and the number of exemptions you listed.
3. Choose this option if you wish to have an additional specific dollar amount withheld.  
NOTE: Choose only if line 2 is completed.

---

Your choice is effective until you notify us in writing on another W-4P. For a change to be effective for a particular month, the request must be received by the 18th of the month. You may revoke or change this form at any time.

---

Employees' Retirement System of Georgia  
Two Northside 75 Suite 300  
Atlanta, GA 30318-7778  
Local (404) 350-6300  
Toll Free 1-800-805-4609  
[www.ers.ga.gov](http://www.ers.ga.gov)