

The Webinar will be starting shortly



 **Collin W. Fritz**
and Associates, Ltd.
"The Pension Specialists"

IRA WITHHOLDING RULES

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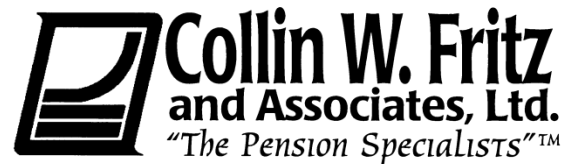


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Federal Withholding Procedures

- ➔ • Overview
 - Generally only applies to traditional, SEP and SIMPLE IRAs
 - Special Discussion – Roth IRAs

IRA Withholding Rules

- Overview
 - Generally only applies to traditional, SEP and SIMPLE IRAs
 - Before withholding from a Roth IRA, check with your Legal and Compliance Counsel



IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA, SEP, and SIMPLE distribution unless an election is properly completed
 - This is withholding **NOT** the collection of an IRS penalty
 - Remember, Qualified Retirement Plan distributions have 20% **MANDATORY** withholding



IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA, SEP, and SIMPLE distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed



Future developments. For the latest information about any future developments related to Form W-4P, such as legislation enacted after it was published, go to www.irs.gov/FormW4P.

Purpose. Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of federal income tax to withhold from your payment(s). You also may use Form W-4P to choose (a) not to have any federal income tax withheld from the payment (except for eligible rollover distributions or for payments to U.S. citizens to be delivered outside the United States or its possessions) or (b) to have an additional amount of tax withheld.

Your options depend on whether the payment is periodic, nonperiodic, or an eligible rollover distribution, as explained on pages 2 and 3. Your previously filed Form W-4P will remain in effect if you don't file a Form W-4P for 2019.

General Instructions

Section references are to the Internal Revenue Code.

Follow these instructions to determine the number of withholding allowances you should claim for pension or annuity payment withholding for 2019 and any additional amount of tax to have withheld. Complete the worksheet(s) using the taxable amount of the payments.

If you don't want any federal income tax withheld (see *Purpose*, earlier), you can skip the worksheets and go directly to the Form W-4P below.

Sign this form. Form W-4P is not valid unless you sign it.

You can also use the calculator at www.irs.gov/W4App to determine your tax withholding more accurately. Consider using this calculator if you have a more complicated tax situation, such as if you have more than one pension or annuity, a working spouse, or a large amount of income outside of your pensions. After your Form W-4P takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2019. If you use the calculator, you don't need to complete any of the worksheets for Form W-4P.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax

withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple pensions or more than one income. If you have more than one source of income subject to withholding (such as more than one pension or a pension and a job, or you're married filing jointly and your spouse is working), read all of the instructions, including the instructions for the Multiple Pensions/More-Than-One-Income Worksheet, before beginning.

Other income. If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. See Pub. 505, Tax Withholding and Estimated Tax, for more information. Get Form 1040-ES and Pub. 505 at www.irs.gov/FormsPub5. Or, you can use the Deductions, Adjustments, and Additional Income Worksheet on page 5 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your payments. If you have income from wages, see Pub. 505 or use the calculator at www.irs.gov/W4App to find out if you should adjust your withholding on Form W-4 or Form W-4P.

Note: Social security and railroad retirement payments may be includible in income. See Form W-4V, Voluntary Withholding Request, for information on voluntary withholding from these payments.

Withholding From Pensions and Annuities

Generally, federal income tax withholding applies to the taxable part of payments made from pension, profit-sharing, stock bonus, annuity, and certain deferred compensation plans; from individual retirement arrangements (IRAs); and from commercial annuities. The method and rate of withholding depend on (a) the kind of payment you receive; (b) whether the payments are to be delivered outside the United States or its possessions; and (c) whether the recipient is a nonresident alien individual, a nonresident alien beneficiary, or a foreign estate. Qualified distributions from a Roth IRA are nontaxable and, therefore, not subject to withholding. See page 3 for special withholding rules that apply to payments to be delivered outside the United States and payments to foreign persons.

----- Separate here and give Form W-4P to the payer of your pension or annuity. Keep the worksheet(s) for your records. -----

► For Privacy Act and Paperwork Reduction Act Notice, see page 6.

Your first name and middle initial	Last name	Your social security number
Home address (number and street or rural route)		Claim or identification number (if any) of your pension or annuity contract
City or town, state, and ZIP code		

Complete the following applicable lines.

- Check here if you do **not** want any federal income tax withheld from your pension or annuity. (Don't complete line 2 or 3.)
- Total number of allowances and marital status you're claiming for withholding from each **periodic** pension or annuity payment. (You also may designate an additional dollar amount on line 3.) ►
Marital status: Single Married Married, but withheld at higher Single rate. (Enter number of allowances.)
- Additional amount, if any, you want withheld from each pension or annuity payment. (**Note:** For periodic payments, you can't enter an amount here without entering the number (including zero) of allowances on line 2.) ► \$

Your signature ► _____ Date ► _____

Because your tax situation may change from year to year, you may want to refigure your withholding each year. You can change the amount to be withheld by using lines 2 and 3 of Form W-4P.

Choosing not to have income tax withheld. You (or in the event of death, your beneficiary or estate) can choose not to have federal income tax withheld from your payments by using line 1 of Form W-4P. For an estate, the election to have no income tax withheld may be made by the executor or personal representative of the decedent. Enter the estate's employer identification number (EIN) in the area reserved for "Your social security number" on Form W-4P.

You may not make this choice for eligible rollover distributions. See *Eligible rollover distribution—20% withholding* below.

Caution: There are penalties for not paying enough federal income tax during the year, either through withholding or estimated tax payments. New retirees, especially, should see Pub. 505. It explains your estimated tax requirements and describes penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.

Periodic payments. Withholding from periodic payments of a pension or annuity is figured in the same manner as withholding from wages. Periodic payments are made in installments at regular intervals over a period of more than 1 year. They may be paid annually, quarterly, monthly, etc.

If you want federal income tax to be withheld, you must designate the number of withholding allowances on line 2 of Form W-4P and indicate your marital status by checking the appropriate box. You can't designate a specific dollar amount to be withheld. However, you can designate an additional amount to be withheld on line 3.

If you don't want any federal income tax withheld from your periodic payments, check the box on line 1 of Form W-4P and submit the form to your payer. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 3.

Caution: If you don't submit Form W-4P to your payer, the payer must withhold on periodic payments as if you're married claiming three withholding allowances. Generally, this means that tax will be withheld if the taxable amount of your pension or annuity is at least \$2,033 a month.

If you submit a Form W-4P that doesn't contain your correct social security number (SSN), the payer must withhold as if

you're single claiming zero withholding allowances even if you checked the box on line 1 to have no federal income tax withheld.

There are some kinds of periodic payments for which you can't use Form W-4P because they're already defined as wages subject to federal income tax withholding. These payments include retirement pay for service in the U.S. Armed Forces and payments from certain nonqualified deferred compensation plans and tax-exempt organizations' deferred compensation plans described in section 457. Your payer should be able to tell you whether Form W-4P applies.

For periodic payments, your Form W-4P stays in effect until you change or revoke it. Your payer must notify you each year of your right to choose not to have federal income tax withheld (if permitted) or to change your choice.

Nonperiodic payments—10% withholding. Your payer must withhold at a flat 10% rate from the taxable amount of nonperiodic payments (but see *Eligible rollover distribution—20% withholding* below) unless you choose not to have federal income tax withheld. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. You can choose not to have federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct SSN) to your payer and checking the box on line 1. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 3. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. You can't use line 2 for nonperiodic payments. But you may use line 3 to specify an additional amount that you want withheld.

Caution: If you submit a Form W-4P that doesn't contain your correct SSN, the payer can't honor your request not to have income tax withheld and must withhold 10% of the payment for federal income tax.

Eligible rollover distribution—20% withholding. Distributions you receive from qualified pension or annuity plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a flat 20% federal withholding rate on the taxable amount of the distribution. The 20% withholding rate is required, and you can't choose not to have income tax withheld from eligible rollover distributions. Don't give Form W-4P to your payer unless you want an additional amount withheld. In that case, complete line 3 of Form W-4P and submit the form to your payer.

Note: The payer won't withhold federal income tax if the entire distribution is transferred by the plan administrator in a direct rollover to a traditional IRA or another eligible retirement plan (if allowed by the plan), such as a 401(k) plan, qualified pension plan, governmental section 457(b) plan, section 403(b) contract, or tax-sheltered annuity.

Distributions that are (a) required by federal law, (b) one of a specified series of equal payments, or (c) qualifying "hardship" distributions are **not** "eligible rollover distributions" and aren't subject to the mandatory 20% federal income tax withholding. See Pub. 505 for details. See also *Nonperiodic payments—10% withholding* on page 2.

Tax relief for victims of terrorist attacks. For tax years ending after September 10, 2001, disability payments for injuries incurred as a direct result of a terrorist attack directed against the United States (or its allies), whether outside or within the United States, aren't included in income. You may check the box on line 1 of Form W-4P and submit the form to your payer to have no federal income tax withheld from these disability payments. However, you must include in your income any amounts that you received or you would've received in retirement had you not become disabled as a result of a terrorist attack. See Pub. 3920, *Tax Relief for Victims of Terrorist Attacks*, for more details.

Changing Your "No Withholding" Choice

Periodic payments. If you previously chose not to have federal income tax withheld and you now want withholding, complete another Form W-4P and submit it to your payer. If you want federal income tax withheld at the 2019 default rate (married with three allowances), write "Revoked" next to the checkbox on line 1 of the form. If you want tax withheld at any different rate, complete line 2 on the form.

Nonperiodic payments. If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to the checkbox on line 1 and submit Form W-4P to your payer.

Payments to Foreign Persons and Payments To Be Delivered Outside the United States

Unless you're a nonresident alien, withholding (in the manner described above) is required on any periodic or nonperiodic payments that are to be delivered to you outside the United States or its possessions. Don't check the box on line 1 of Form W-4P. See Pub. 505 for details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% federal withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding even if no tax treaty applies. See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*, and Pub. 519, *U.S. Tax Guide for Aliens*, for details. A foreign person should submit Form W-8BEN, *Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting*, to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's taxpayer identification number (TIN).

Statement of Federal Income Tax Withheld From Your Pension or Annuity

By January 31 of next year, your payer will furnish a statement to you on Form 1099-R, *Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.*, showing the total amount of your pension or annuity payments and the total federal income tax withheld during the year. If you're a foreign person who has provided your payer with Form W-8BEN, your payer instead will furnish a statement to you on Form 1042-S, *Foreign Person's U.S. Source Income Subject to Withholding*, by March 16 of next year.

Specific Instructions

Personal Allowances Worksheet

Complete this worksheet on page 4 first to determine the number of withholding allowances to claim.

Line C. Head of household please note: Generally, you can claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Line E. Child tax credit. When you file your tax return, you may be eligible to claim a child tax credit for each of your eligible children. To qualify, the child must be under age 17 as of December 31, must be your dependent who lives with you for more than half the year, and must have a valid social security number. To learn more about this credit, see Pub. 972, *Child Tax Credit*. To reduce the tax withheld from your payments by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your pensions, wages, and other income, including income earned by a spouse, if you are filing a joint return.

Line F. Credit for other dependents. When you file your tax return, you may be eligible to claim a credit for other dependents for whom a child tax credit cannot be claimed, such as a qualifying child who does not meet the age or social security number requirement for the child tax credit, or a qualifying relative. To learn more about this credit, see Pub. 972. To reduce the tax withheld from your payments by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total income includes all of your pensions, wages, and other income, including income earned by a spouse, if you are filing a joint return.

Line G. Other credits. You may be able to reduce the tax withheld from your payments if you expect to claim other tax credits, such as tax credits for education (see Pub. 970). If you do so, your payments will be larger, but the amount of any refund that you receive when you file your tax return will be smaller. Follow the instructions for Worksheet 1-6 in Pub. 505 if you want to reduce your withholding to take these credits into account. Enter "-0-" on lines E and F if you use Worksheet 1-6.

Deductions, Adjustments, and Additional Income Worksheet

Complete this worksheet to determine if you're able to reduce the tax withheld from your pension or annuity payments to account for your itemized deductions and other adjustments to income, such as IRA contributions. If you do so, your refund at the end of the year will be smaller, but your payments will be larger. You're not required to complete this worksheet or reduce your withholding if you don't wish to do so.

You can also use this worksheet to figure out how much to increase the tax withheld from your payments if you have a large amount of other income not subject to withholding, such as interest, dividends, or capital gains.

Another option is to take these items into account and make your withholding more accurate by using the calculator at www.irs.gov/W4A00. If you use the calculator, you don't need to complete any of the worksheets for Form W-4P.

Multiple Pensions/More-Than-One-Income Worksheet

Complete this worksheet if you receive more than one pension, if you have a pension and a job, or if you're married filing jointly and have a working spouse or a spouse who receives a pension. If you don't complete this worksheet, you might have too little tax withheld. If so, you will owe tax when you file your tax return and may be subject to a penalty.

Figure the total number of allowances you're entitled to claim and any additional amount of tax to withhold on all pensions using worksheets from only one Form W-4P. Claim all allowances on the Form W-4P that you or your spouse file for the highest paying pension in your family and claim zero allowances on Forms W-4P filed for all other pensions. For example, if you receive \$60,000 from your pension per year and your spouse

receives \$20,000 from a pension, you should complete the worksheets to determine what to enter on lines 2 and 3 of your Form W-4P, and your spouse should enter zero ("0") on lines 2 and 3 of his or her Form W-4P. See Pub. 505 for details.

Another option is to use the calculator at www.irs.gov/W4App to figure your withholding more precisely.

Personal Allowances Worksheet (Keep for your records.)	
A Enter "1" for yourself	A _____
B Enter "1" if you will file as married filing jointly	B _____
C Enter "1" if you will file as head of household	C _____
D Enter "1" if: {	D _____
• You're single, or married filing separately, and have only one pension; or	}
• You're married filing jointly, have only one pension, and your spouse has no income subject to withholding; or	
• Your income from a second pension or a job or your spouse's pension or wages (or the total of all) are \$1,500 or less.	
E Child tax credit. See Pub. 972, Child Tax Credit, for more information.	
• If your total income will be less than \$71,201 (\$103,351 if married filing jointly), enter "4" for each eligible child.	
• If your total income will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "2" for each eligible child.	
• If your total income will be from \$179,051 to \$200,000 (\$345,851 to \$400,000 if married filing jointly), enter "1" for each eligible child.	
• If your total income will be higher than \$200,000 (\$400,000 if married filing jointly), enter "-0-"	E _____
F Credit for other dependents. See Pub. 972, Child Tax Credit, for more information.	
• If your total income will be less than \$71,201 (\$103,351 if married filing jointly), enter "1" for each eligible dependent.	
• If your total income will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "1" for every two dependents (for example, "-0-" for one dependent, "1" if you have two or three dependents, and "2" if you have four dependents).	
• If your total income will be higher than \$179,050 (\$345,850 if married filing jointly), enter "-0-"	F _____
G Other credits. If you have other credits, see Worksheet 1-6 of Pub. 505 and enter the amount from that worksheet here. If you use Worksheet 1-6, enter "-0-" on lines E and F	G _____
H Add lines A through G and enter the total here	H _____
For accuracy, complete all worksheets that apply.	
• If you plan to itemize or claim adjustments to income and want to reduce your withholding, or if you have a large amount of other income not subject to withholding and want to increase your withholding, see the Deductions, Adjustments, and Additional Income Worksheet , later.	
• If you have more than one source of income subject to withholding or are married filing jointly and you and your spouse both have income subject to withholding and your combined income from all sources exceeds \$53,000 (\$24,450 if married filing jointly), see the Multiple Pensions/More-Than-One-Income Worksheet on page 5 to avoid having too little tax withheld.	
• If neither of the above situations applies, stop here and enter the number from line H on line 2 of Form W-4P above.	

Deductions, Adjustments, and Additional Income Worksheet

Note: Use this worksheet *only* if you plan to itemize deductions, claim certain adjustments to income, or have a large amount of other income not subject to withholding.

- 1 Enter an estimate of your 2019 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 10% of your income. See Pub. 505 for details **1** \$ _____
- 2 Enter: $\left\{ \begin{array}{l} \$24,400 \text{ if you're married filing jointly or qualifying widow(er)} \\ \$18,350 \text{ if you're head of household} \\ \$12,200 \text{ if you're single or married filing separately} \end{array} \right\}$ **2** \$ _____
- 3 **Subtract** line 2 from line 1. If zero or less, enter "-0-" **3** \$ _____
- 4 Enter an estimate of your 2019 adjustments to income, qualified business income deduction, and any additional standard deduction for age or blindness (see Pub. 505 for information about these items) **4** \$ _____
- 5 **Add** lines 3 and 4 and enter the total **5** \$ _____
- 6 Enter an estimate of your 2019 other income not subject to withholding (such as dividends, interest, or capital gains) **6** \$ _____
- 7 **Subtract** line 6 from line 5. If zero, enter "-0-". If less than zero, enter the amount in parentheses **7** \$ _____
- 8 **Divide** the amount on line 7 by \$4,200 and enter the result here. If a negative amount, enter in parentheses. Drop any fraction **8** _____
- 9 Enter the number from the **Personal Allowances Worksheet**, line H, page 4 **9** _____
- 10 **Add** lines 8 and 9 and enter the total here. If zero or less, enter "-0-". If you plan to use the **Multiple Pensions/More-Than-One-Income Worksheet**, also enter this total on line 1 below. Otherwise, **stop here** and enter this total on Form W-4P, line 2, page 1 **10** _____

Multiple Pensions/More-Than-One-Income Worksheet

Note: Use this worksheet *only* if the instructions under line H from the **Personal Allowances Worksheet** direct you here. This applies if you (and your spouse if married filing jointly) have more than one source of income subject to withholding (such as more than one pension, or a pension and a job, or you have a pension and your spouse works).

- 1 Enter the number from the **Personal Allowances Worksheet**, line H, page 4 (or from line 10 above if you used the **Deductions, Adjustments, and Additional Income Worksheet**) **1** _____
- 2 Find the number in **Table 1** below that applies to the **LOWEST** paying pension or job and enter it here. However, if you're married filing jointly and the amount from the highest paying pension or job is \$75,000 or less and the combined amounts for you and your spouse are \$107,000 or less, do not enter more than "3" **2** _____
- 3 If line 1 is **more than or equal to** line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4P, line 2, page 1. **Do not** use the rest of this worksheet **3** _____

Note: If line 1 is **less than** line 2, enter "-0-" on Form W-4P, line 2, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.

- 4 Enter the number from line 2 of this worksheet **4** _____
- 5 Enter the number from line 1 of this worksheet **5** _____
- 6 **Subtract** line 5 from line 4 **6** _____
- 7 Find the amount in **Table 2** below that applies to the **HIGHEST** paying pension or job and enter it here **7** \$ _____
- 8 **Multiply** line 7 by line 6 and enter the result here. This is the additional annual withholding needed **8** \$ _____
- 9 **Divide** line 8 by the number of payments remaining in 2019. For example, divide by 8 if you're paid every month and you complete this form in April 2019. Enter the result here and on Form W-4P, line 3, page 1. This is the additional amount to be withheld from each payment **9** \$ _____

Table 1

Table 2

Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from LOWEST paying job or pension are—	Enter on line 2 above	If wages from LOWEST paying job or pension are—	Enter on line 2 above	If wages from HIGHEST paying job or pension are—	Enter on line 7 above	If wages from HIGHEST paying job or pension are—	Enter on line 7 above
\$0 - \$5,000	0	\$0 - \$7,000	0	\$0 - \$24,900	\$420	\$0 - \$7,200	\$420
5,001 - 9,500	1	7,001 - 13,000	1	24,901 - 84,450	500	7,201 - 35,975	500
9,501 - 19,500	2	13,001 - 27,500	2	84,451 - 173,900	910	35,976 - 81,700	910
19,501 - 35,000	3	27,501 - 32,000	3	173,901 - 326,950	1,000	81,701 - 158,225	1,000
35,001 - 40,000	4	32,001 - 40,000	4	326,951 - 413,700	1,330	158,226 - 201,600	1,330
40,001 - 46,000	5	40,001 - 60,000	5	413,701 - 617,850	1,450	201,601 - 507,800	1,450
46,001 - 55,000	6	60,001 - 75,000	6	617,851 and over	1,540	507,801 and over	1,540
55,001 - 60,000	7	75,001 - 85,000	7				
60,001 - 70,000	8	85,001 - 95,000	8				
70,001 - 75,000	9	95,001 - 100,000	9				
75,001 - 85,000	10	100,001 - 110,000	10				
85,001 - 95,000	11	110,001 - 115,000	11				
95,001 - 125,000	12	115,001 - 125,000	12				
125,001 - 155,000	13	125,001 - 135,000	13				
155,001 - 165,000	14	135,001 - 145,000	14				
165,001 - 175,000	15	145,001 - 160,000	15				
175,001 - 180,000	16	160,001 - 180,000	16				
180,001 - 195,000	17	180,001 and over	17				
195,001 - 205,000	18						
205,001 and over	19						

Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. You're required to provide this information only if you want to (a) request federal income tax withholding from periodic pension or annuity payments based on your withholding allowances and marital status; (b) request additional federal income tax withholding from your pension or annuity; (c) choose not to have federal income tax withheld, when permitted; or (d) change or revoke a previous Form W-4P. To do any of the aforementioned, you're required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths

and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You're not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

Custodian/Trustee (Payer)

Name _____

Address _____

City _____ State _____ Zip _____

Attn: _____

Accountholder (Payee)

Name _____ Date of Birth: _____

SSN _____ IRA Acct #: _____

Beneficiary (Other Payee) (Complete only if the distribution is made to the beneficiary. Use separate form for each beneficiary.)

Name _____

Address _____

City _____ State _____ Zip _____

SSN _____ or TIN _____

A beneficiary may use Form 204 to make his or her election as to how the funds will be paid out to comply with the rules of IRC 408(a)(6).

Reason for Withdrawal/Distribution (Check One)

I certify the reason for my distribution by checking the appropriate box below which best describes the reason for this withdrawal.

- Before Age 59 1/2 and No Known Exception or on account of a distribution to a qualifying military reservist, certain medical expenses, education expenses, payment of health insurance premiums, first time home buyer expenses or one lifetime transfer/direct rollover to an HSA.
- Before Age 59 1/2 but an Exception Applies (check one)
 - Conversion/Rollover to a Roth IRA IRS Levy
 - Substantially Equal Schedule (certification to be furnished)
- Disability (certification to be furnished)
- Death (payment to beneficiary from beneficiary IRA) _____ (Initials)
If I am a nonspouse beneficiary of an inherited IRA, I acknowledge that I will never be eligible to roll over any IRA distribution, but a transfer to another inherited IRA would be permissible.
- On or After Age 59 1/2 (a normal distribution)
 - Conversion/Rollover to a Roth IRA Qualified Charitable Distribution
 - One Lifetime Transfer/Direct Rollover to an HSA (use certification form 66-HSA)
- Election to Revoke. I established my IRA on _____ I now revoke. The amount of earnings distributed, if any, is _____.
- Transfer to Other Custodian/Trustee (Name): _____
(A transfer form must be completed)
- Transfer to the IRA of the Accountholder's Spouse Due to Divorce/Legal Separation
- Transfer to the IRA of Accountholder's Spouse Due to Election to Treat as Own
- Transfer to Inherited IRA of Beneficiary
- Other Special Code: _____ Choose from 5, 8, G, K, N, P or R as described on the reverse side. Complete below if applicable.
Current-Year Contribution including an excess contribution for the current year: On _____ I made a contribution of \$ _____ and I now elect to withdraw the indicated portion of \$ _____ and the allocable earnings are: \$ _____. Such income is taxable on my tax return for the year in which the contribution was made.
 From SIMPLE IRA and 2-year rule not met. Use code(S).
- Other _____

Notice of Rollover Rights — You will not be required to include your distribution in your income if you rollover your IRA distribution. You are authorized to only rollover one IRA distribution within a one-year period commencing on the date of the distribution regardless of the number or types of IRAs you have.

Many distributions from a traditional IRA, SEP IRA or SIMPLE IRA are eligible to be rolled over. One must comply with the once per year rule and the 60 day rule. However, some distributions are ineligible to be rolled over. A required distribution is ineligible to be rolled over. You must determine if you are eligible to rollover this distribution. You should discuss with your tax adviser before taking the distribution. The tax laws do not authorize a non-spouse beneficiary to rollover funds distributed from an inherited IRA. See the reverse for an additional discussion of what rules must be met in order to roll over the distribution.

Status of Payee (Do not use this form for a distribution to a nonresident alien)

U.S. Citizen, or Resident Alien

Financial Information

Date of Distribution: _____

Type of Distribution:

Nonperiodic or

Periodic (I hereby instruct you to pay my IRA account balance to me as follows): _____

I certify that these payments satisfy, or will satisfy, the minimum distribution requirements of Code section 408(a)(6) if applicable. I understand my election is revocable.

Method of Payment:

Issue check to me.

Deposit to my checking account # _____

Deposit to my savings account # _____

Other _____

	Investment Account #	Investment Account #
Amount Requested	(+)	_____
Earnings Not Yet Reported to DP	(+)	_____
Early Surrender Fee	(-)	_____
Other Fees	(-)	_____
Net Amount	(=)	_____
Fed. WH	(-)	_____
State WH	(-)	_____
Actual Amount Received or Transferred	(=)	_____

Read – Important Distribution and Withholding Information –

I understand this distribution has income tax consequences and I should consult a tax advisor as necessary. I understand this information will be used by the custodian/trustee, if required, to prepare the IRS information return Form 1099-R, which will be furnished to me on or before January 31 of the next year. I will be required to determine what portion of this distribution, if any, must be included in my income for income tax purposes. If I have not attained age 59½, then I will be required to pay an additional tax of 10% of the amount I must include in my income, unless an exception would apply. The 10% additional tax is not owing if the distribution is due to disability or death. See reverse side for an additional discussion of withdrawing a current-year, excess contribution or a recharacterization.

Withholding Notice — I understand that 10% will be withheld from my distribution unless I elect to not have any withholding by checking box 1 below, unless my distribution is a transfer, or I instruct you below to withhold more than 10% by checking box 3 and by indicating the additional amount to be withheld. If I do not have a sufficient amount withheld, then I understand I may have to pay additional tax penalties under the withholding and estimated tax payout rules. See reverse side for an explanation.

Certification — I expressly assume full responsibility for this distribution as evidenced by my signature below.

Withholding Certificate for IRA Pension or Annuity Payments

The instructions to this substitute Form W-4P are on the reverse side as well as additional discussion of special withdrawal topics. Select #1, #2, or #3.

- I elect NOT to have income tax withheld from this IRA distribution.
- I elect to have income tax withheld from this IRA distribution equal to 10% of the amount withdrawn. This amount is \$ _____.
- I want the following additional amount withheld from each IRA payment. \$ _____.

Signature of Payee/Recipient _____ Date _____ Custodian/Trustee (Payer) _____ Date _____

IRA Distribution Form

Instructions to Accountholder or Beneficiary –
Withholding – Substitute Form W-4P

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request federal income tax withholding from periodic pension or annuity payments based on your withholding allowances and marital status, (b) request additional federal income tax withholding from your pension or annuity, (c) choose not to have federal income tax withheld, when permitted, or (d) change or revoke a previous Form W-4P. To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal enforcement and intelligence agencies to combat terrorism.

Purpose: Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities, (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of Federal income tax to withhold from your payment(s). You also may use Form W-4P to choose (a) not to have any Federal income tax withheld from the payment (except for eligible rollover distributions or payments to U.S. citizens delivered outside the United States or its possessions) or (b) to have an additional amount of tax withheld. Your options depend on whether the payment is periodic, nonperiodic, or an eligible rollover distribution. Your previously filed Form W-4P will remain in effect if you do not file a Form W-4P for the current year.

You (or in the event of death, your beneficiary or estate) can use this substitute Form W-4P or the actual IRS Form W-4P to instruct your payer to withhold or not withhold. By January 31 of next year, you will receive a statement from your payer (i.e. Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.) showing the total amount of your IRA or pension or annuity payments and the total federal income tax withheld during the year. Copies of Form W-4P will not be sent to the IRS by the payer.

What Do I Need To Do? Recipients who want no tax to be withheld must check box 1 and sign the form. Recipients who want 10% of the amount withdrawn withheld should check box 2 and sign the form. Recipients who want more than 10% withheld should check box 3 and complete line 3 and sign the form.

Other Income: If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals.

Withholding Notice Requirement and Changes: The payments you receive from your IRA are subject to Federal income tax withholding unless you elect not to have withholding apply. You may elect not to have withholding apply or elect to have withholding apply by returning this form to us. Your most current election remains in effect until you revoke it or change it. You may revoke or change your election at any time by completing a new form and returning it. Since your IRA payments are payable upon demand, your IRA withdrawals are considered to be nonperiodic and are subject to a ten (10) percent rate of withholding. If your withholding and estimated tax payments are insufficient, you may incur tax penalties. Generally, your election to have no tax withheld will apply to any later payment from the same plan or IRA. You may use line 2 of this modified Form W-4P to expressly

instruct that you wish to have 10% of your IRA distribution withheld. And you may use line 3 to specify that an additional amount be withheld including an additional 90%.

Limitations of this Substitute Form W-4P: This substitute form cannot be used if payments from your IRA are not payable upon demand. IRS Form W-4P should be used if the payments are not payable upon demand.

Periodic Payments: A periodic distribution is one that you receive in installments at regular intervals over a period of more than one full year. For periodic payments, your Form W-4P stays in effect until you change or revoke it. Your payer must notify you each year of your right to choose not to have federal income tax withheld (if permitted) or to change your choice.

Nonperiodic Payments—10% Withholding: Your payer must withhold at a flat 10% rate from nonperiodic payments unless you choose not to have federal income tax withheld. **Distributions from an IRA that are payable on demand are treated as nonperiodic payments.** This special rule even applies if you are receiving periodic distributions. You can choose not to have Federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct TIN) to your payer and checking the box on line 1. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. The 20% rate for a qualified total distribution does not apply to a payment from an IRA. If you previously chose not to have federal income tax withheld and you now want withholding, complete another substitute Form W-4P and submit it to your IRA custodian/trustee.

Completing the Withholding Portion

- (1) Fill in your name and social security number;
- (2) Make your instruction to withhold or not withhold; and
- (3) Sign, date and return it to the financial institution.

Caution: If you submit a Form W-4P that does not contain your correct TIN, the payer cannot honor your request not to have federal income tax withheld and must withhold 10% of the payment for federal income tax. Remember that there are penalties for not paying enough tax during the year, either through withholding or estimated tax payments. *New rates especially, should see Publication 505. It explains the estimated tax requirements and penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.*

Changing Your "No Withholding" Choice

Nonperiodic payments: If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to line 1 and check line 2 or complete a new form.

Payments to Foreign Persons and Payments Outside the United States: Unless you are a nonresident alien, withholding is required on any periodic or nonperiodic payments that are delivered to you outside the United States or its possessions. You cannot choose not to have federal income tax withheld on line 1 of Form W-4P. See Pub. 505 for additional details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding even if no tax treaty applies. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for details. A foreign person should submit Form W-8BEN, Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding, to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's TIN.

Statement of Federal Income Tax Withheld From Your Pension or Annuity: By January 31 of next year, your payer will furnish a statement to you on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., showing the total federal income tax withheld during the year. If you are a foreign person who has provided your payer with Form W-8BEN, your payer instead will furnish a statement to you on Form 1042-S, Foreign Person's U.S. Source Income Subject to Withholding, by March 15 of next year.

Discussion of IRS Distribution Codes A "5" is to be used to report a prohibited transaction.

An "8" is to be used to report the withdrawal of a current-year or excess contribution when the date of the contribution and the date of the distribution occur within the same calendar year. If I have withdrawn an excess contribution or a current-year contribution, I certify that a deduction was not allowed with respect to such contribution.

A "G" is to be used when funds are directly rolled over from an IRA (conduit or non-conduit) into an eligible retirement plan other than another IRA.

A "K" is to be used to report a distribution of IRA assets not having a readily available fair market value.

An "N" is to be used to report the recharacterization of an IRA contribution when the contribution occurs in a calendar year, the contribution is for the same tax year, and the recharacterization occurs during that same calendar year.

A "P" is to be used to report the withdrawal of a current-year or excess contribution when the date of distribution occurs in the year following the year in which the contribution was made, but on or before April 15, plus extensions, if applicable.

An "R" is to be used to report the recharacterization of an IRA contribution when the contribution occurred during one calendar year and the recharacterization occurred in the immediately following calendar year, or the contribution was made for the prior year during the current calendar year and the recharacterization also occurs during that same calendar year.

An "S" is to be used to report an early distribution from a SIMPLE IRA in the first two years and no known exception otherwise applies. If the premature distribution takes place within a 2-year period commencing on the date the employee first participated in the SIMPLE, the penalty will be 25% of the distribution instead of the normal 10% penalty. "First participation" is the date the first contribution was received by the SIMPLE IRA.

You also acknowledge that the use of reason #1 is proper even though the 10% additional tax of Code section 72(t) will not apply because an exception on account of a distribution to a qualifying military reservist, certain health insurance premiums, medical expenses, education expenses or as a first-time home buyer applies. You will need to complete the Form 5329 to indicate to the Internal Revenue Service why the 10% additional tax does not apply.


Additional Discussion of Rollovers/Transfers If you are going to roll over this distribution, you understand that you must complete the rollover within 60 days unless the special 120-day limit for failed first-time home purchase applies or a special rule allowing me to make a reconstruction applies. You understand that you cannot roll over any required minimum distribution (i.e. distributions required for the year you attain age 70½ and for each subsequent year). You certify that you have established an IRA with the indicated custodian/trustee and direct us to transfer your IRA funds to that custodian/trustee. You also understand that you are not authorized to roll over any after-tax dollars to an eligible retirement plan. An eligible retirement plan is defined to be a section 401(a) qualified trust, an annuity plan described in section 403(a), a governmental section 457(b) plan, or a section 403(b) plan.

Definition of Qualifying Military Reservist A qualifying military reservist is a reservist called to active duty on or after September 11, 2001 for at least 180 days.



IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed



Documentation is required. IRS W-4P
or valid substitute
CWF# 57

<small>Substitute</small> FORM W-4P <small>Department of the Treasury (IRS)</small>		Withholding Certificate for IRA Pension or Annuity Payments		<small>OMB NO. 1545-0415</small>	
<small>The instructions to this substitute Form W-4P are on the reverse side as well as additional discussion of special withdrawal topics. Select #1, #2, or #2 and #3.</small>					
1. <input type="radio"/> I elect not to have income tax withheld from this IRA distribution.					
2. <input type="radio"/> I elect to have income tax withheld from this IRA distribution equal to 10% of the amount withdrawn. This amount is \$ _____					
3. <input type="radio"/> I want the following additional amount withheld from each IRA payment. \$ _____					
_____ Signature of Payee/Recipient		_____ Date		_____ Custodian/Trustee (Payer)	
				_____ Date	

IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices



IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Elect NOT to have income tax withheld



Substitute FORM W-4P Department of the Treasury (IRS)	Withholding Certificate for IRA Pension or Annuity Payments	OMB NO. 1545-0415
The instructions to this substitute Form W-4P are on the reverse side as well as additional discussion of special withdrawal topics. Select #1, #2, or #2 and #3.		
1. <input type="radio"/> I elect NOT to have income tax withheld from this IRA distribution.		
2. <input type="radio"/> I elect to have income tax withheld from this IRA distribution equal to 10% of the amount withdrawn. This amount is \$ _____		
3. <input type="radio"/> I want the following additional amount withheld from each IRA payment. \$ _____		
_____ Signature of Payee/Recipient	_____ Date	_____ Custodian/Trustee (Payer)
		_____ Date

IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Elect NOT to have income tax withheld
 - Elect 10% income tax withheld



Substitute FORM W-4P Department of the Treasury (IRS)	Withholding Certificate for IRA Pension or Annuity Payments	OMB NO. 1545-0415
The instructions to this substitute Form W-4P are on the reverse side as well as additional discussion of special withdrawal topics. Select #1, #2, or #2 and #3.		
1. <input type="radio"/> I elect NOT to have income tax withheld from this IRA distribution.		
2. <input type="radio"/> I elect to have income tax withheld from this IRA distribution equal to 10% of the amount withdrawn. This amount is \$ _____		
3. <input type="radio"/> I want the following additional amount withheld from each IRA payment. \$ _____		
_____ Signature of Payee/Recipient	_____ Date	_____ Custodian/Trustee (Payer)
		_____ Date

IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Elect NOT to have income tax withheld
 - Elect 10% income tax withheld
 - Elect and additional amount to be withheld



Substitute FORM W-4P Department of the Treasury (IRS)	Withholding Certificate for IRA Pension or Annuity Payments	OMB NO. 1545-0415	
The instructions to this substitute Form W-4P are on the reverse side as well as additional discussion of special withdrawal topics. Select #1, #2, or #2 and #3.			
1. <input type="radio"/> I elect NOT to have income tax withheld from this IRA distribution.			
2. <input type="radio"/> I elect to have income tax withheld from this IRA distribution equal to 10% of the amount withdrawn. This amount is \$ _____			
3. <input type="radio"/> I want the following additional amount withheld from each IRA payment. \$ _____			
_____ Signature of Payee/Recipient	_____ Date	_____ Custodian/Trustee (Payer)	_____ Date

IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Elect NOT to have income tax withheld
 - Elect 10% income tax withheld
 - Elect and additional amount to be withheld
 - Must be signed and dated



Substitute FORM W-4P Department of the Treasury (IRS)	Withholding Certificate for IRA Pension or Annuity Payments	OMB NO. 1545-0415	
The instructions to this substitute Form W-4P are on the reverse side as well as additional discussion of special withdrawal topics. Select #1, #2, or #2 and #3.			
1. <input type="radio"/> I elect NOT to have income tax withheld from this IRA distribution.			
2. <input type="radio"/> I elect to have income tax withheld from this IRA distribution equal to 10% of the amount withdrawn. This amount is \$ _____			
3. <input type="radio"/> I want the following additional amount withheld from each IRA payment. \$ _____			
_____ Signature of Payee/Recipient	_____ Date	_____ Custodian/Trustee (Payer)	_____ Date

IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Penalty on the IRA custodian/trustee for non-compliance is the amount of withholding that should have been withheld and was not



IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Penalty on the IRA custodian/trustee for non-compliance is the amount of withholding that should have been withheld and was not
 - Penalty on the IRA custodian/trustee for non-compliance could be amount of taxes owed by the IRA Accountholder/Beneficiary



IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Penalty on the IRA custodian/trustee for non-compliance is the amount of withholding that should have been withheld and was not
 - Penalty on the IRA custodian/trustee for non-compliance could be amount of taxes owed by the IRA Accountholder/Beneficiary
 - Once an election is completed, it is valid forever



IRA Withholding Rules

- Election Procedure and Documentation
 - 10% Federal withholdings is required on every traditional IRA distribution unless an election is properly completed
 - Documentation is required, IRS W-4P or valid substitute must be completed
 - IRA Accountholder/Beneficiary must be given three choices
 - Penalty on the IRA custodian/trustee for non-compliance is the amount of withholding that should have been withheld and was not
 - Penalty on the IRA custodian/trustee for non-compliance could be amount of taxes owed by the IRA Accountholder/Beneficiary
 - Once an election is completed, it is valid forever
 - IRA Accountholder/Beneficiary must be allowed to change the election



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
 - Proper notice must be given prior to every distribution



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
 - Proper notice must be given prior to every distribution
 - Unscheduled distributions are usually in compliance with good Distribution Documentation



IRA Distribution Form

(Traditional, SEP or SIMPLE IRA)

Custodian/Trustee (Payer)
 Name _____
 Address _____
 City _____ State _____ Zip _____
 Attn: _____

Accountholder (Payee)
 Name _____ Date of Birth: _____
 SSN _____ IRA Acct #: _____

Beneficiary (Other Payee) (Complete only if the distribution is made to the beneficiary. Use separate form for each beneficiary.)
 Name _____
 Address _____
 City _____ State _____ Zip _____
 SSN _____ or TIN _____

A beneficiary may use Form 204 to make his or her election as to how the funds will be paid out to comply with the rules of IRC 408(a)(6).

Reason for Withdrawal/Distribution (Check One)
 I certify the reason for my distribution by checking the appropriate box below which best describes the reason for this withdrawal.

1. Before Age 59 1/2 and No Known Exception or on account of a distribution to a qualifying military reservist, certain medical expenses, education expenses, payment of health insurance premiums, first time home buyer expenses or one lifetime transfer/direct rollover to an HSA.
2. Before Age 59 1/2 but an Exception Applies (check one)
 - Conversion/Rollover to a Roth IRA IRS Levy
 - Substantially Equal Schedule (certification to be furnished)
3. Disability (certification to be furnished)
4. Death (payment to beneficiary from beneficiary IRA) _____ (Initials)
 If I am a nonspouse beneficiary of an inherited IRA, I acknowledge that I will never be eligible to rollover any IRA distribution, but a transfer to another inherited IRA would be permissible.
7. On or After Age 59 1/2 (a normal distribution)
 - Conversion/Rollover to a Roth IRA Qualified Charitable Distribution
 - One Lifetime Transfer/Direct Rollover to an HSA (use certification form 66-HSA)
9. Election to Revoke. I established my IRA on _____ I now revoke.
 The amount of earnings distributed, if any, is _____
10. Transfer to Other Custodian/Trustee (Name): _____
 (A transfer form must be completed)
11. Transfer to the IRA of the Accountholder's Spouse Due to Divorce/Legal Separation
12. Transfer to the IRA of Accountholder's Spouse Due to Election to Treat as Own
13. Transfer to Inherited IRA of Beneficiary
14. Other Special Code: _____ Choose from 5, 8, G, K, N, P or R as described on the reverse side. Complete below if applicable.
 Current-Year Contribution including an excess contribution for the current year:
 On _____ I made a contribution of \$ _____
 I now elect to withdraw the indicated portion of \$ _____ and the allocable earnings are: \$ _____. Such income is taxable on my tax return for the year in which the contribution was made.
 From SIMPLE IRA and 2-year rule not met. Use code(S).
16. Other _____

Notice of Rollover Rights — You will not be required to include your distribution in your income if you rollover your IRA distribution. You are authorized to only rollover one IRA distribution within a one-year period commencing on the date of the distribution regardless of the number or types of IRAs you have.
 Many distributions from a traditional IRA, SEP IRA or SIMPLE IRA are eligible to be rolled over. One must comply with the once per year rule and the 60 day rule. However, some distributions are ineligible to be rolled over. A required distribution is ineligible to be rolled over. You must determine if you are eligible to rollover this distribution. You should discuss with your tax adviser before taking the distribution. The tax laws do not authorize a non-spouse beneficiary to rollover funds distributed from an inherited IRA. See the reverse for an additional discussion of what rules must be met in order to rollover the distribution.

Status of Payee (Do not use this form for a distribution to a nonresident alien)
 U.S. Citizen, or Resident Alien

Financial Information
 Date of Distribution: _____
 Type of Distribution:
 Nonperiodic or
 Periodic (I hereby instruct you to pay my IRA account balance to me as follows): _____

I certify that these payments satisfy, or will satisfy, the minimum distribution requirements of Code section 408(a)(6) if applicable. I understand my election is revocable.

Method of Payment:
 Issue check to me.
 Deposit to my checking account # _____
 Deposit to my savings account # _____
 Other _____

	Investment Account #	Investment Account #
Amount Requested	(+)	_____
Earnings Not Yet Reported to DP	(+)	_____
Early Surrender Fee	(-)	_____
Other Fees	(-)	_____
Net Amount	(=)	_____
Fed. WH	(-)	_____
State WH	(-)	_____
Actual Amount Received or Transferred	(=)	_____

Read – Important Distribution and Withholding Information —
 I understand this distribution has income tax consequences and I should consult a tax advisor as necessary. I understand this information will be used by the custodian/trustee, if required, to prepare the IRS information return Form 1099-R, which will be furnished to me on or before January 31 of the next year. I will be required to determine what portion of this distribution, if any, must be included in my income for income tax purposes. If I have not attained age 59½, then I will be required to pay an additional tax of 10% of the amount I must include in my income, unless an exception would apply. The 10% additional tax is not owing if the distribution is due to disability or death. See reverse side for an additional discussion of withdrawing a current-year, excess contribution or a recharacterization.

Withholding Notice — I understand that 10% will be withheld from my distribution unless I elect to not have any withholding by checking box 1 below, unless my distribution is a transfer, or I instruct you below to withhold more than 10% by checking box 3 and by indicating the additional amount to be withheld. If I do not have a sufficient amount withheld, then I understand I may have to pay additional tax penalties under the withholding and estimated tax payout rules. See reverse side for an explanation.

Certification — I expressly assume full responsibility for this distribution as evidenced by my signature below.

Withholding Certificate for IRA Pension or Annuity Payments

The instructions to this substitute Form W-4P are on the reverse side as well as additional discussion of special withdrawal topics. Select #1, #2, or #3.

1. I elect NOT to have income tax withheld from this IRA distribution.
2. I elect to have income tax withheld from this IRA distribution equal to 10% of the amount withdrawn. This amount is \$ _____
3. I want the following additional amount withheld from each IRA payment. \$ _____

Signature of Payee/Recipient _____ Date _____ Custodian/Trustee (Payer) _____ Date _____

IRA Distribution Form

Instructions to Accountholder or Beneficiary – Withholding – Substitute Form W-4P

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws...

Revenue laws provide this information to carry out the Internal Revenue laws which provide this information to carry out the Internal Revenue laws... Failure to provide information to carry out the Internal Revenue laws...

Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal enforcement and intelligence agencies to combat terrorism.

Purpose: Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities, (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of Federal income tax to withhold from your payment(s). You also may use Form W-4P to choose (a) not to have any Federal income tax withheld from the payment (except for eligible rollover distributions or payments to U.S. citizens delivered outside the United States or its possessions) or (b) to have an additional amount of tax withheld.

You (or in the event of death, your beneficiary or estate) can use this substitute Form W-4P or the actual IRS Form W-4P to instruct your payer to withhold or not withhold. By January 31 of next year, you will receive a statement from your payer (i.e. Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.) showing the total amount of your IRA or pension or annuity payments and the total federal income tax withheld during the year. Copies of Form W-4P will not be sent to the IRS by the payer.

What Do I Need To Do? Recipients who want no tax to be withheld must check box 1 and sign the form. Recipients who want 10% of the amount withdrawn withheld should check box 2 and sign the form. Recipients who want more than 10% withheld should check box 3 and complete line 3 and sign the form.

Other Income: If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals.

Withholding Notice Requirement and Changes: The payments you receive from your IRA are subject to Federal income tax withholding unless you elect not to have withholding apply. You may elect not to have withholding apply or elect to have withholding apply by returning this form to us. Your most current election remains in effect until you revoke it or change it. You may revoke or change your election at any time by completing a new form and returning it. Since your IRA payments are payable upon demand, your IRA withdrawals are considered to be nonperiodic and are subject to a ten (10) percent rate of withholding. If your withholding and estimated tax payments are insufficient, you may incur tax penalties. Generally, your election to have no tax withheld will apply to any later payment from the same plan or IRA. You may use line 2 of this modified Form W-4P to expressly

instruct that you wish to have 10% of your IRA distribution withheld. And you may use line 3 to specify that an additional amount be withheld (withholding an additional 90%.

Limitations of this Substitute Form W-4P: This substitute form cannot be used if payments from your IRA are not payable upon demand. IRS Form W-4P should be used if the

IRA Distribution Form

Instructions to Accountholder or Beneficiary – Withholding – Substitute Form W-4P

Privacy Act and Paperwork Reduction Act Notice: We ask

choose not to have Federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct TIN) to your payer and checking the box on line 1. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. The 20% rate for a qualified total distribution does not apply to a payment from an IRA. If you previously chose not to have federal income tax withheld and you now want withholding, complete another substitute Form W-4P and submit it to your IRA custodian/trustee.

Completing the Withholding Portion

- (1) Fill in your name and social security number;
- (2) Make your instruction to withhold or not withhold; and
- (3) Sign, date and return it to the financial institution.

Caution: If you submit a Form W-4P that does not contain your correct TIN, the payer cannot honor your request not to have federal income tax withheld and must withhold 10% of the payment for federal income tax. Remember that there are penalties for not paying enough tax during the year, either through withholding or estimated tax payments. New rates especially, should see Publication 505. It explains the estimated tax requirements and penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.

Changing Your "No Withholding" Choice

Nonperiodic payments: If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to line 1 and check line 2 or complete a new form.

Payments to Foreign Persons and Payments Outside the United States: Unless you are a nonresident alien, withholding is required on any periodic or nonperiodic payments that are delivered to you outside the United States or its possessions. You cannot choose not to have federal income tax withheld on line 1 of Form W-4P. See Pub. 505 for additional details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding even if no tax treaty applies. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for details. A foreign person should submit Form W-8BEN, Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding, to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's TIN.

Statement of Federal Income Tax Withheld From Your Pension or Annuity By January 31 of next year, your payer will furnish a statement to you on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., showing the total federal income tax withheld during the year. If you are a foreign person who has provided your payer with Form W-8BEN, your statement will furnish a statement to you on Form 1042-S, Person's U.S. Source Income Subject to Withholding, on 15 of next year.

Section of IRS Distribution Codes A "5" is to be used to report prohibited transaction.

"F" is to be used to report the withdrawal of a current-excess contribution when the date of the contribution date of the distribution occur within the same calendar year. If I have withdrawn an excess contribution or a current-contribution, I certify that a deduction was not allowed respect to such contribution.

"C" is to be used when funds are directly rolled over from (conduit or non-conduit) into an eligible retirement plan other than another IRA.

A "K" is to be used to report a distribution of IRA assets not having a readily available fair market value.

An "N" is to be used to report the recharacterization of an IRA contribution when the contribution occurs in a calendar year, the contribution is for the same tax year, and the recharacterization occurs during that same calendar year.

A "P" is to be used to report the withdrawal of a current-year or excess contribution when the date of distribution occurs in the year following the year in which the contribution was made, but on or before April 15, plus extensions, if applicable.

An "R" is to be used to report the recharacterization of an IRA contribution when the contribution occurred during one calendar year and the recharacterization occurred in the immediately following calendar year, or the contribution was made for the prior year during the current calendar year and the recharacterization also occurs during that same calendar year.

An "S" is to be used to report an early distribution from a SIMPLE IRA in the first two years and no known exception otherwise applies. If the premature distribution takes place within a 2-year period commencing on the date the employee first participated in the SIMPLE, the penalty will be 25% of the distribution instead of the normal 10% penalty. "First participation" is the date the first contribution was received by the SIMPLE IRA.

You also acknowledge that the use of reason #1 is proper even though the 10% additional tax of Code section 72(t) will not apply because an exception on account of a distribution to a qualifying military reservist, certain health insurance premiums, medical expenses, education expenses or as a first-time home buyer applies. You will need to complete the Form 5329 to indicate to the Internal Revenue Service why the 10% additional tax does not apply.

Additional Discussion of Rollovers/Transfers If you are going to roll over this distribution, you understand that you must complete the rollover within 60 days unless the special 120-day limit for failed first-time home purchase applies or a special rule allowing me to make a reconstruction applies. You understand that you cannot roll over any required minimum distribution (i.e. distributions required for the year you attain age 70½ and for each subsequent year). You certify that you have established an IRA with the indicated custodian/trustee and direct us to transfer your IRA funds to that custodian/trustee. You also understand that you are not authorized to roll over any after-tax dollars to an eligible retirement plan. An eligible retirement plan is defined to be a section 401(a) qualified trust, an annuity plan described in section 403(a), a governmental section 457(b) plan, or a section 403(b) plan.

Definition of Qualifying Military Reservist A qualifying military reservist is a reservist called to active duty on or after September 11, 2001 for at least 180 days.



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
 - Proper notice must be given prior to every distribution
 - Only once-per-year if receiving 4 or more scheduled distributions



Reminder Notice — Withholding Election for Automatic IRA Distributions

Custodian/Trustee

Name _____ Date _____
Address _____
City _____ State _____ Zip _____

IRA Distribution Recipient

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Email: _____
IRA Account Number _____

Dear IRA Distribution Recipient:

You are either an IRA account holder or an inheriting IRA beneficiary.
You presently are, or soon will be, receiving a scheduled distribution or distributions from your IRA.

Federal income tax laws require us to periodically notify you of the withholding rules pertaining to IRA distributions, and of your right to have or not have income taxes withheld. Read the information set forth on the reverse side, especially the "boxed" section. You may certainly elect not to have withholding apply. However, you must be aware that there are tax penalties for not paying sufficient taxes during the year, either by withholding or by making estimated tax payments. Refer to the reverse side of this form for additional instructions and information.

You previously instructed us in one of two ways:

- 1. To NOT withhold federal income tax, or
- 2. To withhold federal income tax equal to 10% of the amount withdrawn plus the additional amount of \$ _____.

We will continue to follow this instruction unless you choose to change it by checking one of the circles below. SPECIAL NOTE: You only need to complete the section below, sign the form, and return it to us if you change your previous instruction.

You should retain a copy of this form in your IRA file in either case.

If your payment schedule provides for more than 3 distributions per year (e.g. monthly or quarterly), then you will be sent only one notice to cover all distributions for the calendar year of _____.

If you are scheduled to receive one or two distributions during this year, then we will send you this notice for each distribution. The reason we must send two notices is because a special withholding rule does not allow us to send the notice more than six months in advance of the distribution when less than four distributions are scheduled during the year.

If you have questions, please contact our office.

Sincerely,
Your IRA Custodian/Trustee

Accountholder's New Election/Instructions:

- 1. I elect **NOT** to have income tax withheld from my IRA distributions.
- 2. I elect to have income tax withheld from my IRA distributions equal to 10% of the amount withdrawn.

I also want the following additional amount withheld from each IRA payment. \$ _____

Signature of IRA Accountholder Date

Instructions to Accountholder or Beneficiary — Withholding — Substitute Form W-4P

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request federal income tax withholding from periodic pension or annuity payments based on your withholding allowances and marital status, (b) request additional federal income tax withholding from your pension or annuity, (c) choose not to have federal income tax withheld, when permitted, or (d) change or revoke a previous Form W-4P. To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia for use in administering their tax laws.

Purpose: Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities, (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of Federal income tax to withhold from your payment(s). You also may use Form W-4P to choose (a) not to have any Federal income tax withheld from the payment (except for eligible rollover distributions or payments to U.S. citizens delivered outside the United States or its possessions) or (b) to have an additional amount of tax withheld. Your options depend on whether the payment is periodic, nonperiodic, or an eligible rollover distribution. Your previously filed Form W-4P will remain in effect if you do not file a Form W-4P for the current year.

You (or in the event of death, your beneficiary or estate) can use this substitute Form W-4P or the actual IRS Form W-4P to instruct your payer to withhold or not withhold. By January 31 of next year, you will receive a statement from your payer (i.e. Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.) showing the total amount of your IRA or pension or annuity payments and the total federal income tax withheld during the year. Copies of Form W-4P will not be sent to the IRS by the payer.

What Do I Need To Do? Recipients who want no tax to be withheld must check box 1 and sign the form. Recipients who want 10% of the amount withdrawn withheld should check box 2 and sign the form. Recipients who want more than 10% withheld should check box 2 and complete line 3 and sign the form.

Other Income: If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or

capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. **Note:** Social security and railroad retirement payments may be includible in income. See Form W-4V, Voluntary Withholding Request, for information on voluntary withholding from these payments. You may obtain copies of these Forms and Publication 505, Tax Withholding and Estimated Tax from the IRS website (www.irs.gov).

Withholding Notice Requirement and Changes: The payments you receive from your IRA are subject to Federal income tax withholding unless you elect not to have withholding apply. You may elect not to have withholding apply or elect to have withholding apply by returning this form to us. Your most current election remains in effect until you revoke it or change it. You may revoke or change your election at any time by completing a new form and returning it. Since your IRA payments are payable upon demand, your IRA withdrawals are considered to be nonperiodic and are subject to a ten (10) percent rate of withholding. If your withholding and estimated tax payments are insufficient, you may incur tax penalties. Generally, your election to have no tax withheld will apply to any later payment from the same plan or IRA. You may use line 2 of this modified Form W-4P to expressly instruct that you wish to have 10% of your IRA distribution withheld. And you may use line 3 to specify that an additional amount be withheld including an additional 90%.

Limitations of this Substitute Form W-4P: This substitute form cannot be used if payments from your IRA are not payable upon demand. IRS Form W-4P should be used if the payments are not payable upon demand.

Periodic Payments: A periodic distribution is one that you receive in installments at regular intervals over a period of more than one full year. For periodic payments, your Form W-4P stays in effect until you change or revoke it. Your payer must notify you each year of your right to choose not to have federal income tax withheld (if permitted) or to change your choice.

Nonperiodic Payments—10% Withholding: Your payer must withhold at a flat 10% rate from nonperiodic payments unless you choose not to have federal income tax withheld. **Distributions from an IRA that are payable on demand are treated as nonperiodic payments.** This special rule even applies if you are receiving periodic distributions. You can choose not to have Federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct TIN) to your payer and checking the box on line 1. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. The 20% rate for a qualified total

distribution does not apply to a payment from an IRA. If you previously chose not to have federal income tax withheld and you now want withholding, complete another substitute Form W-4P and submit it to your IRA custodian/trustee.

Completing the Withholding Portion

- (1) Fill in your name and social security number;
- (2) Make your instruction to withhold or not withhold; and
- (3) Sign, date and return it to the financial institution.

Caution: If you submit a Form W-4P that does not contain your correct TIN, the payer cannot honor your request not to have federal income tax withheld and must withhold 10% of the payment for federal income tax. Remember that there are penalties for not paying enough tax during the year, either through withholding or estimated tax payments. New retirees especially, should see Publication 505. It explains the estimated tax requirements and penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.

Changing Your "No Withholding" Choice

Nonperiodic payments: If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to line 1 and check line 2 or complete a new form.

Payments to Foreign Persons and Payments Outside the United States: Unless you are a nonresident alien, withholding is required on any periodic or nonperiodic payments that are delivered to you outside the United States or its possessions. You cannot choose not to have federal income tax withheld on line 1 of Form W-4P. See Pub. 505 for additional details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding even if no tax treaty applies. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for details. A foreign person should submit Form W-8BEN, Certificate of Foreign Status of Beneficial owner for United States Tax Withholding, to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's TIN.

IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
 - Proper notice must be given prior to every distribution
 - Only once-per-year if receiving 4 or more scheduled distributions
 - When mailed, must be received no sooner than 6 months before the distribution



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
 - Proper notice must be given prior to every distribution
 - Only once-per-year if receiving 4 or more scheduled distributions
 - When mailed, must be received no sooner than 6 months before the distribution
 - When mailed, must be received within a reasonable period of time before the distribution



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
 - Proper notice must be given prior to every distribution
 - Penalty on the IRA custodian/trustee for non-compliance is \$10 for each failure



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
- • Deposit requirements
 - Monthly, semi-weekly, or Annually

IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
- Deposit requirements
 - Monthly, semi-weekly, or Annually
 - Check or Electronic Funds Transfer



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
- Deposit requirements
 - Monthly, semi-weekly, or Annually
 - Check or Electronic Funds Transfer
 - Electronic Funds Transfer required after December 31, 2010



IRA Withholding Rules

- Election Procedure and Documentation
- Notice Requirements
- Deposit requirements
 - Monthly, semi-weekly, or Annually
 - Check or Electronic Funds Transfer
 - Electronic Funds Transfer required after December 31, 2010
 - Check if your financial institution qualifies for exception





- Reporting Requirements
 - Annually, IRS Form 945 is due by January 31 for previous year

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is due by January 31 for previous year

Annually, IRS Form 945 is due by January 31 for the previous year
IRS Form 945

Form **945** Annual Return of Withheld Federal Income Tax
 Department of the Treasury Internal Revenue Service
 OMB No. 1545-1430
2018
 For withholding reported on Forms 1099 and W-2G.
 For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
 Go to www.irs.gov/Form945 for instructions and the latest information.

Name (as distinguished from trade name) Employer identification number (EIN)
 Trade name, if any
 Address (number and street)
 City or town, state or province, country, and ZIP or foreign postal code

Type or Print If address is different from prior return, check here.

A If you don't have to file returns in the future, check here and enter date final payments made.

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		
5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5		
6 Overpayment. If line 4 is more than line 3, enter the difference <input type="checkbox"/> \$ _____			

Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here
- Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			
E May		J October			

Third-Party Designee Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Designee's name Phone no. Personal identification number (PIN)

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature Print Your Name and Title Date

Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
 Firm's name Firm's EIN
 Firm's address Phone no.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 14584B Form 945 (2018) 42

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is due by January 31 for previous year

Annually, IRS Form 945 is due by January 31 for the previous year
IRS Form 945

Form 945 Annual Return of Withheld Federal Income Tax
 Department of the Treasury Internal Revenue Service
 ▶ For withholding reported on Forms 1099 and W-2G.
 ▶ For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
 ▶ Go to www.irs.gov/Form945 for instructions and the latest information.

OMB No. 1545-1430
2018

Name (as distinguished from trade name) Employer identification number (EIN)
 Trade name, if any
 Address (number and street)
 City or town, state or province, country, and ZIP or foreign postal code

Type or Print

If address is different from prior return, check here. ▶

A If you don't have to file returns in the future, check here ▶ and enter date final payments made. ▶

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		
5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5		
6 Overpayment. If line 4 is more than line 3, enter the difference ▶ \$ _____			

Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here ▶
- Monthly schedule depositors: Complete line 7, entries A through M, and check here ▶

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			
E May		J October			

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee
 Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here
 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ Print Your Name and Title ▶ Date ▶

Paid Preparer Use Only
 Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
 Firm's name ▶ Firm's EIN ▶
 Firm's address ▶ Phone no. ▶

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 14584B Form 945 (2018)

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is c

Complete Form with basic information

Form 945 Department of the Treasury Internal Revenue Service	Annual Return of Withheld Federal Income Tax ▶ For withholding reported on Forms 1099 and W-2G. ▶ For more information on income tax withholding, see Pub. 15 and Pub. 15-A. ▶ Go to www.irs.gov/Form945 for instructions and the latest information.	OMB No. 1545-1430 2018
Type or Print	Name (as distinguished from trade name)	Employer identification number (EIN)
	Trade name, if any	
	Address (number and street)	
	City or town, state or province, country, and ZIP or foreign postal code	
		If address is different from prior return, check here. ▶ <input type="checkbox"/>

A If you don't have to file returns in the future, check here ▶ and enter date final payments made. ▶ _____

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		
5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5		
6 Overpayment. If line 4 is more than line 3, enter the difference ▶ \$ _____			

Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here ▶
- Monthly schedule depositors: Complete line 7, entries A through M, and check here ▶

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)						
	Tax liability for month		Tax liability for month		Tax liability for month	
A January			F June		K November	
B February			G July		L December	
C March			H August		M Total liability for year (add lines A through L)	
D April			I September			
E May			J October			

Third-Party Designee Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ Print Your Name and Title ▶ Date ▶

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶		Phone no.	
Firm's address ▶				

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is c

Read carefully and complete only if applicable

Form 945 Annual Return of Withheld Federal Income Tax
 Department of the Treasury Internal Revenue Service
 ▶ For withholding reported on Forms 1099 and W-2G.
 ▶ For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
 ▶ Go to www.irs.gov/Form945 for instructions and the latest information.

OMB No. 1545-1430
2018

Name (as distinguished from trade name) _____ Employer identification number (EIN) _____
 Trade name, if any _____
 Address (number and street) _____
 City or town, state or province, country, and ZIP or foreign postal code _____

Type or Print

If address is different from prior return, check here.

A If you don't have to file returns in the future, check here and enter date final payments made. ▶ _____

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1
2 Backup withholding	2
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4

A If you do not have to file returns in the future, check here and enter date final payments made. ▶ _____

Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here
- Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month	
A January			F June		K November	
B February			G July		L December	
C March			H August		M Total liability for year (add lines A through L)	
D April			I September			
E May			J October			

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee
 Designee's name ▶ _____ Phone no. ▶ _____ Personal identification number (PIN) ▶ _____


Sign Here
 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ _____ Print Your Name and Title ▶ _____ Date ▶ _____

Paid Preparer Use Only
 Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

IRA Withholding Rules

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 Federal income tax withheld

Form 945 Annual Return of Withheld Federal Income Tax
 Department of the Treasury Internal Revenue Service
 ▶ For withholding reported on Forms 1099 and W-2G.
 ▶ For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
 ▶ Go to www.irs.gov/Form945 for instructions and the latest information.

OMB No. 1545-1430
2018

Name (as distinguished from trade name) _____ Employer identification number (EIN) _____
 Trade name, if any _____
 Address (number and street) _____
 City or town, state or province, country, and ZIP or foreign postal code _____

Type or Print If address is different from prior return, check here. ▶

A If you don't have to file returns in the future, check here ▶ and enter date final payments made. ▶ _____

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc. **1**

Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here ▶
- Monthly schedule depositors: Complete line 7, entries A through M, and check here ▶

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			
E May		J October			

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee
 Designee's name ▶ _____ Phone no. ▶ _____ Personal identification number (PIN) ▶ _____

Sign Here
 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ _____ Print Your Name and Title ▶ _____ Date ▶ _____

Paid Preparer Use Only
 Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 14584B Form 945 (2018) 46

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Backup withholding

Note: Generally does not apply to IRAs

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 ▶ For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
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Name (as distinguished from trade name) Employer identification number (EIN)
 Trade name, if any
 Address (number and street)
 City or town, state or province, country, and ZIP or foreign postal code

If address is different from prior return, check here.

Type or Print

A If you don't have to file returns in the future, check here and enter date final payments made. ▶

1	Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2	Backup withholding	2		
3	Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4	Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		

2 Backup withholding 2

Check one: Apply to next return. Send a refund.

• **All filers:** If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
 • **Semiweekly schedule depositors:** Complete Form 945-A and check here
 • **Monthly schedule depositors:** Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month	
A January			F June			K November
B February			G July			L December
C March			H August			M Total liability for year (add lines A through L)
D April			I September			
E May			J October			

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee
 Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here
 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ Print Your Name and Title ▶ Date ▶

Paid Preparer Use Only
 Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
 Firm's name ▶ Firm's EIN ▶
 Firm's address ▶ Phone no. ▶

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 14584B Form 945 (2018) 47

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▶ For withholding reported on Forms 1099 and W-2G.
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Name (as distinguished from trade name) _____ Employer identification number (EIN) _____
 Trade name, if any _____
 Address (number and street) _____
 City or town, state or province, country, and ZIP or foreign postal code _____

Type or Print If address is different from prior return, check here. ▶

A If you don't have to file returns in the future, check here ▶ and enter date final payments made. ▶ _____

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		
5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5		
6 Overpayment. If line 4 is more than line 3, enter the difference ▶ \$ _____			

Check one: Apply to next return. Send a refund.

3 Total taxes. If \$2,500 or more, this must equal line 7M below or line M of Form 945-A	3		
---	----------	--	--

3 Total taxes. If \$2,500 or more, this must equal line 7M below or line M of Form 945-A **3**

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiregular schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			
E May		J October			

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee
 Designee's name ▶ _____ Phone no. ▶ _____ Personal identification number (PIN) ▶ _____

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Signature ▶ _____ Print Your Name and Title ▶ _____ Date ▶ _____

Paid Preparer Use Only
 Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

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Type or Print	Name (as distinguished from trade name)	Employer identification number (EIN)	If address is different from prior return, check here. <input type="checkbox"/>
	Trade name, if any		
	Address (number and street)		
	City or town, state or province, country, and ZIP or foreign postal code		

A If you don't have to file returns in the future, check here and enter date final payments made. ▶

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		
5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5		
6 Overpayment. If line 4 is more than line 3, enter the difference ▶ \$ _____			

Check one: Apply to next return. Send a refund.

4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiregular schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			
E May		J October			

Third-Party Designee Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ Print Your Name and Title ▶ Date ▶

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶			
Firm's address ▶	Phone no.			

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 For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
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Type or Print	Name (as distinguished from trade name)	Employer identification number (EIN)	If address is different from prior return, check here. <input type="checkbox"/>
	Trade name, if any		
	Address (number and street)		
	City or town, state or province, country, and ZIP or foreign postal code		

A If you don't have to file returns in the future, check here and enter date final payments made.

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		
5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5		
6 Overpayment. If line 4 is more than line 3, enter the difference <input type="text"/> \$			

Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here
- Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A	
D April		I September			

5 Balance due. If line 3 is more than line 4, write the difference here. For information on how to pay, see the instructions No.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature <input type="text"/>	Print Your Name and Title <input type="text"/>	Date <input type="text"/>	Check <input type="checkbox"/> if self-employed	PTIN <input type="text"/>
Print/Type preparer's name	Preparer's signature	Date		
Firm's name <input type="text"/>	Firm's address <input type="text"/>	Firm's EIN <input type="text"/>	Phone no. <input type="text"/>	

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Name (as distinguished from trade name) Employer identification number (EIN)
 Trade name, if any
 Address (number and street)
 City or town, state or province, country, and ZIP or foreign postal code

Type or Print

If address is different from prior return, check here.

A If you don't have to file returns in the future, check here and enter date final payments made.

1	Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1	
2	Backup withholding	2	
3	Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3	
4	Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4	
5	Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5	

6 Overpayment. If line 4 is more than line 3, enter the difference \$

Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here
- Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month	
A January			F June		K November	
B February			G July		L December	
C March			H August		M Total liability for	

6 Overpayment. If line 4 is more than line 3, enter overpayment here \$ and check if to be: Yes No.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature Print Your Name and Title Date

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name <input type="text"/>	Firm's EIN <input type="text"/>		Phone no. <input type="text"/>	
Firm's address <input type="text"/>				

IRA Withholding Rules

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Form **945** Annual Return of Withheld Federal Income Tax
 Department of the Treasury Internal Revenue Service
 OMB No. 1545-1430
2018
 For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
 Go to www.irs.gov/Form945 for instructions and the latest information.

Name (as distinguished from trade name) Employer identification number (EIN)
 Trade name, if any
 Address (number and street)
 City or town, state or province, country, and ZIP or foreign postal code

If address is different from prior return, check here.

A If you don't have to file returns in the future, check here and enter date final payments made.

1	Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1	
2	Backup withholding	2	
3	Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3	
4	Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4	
5	Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5	

6 **Overpayment.** If line 4 is more than line 3, enter the difference \$
 Check one: Apply to next return. Send a refund.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here
- Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			

6 **Overpayment.** If line 4 is more than line 3, enter overpayment here \$ and check if to be:
 Applied to next return or Refunded.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature Date

Print Your Name and Title

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

IRA Withholding Rules

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 Department of the Treasury Internal Revenue Service
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Name (as distinguished from trade name) Employer identification number (EIN)
 Trade name, if any
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 City or town, state or province, country, and ZIP or foreign postal code

If address is different from prior return, check here.

A If you don't have to file returns in the future, check here and enter date final payments made.

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		
5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions	5		
6 Overpayment. If line 4 is more than line 3, enter the difference <input type="text"/> \$ <input type="text"/>			

Check one: Apply to next return. Send a refund.

All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
Semiweekly schedule depositors: Complete Form 945-A and check here
Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month
A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			

Complete if applicable

- All filers:** If line 3 is less than \$2,500, do not complete line 7 or Form 945-A.
- Semiweekly schedule depositors:** Complete Form 945-A and check here
- Monthly schedule depositors:** Complete line 7, entries A through M, and check here

Sign Here Signature **Print Your Name and Title** **Date**

believe, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name <input type="text"/>	Firm's address <input type="text"/>	Firm's EIN <input type="text"/>	Phone no. <input type="text"/>	

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Name (as distinguished from trade name) Employer identification number (EIN)

Trade name, if any

Address (number and street)

City or town, state or province, country, and ZIP or foreign postal code

Type or Print

If address is different from prior return, check here.

A If you don't have to file returns in the future, check here and enter date final payments made. ▶

1	Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2	Backup withholding	2		
3	Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		

7 Monthly Summary of Federal Tax Liability. (Do not complete if you were a semiweekly schedule depositor.)

	Tax liability for month			Tax liability for month			Tax liability for month	
A January			F June			K November		
B February			G July			L December		
C March			H August			M Total liability for year (add lines A through L)		
D April			I September					
E May			J October					

• Semiweekly schedule depositors: Complete Form 945-A and check here

• Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month			Tax liability for month			Tax liability for month	
A January			F June			K November		
B February			G July			L December		
C March			H August			M Total liability for year (add lines A through L)		
D April			I September					
E May			J October					

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ Print Your Name and Title ▶ Date ▶

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN

Firm's name ▶ Firm's EIN ▶

Firm's address ▶ Phone no. ▶

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 **Third-Party Designee**

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Name (as distinguished from trade name) _____ Employer identification number (EIN) _____
 Trade name, if any _____
 Address (number and street) _____
 City or town, state or province, country, and ZIP or foreign postal code _____

If address is different from prior return, check here.

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1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		

Do you want to allow another person to discuss this return with the IRS (see the instructions)? Yes. Complete the following. No.

Third-Party Designee
 Designee's name ▶ _____ Phone no. ▶ () _____ Personal identification number (PIN) ▶ _____

Check one: Apply to next return. Send a return.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here
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	Tax liability for month		Tax liability for month		Tax liability for month
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Third-Party Designee
 Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.
 Designee's name ▶ _____ Phone no. ▶ _____ Personal identification number (PIN) ▶ _____

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature ▶ _____ Print Your Name and Title ▶ _____ Date ▶ _____

Paid Preparer Use Only
 Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

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Name (as distinguished from trade name) _____ Employer identification number (EIN) _____

Trade name, if any _____

Address (number and street) _____

City or town, state or province, country, and ZIP or foreign postal code _____

Type or Print

If address is different from prior return, check here.

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1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature ▶ _____

Print Your Name and Title ▶ _____ **Date** ▶ _____

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
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A January		F June		K November	
B February		G July		L December	
C March		H August		M Total liability for year (add lines A through L)	
D April		I September			
E May		J October			

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee

Designee's name ▶ _____ Phone no. ▶ _____ Personal identification number (PIN) ▶ _____

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature ▶ _____ **Print Your Name and Title** ▶ _____ **Date** ▶ _____

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____

Firm's name ▶ _____ Firm's EIN ▶ _____

Firm's address ▶ _____ Phone no. _____

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 14584B Form 945 (2018) 56

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is c

Paid Preparer's Use Only

Form **945** Annual Return of Withheld Federal Income Tax
 Department of the Treasury Internal Revenue Service
 OMB No. 1545-1430
2018
 For withholding reported on Forms 1099 and W-2G.
 For more information on income tax withholding, see Pub. 15 and Pub. 15-A.
 Go to www.irs.gov/Form945 for instructions and the latest information.

Name (as distinguished from trade name) Employer identification number (EIN)
 Trade name, if any
 Address (number and street)
 City or town, state or province, country, and ZIP or foreign postal code

Type or Print

If address is different from prior return, check here.

A If you don't have to file returns in the future, check here and enter date final payments made. _____

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc.	1		
2 Backup withholding	2		
3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M	3		
4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied from Form 945-X	4		

Paid Preparer's Use Only

Preparer's signature _____ Date _____ Check if self-employed Preparer's SSN or PTIN _____
 Firm's name (or yours, if self-employed), address, and ZIP code _____ EIN _____
 Phone no. () _____

Check one: Apply to next return. Send a return.

- All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.
- Semiweekly schedule depositors: Complete Form 945-A and check here
- Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

	Tax liability for month		Tax liability for month		Tax liability for month	
A January			F June		K November	
B February			G July		L December	
C March			H August		M Total liability for year (add lines A through L)	
D April			I September			
E May			J October			

Third-Party Designee Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name _____ Firm's EIN _____
 Firm's address _____ Phone no. _____

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is due by January 31 for previous year
 - Verify all amounts on Form 1099-R



9898 VOID CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.

1 Gross distribution \$

2a Taxable amount \$

2b Taxable amount not determined Total \$

PAYER'S TIN

RECIPIENT'S TIN

3 Capital gain (included in box 2a) \$

4 Federal income tax withheld \$

RECIPIENT'S name

5 Employee contributions/ Designated Roth contributions or insurance premiums \$

6 Net unrealized appreciation in employer's securities \$

Street address (including apt. no.)

7 Distribution code(s)

8 Other \$

City or town, state or province, country, and ZIP or foreign postal code

9a Your percentage of total distribution %

9b Total employee contribution %

10 Amount allocable to IRR within 5 years \$

11 1st year of desig. Roth contrib.

FATCA filing requirement

12 State tax withheld \$

13 State/Payer's state no. \$

Account number (see instructions)

Date of payment

15 Local tax withheld \$

16 Name of locality

Form 1099-R Cat. No. 14436Q www.irs.gov/Form1099R Department of the Treasury

Do Not Staple 6969

Form 1096

Department of the Treasury

Annual Summary and Transmittal of U.S. Information Returns

OMB No. 1545-0108

2018

Form 945

Annual Return of Withheld Federal Income Tax

OMB No. 1545-1430

2018

Name (as distinguished from trade name)

Employer identification number (EIN)

Trade name, if any

Address (number and street)

City or town, state or province, country, and ZIP or foreign postal code

If address is different from prior returns, check here.

A If you don't have to file returns in the future, check here and enter date final payments made

1 Federal income tax withheld from pensions, annuities, IRAs, gambling winnings, etc. 1

2 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M 3

3 Total taxes. If \$2,500 or more, this must equal line 7M below or Form 945-A, line M 3

4 Total deposits for 2018, including overpayment applied from a prior year and overpayment applied 4

5 Balance due. If line 3 is more than line 4, enter the difference and see the separate instructions 5

6 Overpayment. If line 4 is more than line 3, enter the difference \$

Check one: Apply to next return. Send a refund.

• All filers: If line 3 is less than \$2,500, don't complete line 7 or Form 945-A.

• Semiweekly schedule depositors: Complete Form 945-A and check here

• Monthly schedule depositors: Complete line 7, entries A through M, and check here

7 Monthly Summary of Federal Tax Liability. (Don't complete if you were a semiweekly schedule depositor.)

A January	Tax liability for month	F June	Tax liability for month	K November
B February		G July		L December
C March		H August		M Total liability for year (add lines A through L)
D April		I September		
E May		J October		

Do you want to allow another person to discuss this return with the IRS? See separate instructions. Yes. Complete the following. No.

Third-Party Designee: Designee's name, Phone no., Personal identification number (PIN)

Sign Here: Under penalty of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature: Print Your Name and Title, Date

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 14548B Form 945 (2018)

OMB No. 1545-0108

2018

code

phone number

number

For Official Use Only

4 Federal income tax withheld

Total amount reported with this Form 1096

7 Form 1099-MISC with NEC in box 7, check

1099-T	1099-A	1099-B	1099-C	1099-CAP	1099-DIV	1099-G	1099-INT	1099-K	1099-LS
83	80	79	85	73	91	86	92	10	16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1099-S	1099-SA	1099-SB	3021	3022	5498	5498-ESA	5498-OA	5498-SA	
75	94	43	25	26	28	72	2A	27	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945-A
 - Verify all amounts
 - Form 945-A



Used by semi-weekly scheduled depositors

Form 945-A		Annual Record of Federal Tax Liability		OMB No. 1545-1430	
(Rev. December 2009)		Department of the Treasury Internal Revenue Service		▶ File with Form 945, Form 945-X, CT-1, CT1-X, 944, 944-X, or Form 944-SS.	
Name (as shown on Form 945, Form 945-X, CT-1, CT1-X, 944, 944-X, or Form 944-SS)				Employer identification number (EIN)	
You must complete this form if you are required to deposit on a semiweekly schedule or if your tax liability during any month was \$100,000 or more. Show tax liability here, not deposits. (The IRS gets deposit data from FTD coupons or EFTPS.) DO NOT change your tax liability by adjustments reported on any Forms 945-X.					
January Tax Liability		February Tax Liability		March Tax Liability	
1	17	1	17	1	17
2	18	2	18	2	18
3	19	3	19	3	19
4	20	4	20	4	20
5	21	5	21	5	21
6	22	6	22	6	22
7	23	7	23	7	23
8	24	8	24	8	24
9	25	9	25	9	25
10	26	10	26	10	26
11	27	11	27	11	27
12	28	12	28	12	28
13	29	13	29	13	29
14	30	14		14	30
15	31	15		15	31
16		16		16	
A Total for month ▶		B Total for month ▶		C Total for month ▶	
April Tax Liability		May Tax Liability		June Tax Liability	
1	17	1	17	1	17
2	18	2	18	2	18
3	19	3	19	3	19
4	20	4	20	4	20
5	21	5	21	5	21
6	22	6	22	6	22
7	23	7	23	7	23
8	24	8	24	8	24
9	25	9	25	9	25
10	26	10	26	10	26
11	27	11	27	11	27
12	28	12	28	12	28
13	29	13	29	13	29
14	30	14	30	14	30
15		15	31	15	
16		16		16	
D Total for month ▶		E Total for month ▶		F Total for month ▶	


IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is due by January 31 for previous year
 - Verify all amounts on Form 1099-R
 - Form 945-A
 - Calculate and Report Withholding



IRA Withholding Rules

- Basic 10% Calculations

- 
- Example 1: IRA Accountholder asks for a Distribution of \$2,575
He wants 10% taken out


$$\$2,575 \times 10\% = \$257.50$$

\$257.50 must be withheld from the distribution

\$2,317.50 is the net amount received by the accountholder

IRA Withholding Rules

- Basic 10% Calculations

- 
- Example 2: The IRA Accountholder requests that \$1,250 is withheld and that it should be 10% of the gross distribution


$\$1,250 \text{ divided by } 10\% (.10) = \$12,500$

The gross distribution amount is \$12,500

The net amount is \$11,250

IRA Withholding Rules

- Basic 10% Calculations

- 
- Example 3: The IRA Accountholder requests a distribution of \$4,500 net after 10% withholding.

\$4,500 divided by 90% (.9) = \$5,000

The gross distribution amount is \$5,000

The net amount is \$4,500

IRA Withholding Rules

- Basic 10% Calculations



- Example 4: The IRA Accountholder requests a distribution of \$4,500 and request 100% withheld.

The gross distribution amount is \$4,500
The net amount is \$0

The 1099-R is completed in this way

IRA Withholding Rules

- IRS Form 1099-R



9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. IRA Owner <div style="border: 1px solid black; padding: 5px; display: inline-block;"> Only Correct Method </div>				1 Gross distribution	2018		Form 1099-R
				\$ 4500.00			
2a Taxable amount	\$ 4500.00	2b Taxable amount not determined <input checked="" type="checkbox"/>		Total distribution <input type="checkbox"/>			
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a)	4 Federal income tax withheld	Copy A For Internal Revenue Service Center File with Form 1096.			
		\$	\$ 4500.00				
RECIPIENT'S name		5 Employee contributions/ Designated Roth contributions or insurance premiums	6 Net unrealized appreciation in employer's securities	For Privacy Act and Paperwork Reduction Act Notice, see the 2018 General Instructions for Certain Information Returns.			
Street address (including apt. no.)		7 Distribution code(s)	8 Other				
City or town, state or province, country, and ZIP or foreign postal code		1 or 7 <input type="checkbox"/> IRA/SEP/SIMPLE	\$ %				
10 Amount allocable to IRR within 5 years	11 1st year of desig. Roth contrib.	FATCA filing requirement <input type="checkbox"/>	9a Your percentage of total distribution %	9b Total employee contributions \$			
\$			12 State tax withheld \$	13 State/Payer's state no.	14 State distribution \$		
Account number (see instructions)		Date of payment	15 Local tax withheld \$	16 Name of locality	17 Local distribution \$		
			\$		\$		

Form 1099-R Cat. No. 14436Q

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

IRA Withholding Rules



- IRS Form 1099-R

9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.		1 Gross distribution		2018			
		2a Taxable amount		Form 1099-R			
PAYER'S TIN		RECIPIENT'S TIN		2b Taxable amount not determined <input type="checkbox"/>		Copy A For Internal Revenue Service Center File with Form 1096.	
				3 Capital gain (included in box 2a)			
RECIPIENT'S name		5 Employee contributions/ Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities		For Privacy Act and Paperwork Reduction Act Notice, see the 2018 General Instructions for Certain Information Returns.	
Street address (including apt. no.)		7 Distribution code(s)		8 Other			
City or town, state or province, country, and ZIP or foreign postal code		9a Your percentage of total distribution		9b Total employee contributions			
10 Amount allocable to IRR within 5 years		11 1st year of desig. Roth contrib.		12 State tax withheld		13 State/Payer's state no.	
Account number (see instructions)		Date of payment		15 Local tax withheld		16 Name of locality	
				17 Local distribution			

Form **1099-R** Cat. No. 14436Q www.irs.gov/Form1099R Department of the Treasury - Internal Revenue Service

IRA Withholding Rules

- ➔ IRS Form 1099-R Format remains the same

9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		2019		Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.				1 Gross distribution						Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.	
				2a Taxable amount							
				2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>					
PAYER'S TIN		RECIPIENT'S TIN		3 Capital gain (included in box 2a)		4 Federal income tax withheld					
RECIPIENT'S name				5 Employee contributions/ Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities					
Street address (including apt. no.)				7 Distribution code(s)		8 Other					
City or town, state or province, country, and ZIP or foreign postal code				9a Your percentage of total distribution %		9b Total employee contributions \$					
10 Amount allocable to IRR within 5 years		11 1st year of desig. Roth contrib.		FATCA filing requirement <input type="checkbox"/>		12 State tax withheld		13 State/Payer's state no.		14 State distribution	
\$						\$				\$	
Account number (see instructions)				Date of payment		15 Local tax withheld		16 Name of locality		17 Local distribution	
						\$				\$	

Form 1099-R Cat. No. 14436Q

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

IRA Withholding Rules

- ➔ • IRS Form 1099-R
 - Box 4 – Federal income tax withheld

Example:

IRA owner requests \$10,000 from his traditional IRA with Federal Income Tax Withholding of \$2,000. The IRA Owner is age 50. The IRA custodian issues a check for \$8,000

IRA Withholding Rules

- IRS Form 1099-R



9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. IRA Owner			1 Gross distribution \$ 10000.00		2019 Form 1099-R		Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.
			2a Taxable amount \$ 10000.00				
			2b Taxable amount not determined <input checked="" type="checkbox"/>		Total distribution <input type="checkbox"/>		
PAYER'S TIN		RECIPIENT'S TIN		3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$ 2000.00	
RECIPIENT'S name			5 Employee contributions/ Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$		
Street address (including apt. no.)			7 Distribution code(s) 1 <input type="checkbox"/> IRA/SEP/SIMPLE		8 Other \$ %		
City or town, state or province, country, and ZIP or foreign postal code			9a Your percentage of total distribution %		9b Total employee contributions \$		
10 Amount allocable to IRR within 5 years \$		11 1st year of desig. Roth contrib.	FATCA filing requirement <input type="checkbox"/>	12 State tax withheld \$		13 State/Payer's state no.	14 State distribution \$
Account number (see instructions)			Date of payment	15 Local tax withheld \$		16 Name of locality	17 Local distribution \$

Form **1099-R** Cat. No. 14436Q

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

IRA Withholding Rules

- Incorrect** IRS Form 1099-R



9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. IRA Owner			1 Gross distribution		2019		Copy A For Internal Revenue Service Center File with Form 1096.
			\$ 8000.00				
			2a Taxable amount		\$ 8000.00		
PAYER'S TIN		RECIPIENT'S TIN		2b Taxable amount not determined <input checked="" type="checkbox"/>		Total distribution <input type="checkbox"/>	
3 Capital gain (included in box 2a)		4 Federal income tax withheld		5 Employee contributions/ Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities	
RECIPIENT'S name		Street address (including apt. no.)		7 Distribution code(s) 1		8 Other	
City or town, state or province, country, and ZIP or foreign postal code		9a Your percentage of total distribution		9b Total employee contributions		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.	
10 Amount allocable to IRR within 5 years		11 1st year of desig. Roth contrib.		12 State tax withheld		13 State/Payer's state no.	
FATCA filing requirement <input type="checkbox"/>		14 State distribution		15 Local tax withheld		16 Name of locality	
Account number (see instructions)		Date of payment		17 Local distribution			

Form **1099-R** Cat. No. 14436Q

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

IRA Withholding Rules

- Incorrect** IRS Form 1099-R



9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.		
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. IRA Owner			1 Gross distribution		2019			
			\$ 2000.00					
			2a Taxable amount		\$ 2000.00		Form 1099-R	
PAYER'S TIN		RECIPIENT'S TIN		2b Taxable amount not determined <input checked="" type="checkbox"/>		Total distribution <input type="checkbox"/>		
3 Capital gain (included in box 2a)		4 Federal income tax withheld		4 Federal income tax withheld		Copy A For Internal Revenue Service Center File with Form 1096.		
\$		\$ 2000.00						
RECIPIENT'S name			5 Employee contributions/ Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities			
Street address (including apt. no.)			7 Distribution code(s) 7		8 Other		For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.	
City or town, state or province, country, and ZIP or foreign postal code			9a Your percentage of total distribution %		9b Total employee contributions %			
10 Amount allocable to IRR within 5 years		11 1st year of desig. Roth contrib.	FATCA filing requirement <input type="checkbox"/>	12 State tax withheld		13 State/Payer's state no.	14 State distribution	
\$				\$			\$	
Account number (see instructions)			Date of payment	15 Local tax withheld		16 Name of locality	17 Local distribution	
				\$			\$	

Form 1099-R Cat. No. 14436Q

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

IRA Withholding Rules

- IRS Form 1099-R



9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.		
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. IRA Owner - 2008 Only Correct Method			1 Gross distribution \$ 10000.00		2019 Form 1099-R		Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.	
			2a Taxable amount \$ 10000.00					
			2b Taxable amount not determined <input checked="" type="checkbox"/>		Total distribution <input type="checkbox"/>			
PAYER'S TIN		RECIPIENT'S TIN		3 Capital gain (included in box 2a) \$		4 Federal income tax withheld \$ 2000.00		
RECIPIENT'S name			5 Employee contributions/ Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$			
Street address (including apt. no.)			7 Distribution code(s) 1		8 Other \$ %			
City or town, state or province, country, and ZIP or foreign postal code			9a Your percentage of total distribution %		9b Total employee contributions \$			
10 Amount allocable to IRR within 5 years \$		11 1st year of desig. Roth contrib.		FATCA filing requirement <input type="checkbox"/>		12 State tax withheld \$		
				13 State/Payer's state no.		14 State distribution \$		
Account number (see instructions)			Date of payment		15 Local tax withheld \$		16 Name of locality \$	
					17 Local distribution \$			

Form **1099-R** Cat. No. 14436Q

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

IRA Withholding Rules

- Incorrect IRS Form 1099-R



9898		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0119		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S name, street address, city, state, and ZIP code IRA Owner - 2009 <div style="border: 1px solid black; background-color: yellow; padding: 2px; display: inline-block;">Incorrect</div>		1 Gross distribution		2009 Form 1099-R		Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2009 General Instructions for Forms 1099, 1098, 3921, 3922, 5498, and W-2G.	
		\$ 8000.00					
		2a Taxable amount		2b Taxable amount not determined <input checked="" type="checkbox"/>			
PAYER'S federal identification number		RECIPIENT'S identification number		3 Capital gain (included in box 2a)		4 Federal income tax withheld	
RECIPIENT'S name		5 Employee contributions /Designated Roth contributions or insurance premiums		6 Net unrealized appreciation in employer's securities			
Street address (including apt. no.)		7 Distribution code(s) 1		8 Other			
City, state, and ZIP code		9a Your percentage of total distribution %		9b Total employee contributions \$			
1st year of desig. Roth contrib.		10 State tax withheld		11 State/Payer's state no.		12 State distribution	
Account number (see instructions)		13 Local tax withheld		14 Name of locality		15 Local distribution	

Form 1099-R

Cat. No. 14436Q

Department of the Treasury - Internal Revenue Service

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is due
 - Verify all amounts on Form 10
 - Form 945-A
 - Calculate and Report Withhold
 - NEW** IRS Form 945-X



Adjusted Annual Return of
Withholding Federal Income Tax
or Claim for Refund

Form 945-X: Adjusted Annual Return of Withheld Federal Income Tax or Claim for Refund
(January 2009) Department of the Treasury - Internal Revenue Service OMB No. 1545-1430

Employer identification number (EIN) -

Name (not your trade name)

Trade name (if any)

Address

Number Street Suite or room number
City State ZIP code

Return You Are Correcting ...

Enter the calendar year of the return you are correcting:
 (YYYY)

Enter the date you discovered errors:

/ /
(MM / DD / YYYY)

Use this form to correct errors made on Form 945, Annual Return of Withheld Federal Income Tax, for **one year only**. Please type or print within the boxes. Do not attach this form to Form 945.

You MUST complete both pages. Read the instructions before you complete this form.

Part 1: Select ONLY one process.

1. **Adjusted return of withheld federal income tax.** Check this box if you underreported amounts. Also check this box if you overreported amounts and you would like to use the adjustment process to correct the errors. You must check this box if you are correcting both underreported and overreported amounts on this form. The amount shown on line 5, if less than 0, may only be applied as a credit to your Form 945 for the tax period in which you are filing this form.

2. **Claim.** Check this box if you overreported amounts only and you would like to use the claim process to ask for a refund or abatement of the amount shown on line 5. Do not check this box if you are correcting ANY underreported amounts on this form.

Part 2: Enter the corrections for this year. If any line does not apply, leave it blank.

	Column 1	Column 2	Column 3
	Total corrected amount (for ALL payees)	Amount originally reported or as previously corrected (for ALL payees)	Difference (If this amount is a negative number, use a minus sign.)
3. Federal income tax withheld (from line 1 of Form 945) . . .	<input type="text"/>	- <input type="text"/>	= <input type="text"/>
4. Backup withholding (from line 2 of Form 945) . . .	<input type="text"/>	- <input type="text"/>	= <input type="text"/>
5. Total. Combine the amounts in lines 3 and 4 of Column 3			<input type="text"/>

If line 5 is less than 0:

- If you checked line 1, this is the amount you want applied as a credit to your Form 945 for the tax period in which you are filing this form.
- If you checked line 2, this is the amount you want refunded or abated.

If line 5 is more than 0, this is the amount you owe. Pay this amount when you file this return. For information on how to pay, see *Amount You Owe* in the instructions for line 5.

Next →

For Paperwork Reduction Act Notice, see the Instructions. Cat. No. 20336X Form **945-X** (1-2009)

IRA Withholding Rules

- Reporting Requirements
 - Annually, IRS Form 945 is due
 - Verify all amounts on Form 1
 - Form 945-A
 - Calculate and Report W

Name (not your trade name)	Employer identification number (EIN)	Calendar Year (YYYY)
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Part 3: Explain your corrections for this year.

6. Check here if any corrections you entered on a line include both underreported and overreported amounts. Explain both your underreported and overreported amounts on line 7.

7. You must give us a detailed explanation of how you determined your corrections. See the instructions.

7. You must give us a detailed explanation of how you determined your corrections. See the instructions.

X (1-2009)



Line 7 – A detailed explanation of adjustment/claim is required

Part 4: Sign here. You must complete both pages of this form and sign it.

Under penalties of perjury, I declare that I have filed an original Form 945 and that I have examined this adjusted return or claim and any schedules or statements that are attached, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.



Sign your name here

Print your name here

Paid Preparer Completes, Signs and Dates if applicable

Your title here

Best daytime phone

EIN Calendar Year (YYYY)

overreported amounts.

See the instructions.

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Paid preparer's use only

Check if you are self-employed

Preparer's name

Preparer's SSN/PTIN

Preparer's signature

Date

Firm's name (or yours if self-employed)

EIN

Address

Phone

City

State

ZIP code



Part 4: Sign here. You must complete both pages of this form and sign it.

Under penalties of perjury, I declare that I have filed an original Form 945 and that I have examined this adjusted return or claim and any schedules or statements that are attached, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.



Sign your name here

Print your name here

Print your title here

Date

Best daytime phone

Paid preparer's use only

Check if you are self-employed

Preparer's name

Preparer's SSN/PTIN

Preparer's signature

Date

Firm's name (or yours if self-employed)

EIN

Address

Phone

City

State

ZIP code

- ➔ • Non-resident alien withholding procedures

IRA Withholding Rules

- Non-resident alien withholding procedures
- And certain resident aliens



IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)



IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)
 - Could have tax treaty differing percentage



IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)
 - Could have tax treaty differing percentage
 - IRS Form W-8BEN or W-8IMY is required



IRA Withholding Rules

- Non-resident alien withholder
- Usually 30% withholding
- Could have tax treaty difference
- IRS Form W-8BEN or W-8BEN-E



Form W-8BEN (Rev. July 2017) Department of the Treasury Internal Revenue Service	Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals) ▶ For use by individuals. Entities must use Form W-8BEN-E. ▶ Go to www.irs.gov/FormW8BEN for instructions and the latest information. ▶ Give this form to the withholding agent or payer. Do not send to the IRS.	OMB No. 1545-1621
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Do NOT use this form if:

- You are NOT an individual **W-8BEN-E**
- You are a U.S. citizen or other U.S. person, including a resident alien individual **W-9**
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services) **W-8ECI**
- You are a beneficial owner who is receiving compensation for personal services performed in the United States **8233 or W-4**
- You are a person acting as an intermediary **W-8IMY**

Instead, use Form:

Note: If you are resident in a FATCA partner jurisdiction (i.e., a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner	2 Country of citizenship
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.	
City or town, state or province. Include postal code where appropriate.	Country
4 Mailing address (if different from above)	
City or town, state or province. Include postal code where appropriate.	Country
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)	6 Foreign tax identifying number (see instructions)
7 Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY) (see instructions)

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding: _____

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself for chapter 4 purposes,
- The person named on line 1 of this form is not a U.S. person,
- The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income.
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here ▶

Signature of beneficial owner (or individual authorized to sign for beneficial owner)	Date (MM-DD-YYYY)
Print name of signer	Capacity in which acting (if form is not signed by beneficial owner)

IRA Withholding Rules



- Non-resident alien withhold
- Usually 30% withholding
- Could have tax treaty diff
- IRS Form W-8BEN or

Form W-8IMY
(Rev. June 2017)

Department of the Treasury
Internal Revenue Service

Certificate of Foreign Intermediary, Foreign Flow-Through Entity, or Certain U.S. Branches for United States Tax Withholding and Reporting

▶ Section references are to the Internal Revenue Code.
▶ Go to www.irs.gov/FormW8IMY for instructions and the latest information.
▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do not use this form for:

- A beneficial owner solely claiming foreign status or treaty benefits (other than a qualified intermediary (QI) acting as a qualified derivatives dealer (QDD))
- A hybrid entity claiming treaty benefits on its own behalf (other than a QI acting as a QDD)
- A foreign person claiming that income is effectively connected with the conduct of a trade or business in the United States
- A disregarded entity with a single foreign owner that is the beneficial owner (other than a QI acting as a QDD) of the income to which this form relates. Instead, the single foreign owner should use
- A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b)
- U.S. entity or U.S. citizen or resident
- A foreign person documenting itself for purposes of section 6050W

Instead, use Form:

- W-8BEN or W-8BEN-E
- W-8BEN-E
- W-8ECI
- W-8BEN, W-8ECI, or W-8BEN-E
- W-8EXP
- W-9
- W-8BEN, W-8BEN-E, or W-8ECI

Part I Identification of Entity

1 Name of organization that is acting as intermediary

2 Country of incorporation or organization

3 Name of disregarded entity (if applicable), see instructions

4 Chapter 3 Status (entity type) (Must check one box only.):

<input type="checkbox"/> QI (including a QDD). Complete Part III. <input type="checkbox"/> Nonqualified intermediary. Complete Part IV. <input type="checkbox"/> Territory financial institution. Complete Part V. <input type="checkbox"/> U.S. branch. Complete Part VI. <input type="checkbox"/> Withholding foreign partnership. Complete Part VII.	<input type="checkbox"/> Withholding foreign trust. Complete Part VII. <input type="checkbox"/> Nonwithholding foreign partnership. Complete Part VIII. <input type="checkbox"/> Nonwithholding foreign simple trust. Complete Part VIII. <input type="checkbox"/> Nonwithholding foreign grantor trust. Complete Part VIII.
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5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status.) (Must check one box only.):

<input type="checkbox"/> Nonparticipating foreign financial institution (FFI) (including an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner). Complete Part IX (if applicable). <input type="checkbox"/> Participating FFI. <input type="checkbox"/> Reporting Model 1 FFI. <input type="checkbox"/> Reporting Model 2 FFI. <input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XIX). <input type="checkbox"/> Territory financial institution. Complete Part V. <input type="checkbox"/> Sponsored FFI (other than a certified deemed-compliant sponsored, closely held investment vehicle). Complete Part X. <input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part XII. <input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part XIII. <input type="checkbox"/> Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part XIV. <input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. Complete Part XV.	<input type="checkbox"/> Certain investment entities that do not maintain financial accounts. Complete Part XVI. <input type="checkbox"/> Owner-documented FFI. Complete Part XI. <input type="checkbox"/> Restricted distributor. Complete Part XVII. <input type="checkbox"/> Foreign central bank of issue. Complete Part XVIII. <input type="checkbox"/> Nonreporting IGA FFI. Complete Part XIX. <input type="checkbox"/> Exempt retirement plans. Complete Part XX. <input type="checkbox"/> Excepted nonfinancial group entity. Complete Part XXI. <input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XXII. <input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XXIII. <input type="checkbox"/> Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIV. <input type="checkbox"/> Excepted territory NFFE. Complete Part XXV. <input type="checkbox"/> Active NFFE. Complete Part XXVI. <input type="checkbox"/> Passive NFFE. Complete Part XXVII. <input type="checkbox"/> Direct reporting NFFE. <input type="checkbox"/> Sponsored direct reporting NFFE. Complete Part XXVIII.
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6 Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address** (other than a registered address).

City or town, state or province. Include postal code where appropriate.	Country
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7 Mailing address (if different from above)

City or town, state or province. Include postal code where appropriate.	Country
---	---------

8 U.S. taxpayer identification number, if required ▶

QI-EIN WP-EIN WT-EIN EIN

9 GIN (if applicable)

10 Reference number(s) (see instructions)

For Paperwork Reduction Act Notice, see separate instructions. Cat No. 25402Q Form **W-8IMY** (Rev. 6-2017)

IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)
 - Could have tax treaty differing percentage
 - Special reporting using IRS Form 1042 series



IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)
 - Could have tax treaty differing percentage
 - Special reporting using IRS Form 1042 series
 - Rules apply to IRA Accountholders and IRA Beneficiaries



IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)
 - Could have tax treaty differing percentage
 - Special reporting using IRS Form 1042 series
 - Rules apply to IRA Accountholders and IRA Beneficiaries
 - IRS Form 1042-S instead of 1099-R



IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)
 - Could have tax treaty differing percentage
 - Special reporting using IRS Form 1042 series
 - IRS Form 1042-T Transmittal not Form 1096



IRA Withholding Rules

- Non-resident alien withholding procedures
 - Usually 30% withholding is due (*Recommended procedure*)
 - Could have tax treaty differing percentage
 - Special reporting using IRS Form 1042 series
 - IRS Form 1042-T Transmittal not Form 1096
 - IRS Form 1042
Annual Summary
not Form 945



Form **W-8BEN** **Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)**
 (Rev. July 2017) **► For use by individuals. Entities must use Form W-8BEN-E.** OMB No. 1545-1621
 Department of the Treasury **► Go to www.irs.gov/FormW8BEN for instructions and the latest information.**
 Internal Revenue Service **► Give this form to the withholding agent or payer. Do not send to the IRS.**

- Do NOT use this form if:**
- You are NOT an individual **Instead, use Form: W-8BEN-E**
 - You are a U.S. citizen or other U.S. person, including a resident alien individual **W-9**
 - You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services) **W-8ECI**
 - You are a beneficial owner who is receiving compensation for personal services performed in the United States **8233 or W-4**
 - You are a person acting as an intermediary **W-8IMY**

Note: If you are resident in a FATCA partner jurisdiction (i.e., a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner **2** Country of citizenship

3 Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address.**

City or town, state or province. Include postal code where appropriate. Country

4 Mailing address (if different from above)

City or town, state or province. Include postal code where appropriate. Country

5 U.S. taxpayer identification number (SSN or ITIN, if required (see instructions)) **6** Foreign tax identifying number (see instructions)

7 Reference number(s) (see instructions) **8** Date of birth (MM-DD-YYYY) (see instructions)

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding: _____

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself for chapter 4 purposes,
- The person named on line 1 of this form is not a U.S. person,
- The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income,
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here ►

 Signature of beneficial owner (or individual authorized to sign for beneficial owner) Date (MM-DD-YYYY)

 Print name of signer Capacity in which acting (if form is not signed by beneficial owner)

Form **W-8BEN**

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

OMB No. 1545-1621

(Rev. July 2017)

Department of the Treasury
Internal Revenue Service

► **For use by individuals. Entities must use Form W-8BEN-E.**
► **Go to www.irs.gov/FormW8BEN for instructions and the latest information.**
► **Give this form to the withholding agent or payer. Do not send to the IRS.**

Do NOT use this form if:

- You are NOT an individual **W-8BEN-E**
- You are a U.S. citizen or other U.S. person, including a resident alien individual **W-9**
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services) **W-8ECI**
- You are a beneficial owner who is receiving compensation for personal services performed in the United States **8233 or W-4**
- You are a person acting as an intermediary **W-8IMY**

Instead, use Form:

Note: If you are resident in a FATCA partner jurisdiction (i.e., a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner	2 Country of citizenship
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.	
City or town, state or province. Include postal code where appropriate.	Country
4 Mailing address (if different from above)	
City or town, state or province. Include postal code where appropriate.	Country
5 U.S. taxpayer identification number (SSN or ITIN, if required (see instructions))	6 Foreign tax identifying number (see instructions)
7 Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY) (see instructions)

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding: _____

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself for chapter 4 purposes,
 - The person named on line 1 of this form is not a U.S. person,
 - The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income,
 - The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
 - For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.
- Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here

Signature of beneficial owner (or individual authorized to sign for beneficial owner) Date (MM-DD-YYYY)

Print name of signer Capacity in which acting (if form is not signed by beneficial owner)

IRA Withholding Rules

Form 1042-S		Foreign Person's U.S. Source Income Subject to Withholding 2019			OMB No. 1545-0096									
Department of the Treasury Internal Revenue Service		▶ Go to www.irs.gov/Form1042S for instructions and the latest information.			Copy A for Internal Revenue Service									
		UNIQUE FORM IDENTIFIER <input type="checkbox"/> AMENDED <input type="checkbox"/> AMENDMENT NO.												
1 Income code	2 Gross income	3 Chapter indicator. Enter '3' or '4'	13e Recipient's U.S. TIN, if any		13f Ch. 3 status code									
		3a Exemption code	4a Exemption code			13g Ch. 4 status code								
		3b Tax rate	4b Tax rate	13h Recipient's GIIN	13i Recipient's foreign tax identification number, if any	13j LOB code number, if any								
5 Withholding allowance			13k Recipient's account number											
6 Net income			13l Recipient's date of birth (YYYYMMDD)											
7a Federal tax withheld			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:12.5%; height: 20px;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> </tr> </table>											
7b Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) <input type="checkbox"/>														
7c Check if withholding occurred in subsequent year with respect to a partnership interest <input type="checkbox"/>														
8 Tax withheld by other agents			14a Primary Withholding Agent's Name (if applicable)											
9 Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) ()			14b Primary Withholding Agent's EIN		15 Check if pro-rata basis reporting <input type="checkbox"/>									
10 Total withholding credit (combine boxes 7a, 8, and 9)			15a Intermediary or flow-through entity's EIN, if any		15b Ch. 3 status code	15c Ch. 4 status code								
11 Tax paid by withholding agent (amounts not withheld) (see instructions)			15d Intermediary or flow-through entity's name											
12a Withholding agent's EIN	12b Ch. 3 status code	12c Ch. 4 status code	15e Intermediary or flow-through entity's GIIN											
12d Withholding agent's name			15f Country code	15g Foreign tax identification number, if any										
12e Withholding agent's Global Intermediary Identification Number (GIIN)			15h Address (number and street)											
12f Country code	12g Foreign tax identification number, if any		15i City or town, state or province, country, ZIP or foreign postal code											
12h Address (number and street)			16a Payer's name		16b Payer's TIN									
12i City or town, state or province, country, ZIP or foreign postal code			16c Payer's GIIN		16d Ch. 3 status code	16e Ch. 4 status code								
13a Recipient's name		13b Recipient's country code	17a State income tax withheld	17b Payer's state tax no.	17c Name of state									
13c Address (number and street)														
13d City or town, state or province, country, ZIP or foreign postal code														

IRA Withholding Rules

Form 1042-S		Foreign Person's U.S. Source Income Subject to Withholding			2019		OMB No. 1545-0096	
Department of the Treasury Internal Revenue Service		▶ Go to www.irs.gov/Form1042S for instructions and the latest information.					Copy B for Recipient	
		UNIQUE FORM IDENTIFIER			AMENDED		AMENDMENT NO.	
1 Income code	2 Gross income	3 Chapter indicator. Enter '3' or '4'		13a Recipient's U.S. TIN, if any		13f Ch. 3 status code		
		3a Exemption code	4a Exemption code	13b Recipient's GIIN		13g Ch. 4 status code		
		3b Tax rate	4b Tax rate	13c Recipient's foreign tax identification number, if any		13j LOB code number, if any		
5 Withholding allowance				13k Recipient's account number				
6 Net income				13l Recipient's date of birth (YYYYMMDD)				
7a Federal tax withheld				14a Primary Withholding Agent's Name (if applicable)				
7b Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) <input type="checkbox"/>				14b Primary Withholding Agent's EIN				
7c Check if withholding occurred in subsequent year with respect to a partnership interest <input type="checkbox"/>				15 Check if pro-rata basis reporting <input type="checkbox"/>				
8 Tax withheld by other agents				15a Intermediary or flow-through entity's EIN, if any		15b Ch. 3 status code	15c Ch. 4 status code	
9 Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) ()				15d Intermediary or flow-through entity's name				
10 Total withholding credit (combine boxes 7a, 8, and 9)				15e Intermediary or flow-through entity's GIIN				
11 Tax paid by withholding agent (amounts not withheld) (see instructions)				15f Country code		15g Foreign tax identification number, if any		
12a Withholding agent's EIN	12b Ch. 3 status code	12c Ch. 4 status code		15h Address (number and street)				
12d Withholding agent's name				15i City or town, state or province, country, ZIP or foreign postal code				
12e Withholding agent's Global Intermediary Identification Number (GIIN)				16a Payer's name				
12f Country code	12g Foreign tax identification number, if any			16b Payer's TIN				
12h Address (number and street)				16c Payer's GIIN		16d Ch. 3 status code	16e Ch. 4 status code	
12i City or town, state or province, country, ZIP or foreign postal code				17a State income tax withheld		17b Payer's state tax no.	17c Name of state	
13a Recipient's name		13b Recipient's country code						
13c Address (number and street)								
13d City or town, state or province, country, ZIP or foreign postal code								

(keep for your records)

Form **1042-S** (2019)

DO NOT STAPLE

Form 1042-T Department of the Treasury Internal Revenue Service	Annual Summary and Transmittal of Forms 1042-S	OMB No. 1545-0096 2018
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▶ Go to www.irs.gov/Form1042T for the latest information.

Name of withholding agent	Ch. 4 Status Code <input type="checkbox"/>	Employer identification number
	Ch. 3 Status Code <input type="checkbox"/>	
Number, street, and room or suite no.		
City or town, state or province, country, and ZIP or foreign postal code		

1 Type of paper Forms 1042-S attached:

a Choose only one: Chapter 4 or Chapter 3 (enter 4 or 3)

b Check only one box: Original Amended

c Check if pro-rata ▶

d Enter the number of paper Forms 1042-S attached ▶

2 Total gross income reported on all paper Forms 1042-S (box 2) attached \$

3 Total federal tax withheld on all paper Forms 1042-S attached:

a Total federal tax withheld under Chapter 4 \$

b Total federal tax withheld under Chapter 3 \$

Caution: If you have already filed a Form 1042 and an attached Form 1042-S causes the gross income or tax withheld information shown on your previously filed Form 1042 to change, you must file an amended Form 1042. See the instructions on page 2.

If this is your FINAL return, enter an "X" here (see instructions) ▶

Please return this entire page to the Internal Revenue Service.

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Your signature	Title	Date	Daytime phone number
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Go to www.irs.gov/Form1042 for instructions and the latest information.

If this is an amended return, check here

Name of withholding agent		Employer identification number	For IRS Use Only	
Ch. 3 Status Code		Ch. 4 Status Code	CC	FD
Number, street, and room or suite no. (if a P.O. box, see instructions)			RD	FF
City or town, state or province, country, and ZIP or foreign postal code			CAF	FP
			CR	I
			EDC	SIC

If you do not expect to file this return in the future, check here Enter date final income paid

Section 1 Record of Federal Tax Liability (Do not show federal tax deposits here)

line No.	Period ending	Tax liability for period (including any taxes assumed on Form(s) 1000)	line No.	Period ending	Tax liability for period (including any taxes assumed on Form(s) 1000)	line No.	Period ending	Tax liability for period (including any taxes assumed on Form(s) 1000)
1	7		21	7		41	7	
2	15		22	15		42	15	
3	22		23	22		43	22	
4	31		24	31		44	30	
5	Jan. total		25	May total		45	Sept. total	
6	7		26	7		46	7	
7	15		27	15		47	15	
8	22		28	22		48	22	
9	28		29	30		49	31	
10	Feb. total		30	June total		50	Oct. total	
11	7		31	7		51	7	
12	15		32	15		52	15	
13	22		33	22		53	22	
14	31		34	31		54	30	
15	Mar. total		35	July total		55	Nov. total	
16	7		36	7		56	7	
17	15		37	15		57	15	
18	22		38	22		58	22	
19	30		39	31		59	31	
20	Apr. total		40	Aug. total		60	Dec. total	

61 No. of Forms 1042-S filed: a On paper _____ b Electronically _____

62 Total gross amounts reported on all Forms 1042-S and 1000:

a Total U.S. source FDAP income (other than U.S. source substitute payments) reported	62a
b Total U.S. source substitute payments reported:	
(1) Total U.S. source substitute dividend payments reported	62b(1)
(2) Total U.S. source substitute payments reported other than substitute dividend payments	62b(2)
c Total gross amounts reported (Add lines 62a-b)	62c
d Enter gross amounts actually paid if different from gross amounts reported	62d

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. No

Third Party Designee

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than withholding agent) is based on all information of which preparer has any knowledge.

Your signature _____ Date _____ Capacity in which acting _____

Daytime phone number _____

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____

Firm's name _____ Firm's EIN _____

Firm's address _____ Phone no. _____

- ➔ • State withholding procedures may also apply
 - Many states have similar withholding procedures

IRA Withholding Rules



- Backup withholding does NOT apply to IRAs
- IRS Form W-9 can be used for SSN verification however

Form W-9 (Rev. October 2007) Department of the Treasury Internal Revenue Service	Request for Taxpayer Identification Number and Certification		Give form to the requester. Do not send to the IRS.
	Name (as shown on your income tax return)		
	Business name, if different from above		
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶		
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)	

2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal

Part I Taxpayer Identification Number (TIN)	
Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.	
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.	
Part II Certification	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and	
Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and	
3. I am a U.S. citizen or other U.S. person (defined below).	
Certification Instructions. You must cross out Item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, Item 2 does not apply.	
For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.	
Sign Here	Signature of U.S. person ▶
	Date ▶
General Instructions	
Section references are to the Internal Revenue Code unless otherwise noted.	
Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:	
<ul style="list-style-type: none">• An individual who is a U.S. citizen or U.S. resident alien,• A partnership, corporation, company, or association created or	

For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

requesting it (the requester) and, when applicable, to:	has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),	The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:
2. Certify that you are not subject to backup withholding, or	<ul style="list-style-type: none">• The U.S. owner of a disregarded entity and not the entity,
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.	
Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.	



This concludes this Webinar. We thank you for attending.
If you have any questions regarding the subject covered in this
Webinar please feel free to

call us at **800.346.3961** or
send an e-mail to info@pension-specialists.com

or visit us on the internet at
www.pension-specialists.com