

# STATE RETIREMENT PAYROLL SYSTEM

## FEDERAL AND CONNECTICUT TAX WITHHOLDING CHANGE FORM

CO-1093 New 7/2007



Print Your Name

Social Security Number

Address

City

State

Zip

( )

/01/

Home Phone Number

Email Address

Month Effective

### FEDERAL TAX ELECTION

Please select only one option below:

- No withholding. I realize that I am liable for payment of Federal Income Tax on my retirement benefit.
- I wish to have \$ \_\_\_\_\_ withheld monthly for Federal Income Tax.
- I would like to have my withholding calculation based on the following status and exemptions:  
Circle One:      Married      Single      Exemptions: \_\_\_\_\_  
(zero exemptions will be coded if none is specified)  
Additional option for choice 3: I wish to have \$ \_\_\_\_\_ withheld from my monthly benefit payment in addition to the withholding based on status and exemptions.
- I wish to withhold \$ \_\_\_\_\_ **more** than my current withholding.

### CONNECTICUT TAX ELECTION

The State Retirement Payroll System can only withhold State taxes for the State of Connecticut. If you have any questions on your Connecticut tax obligation, contact the Department of Revenue at 860-297-5962 (within Hartford calling area or outside of Connecticut) or 800-382-9463 (elsewhere in Connecticut) or visit their website @ [www.ct.gov/drs](http://www.ct.gov/drs).

- I elect to have \$ \_\_\_\_\_ withheld monthly for Connecticut Income Tax.  
(Whole dollar amount only, percentages not acceptable. \$10.00 minimum)
- I elect to have **NO** Connecticut income tax withheld from my retirement benefit.

Member's Signature

Date

Please return this completed form to the Retirement & Benefit Services Division at the above address. Forms received by the 1<sup>st</sup> of the month will be processed for the payroll issued at the end of that month.