## FEDERAL INCOME TAX WITHHOLDING FORM

## National Electrical Benefit Fund

If you are not a citizen or resident alien of the United Sates, do not complete this form.

Instructions: Please complete and return this entire form to our office. Withholding can be indicated as a dollar amount or as a percentage.

MONTHLY PA	YMENT		
Please do no	t withhold Federal Income Ta	x from my monthly NEBF	pension payments.
The state of the s	old Federal Income Tax of \$_ ion payments.	or	_% from each of my NEBF
SSN	DATE	SIGNATURE _	
The pension paymer		I Electrical Benefit Fund (NI	EBF) are subject to Federal Incom

You may elect not to have Federal Income Tax withheld from your monthly and/or retroactive pension payments, or inform us of the amount or percentage of Federal Income Tax you would like to have withheld. Your election will remain in effect until you change it, which you may do at any time (and as often as you wish) by signing a new election form, which may be obtained from this office.

If your monthly pension payment exceeds \$1,680.00\* and you do not return the election form to us, Federal Income Tax will be withheld from your pension as if you were a married individual claiming three withholding allowances.

If you will be receiving more than \$20,160.00\* from the NEBF this year (regular monthly benefits plus retroactive payments, if applicable), it is possible that you could owe Federal Income Tax for the year.

If you elect not to have Federal Income Tax withheld, or if you do not have enough Federal Income Tax withheld from your pension payments, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient.

\*IRS Maximum Income Amounts Effective as of January 1, 2014. You may want to consult with a professional tax advisor or contact your local Internal Revenue Service office to determine the best withholding amount for you.