

Tax Withholding Elections

Personal Information

Name (printed)

Home address

City

State

Zip

Social Security Number (only last four digits) XXX-XX-

Federal Tax Withholding

Choose **ONLY ONE** of the three options below:

☐ Do not withhold any federal tax from my pension payments

☐ Withhold a flat amount per month of \$ _____

The Internal Revenue Service tax withholding calculator can be found at <https://apps.irs.gov/app/withholdingcalculator/>
Divide the result by 12 for monthly withholding. This option provides the most accurate withholding.

☐ Withhold based on (check one) _____ Single _____ Married

I am claiming this number of exemptions _____

I also want this additional amount withheld \$ _____

Oregon State Tax Withholding

Choose **ONLY ONE** of the three options below:

☐ Do not withhold any Oregon tax from my pension payments

☐ Withhold a flat amount per month of \$ _____

The Oregon Department of Revenue tax withholding calculator can be found at <https://revenueonline.dor.oregon.gov/tap/>
Divide the result by 12 for monthly withholding. This option provides the most accurate withholding.

☐ Withhold based on (check one) _____ Single _____ Married

I am claiming this number of exemptions _____

I also want this additional amount withheld \$ _____

Note

If you do not make any tax withholding elections FPDR is required to withhold taxes based on single with zero exemptions. You may change your tax withholding at any time with this form or online at the FPDR portal. Changes may take up to 30 days to be in effect.

Signature _____ Date _____

Please sign and mail, fax, or email form to FPDR.

