



# MANDATORY STATE INCOME TAX WITHHOLDING ELECTION FOR PERIODIC WITHDRAWALS—NOT ROLLOVER ELIGIBLE AND INCOME TEST DRIVE—NOT ROLLOVER ELIGIBLE

NEED HELP? 800-842-2252

Weekdays

8 a.m. – 10 p.m. (ET)

Saturday

9 a.m. – 6 p.m. (ET)

Or visit [TIAA.org](https://www.tiaa.org).

Have your user ID and password ready.

## PLEASE READ BEFORE FILLING OUT FORM

State laws may require mandatory state income tax be withheld from your distributions. Our records indicate that you are a legal resident of one of the states listed in Section 3 of this form, and may therefore be subject to state withholding from your cash distributions. If your legal residence is not one of the states listed on this form, please contact us to ensure you receive the proper withholding form. If you do not return a withholding form, TIAA is required to withhold state income taxes at the state tax default rate shown on this form. Before making an election, be sure to read any notes in Section 3 that may apply to your state of residence.

Please keep in mind:

1. Non-Rollover Eligible Payments are payments that cannot be rolled over to an IRA or other similar retirement plan.
2. There may be penalties for not paying enough state income tax during the year.
3. State tax withholding rates are always subject to change.
4. If you are a resident of Kansas and the distribution is from a Kansas Board of Regents plan, the distribution may be exempt from tax; therefore, you may elect to have no withholding.
5. If you are a resident of North Carolina and the distribution is considered exempt under the Bailey/Emory/Patton Settlement, the distribution may be exempt from tax; therefore, you may elect to have no withholding.
6. If you are a resident of Michigan and:
  - You (or your spouse if filing jointly) were born prior to 1946, all benefits from public sources (as defined by the Michigan Department of Treasury) are exempt from Michigan state taxes. Benefits from private sources may be subtracted for a single filer or married filer filing separately or if married filing a joint return for the current tax year. Any private pension payment in excess of Michigan income limits is taxable.
  - You (or your spouse if filing jointly) were born during the period 1946 through 1952, a portion of all private and public pension and annuity benefits may be subtracted from Michigan taxable income.
  - You (and your spouse) were born after 1952, all private and public pension and annuity benefits are fully taxable and may not be subtracted from Michigan taxable income.
  - If you feel your distribution is not subject to state taxes, then you may elect to have no withholding.

If you elected Income Test Drive, please be sure to complete both Sections 3A and 3B for the Mandatory State Income Tax Withholding Election. Otherwise, you can leave Section 3B blank.

Be sure to read and fill out all necessary parts of this form to avoid any delay in the processing of your request.

You can change your withholding elections online by visiting [TIAA.org](https://www.tiaa.org).

Any tax information included in this written or electronic communication was not intended or written to be used, and it cannot be used by the taxpayer, for the purpose of avoiding any penalties that may be imposed on the taxpayer by any governmental taxing authority or agency.





**MANDATORY STATE INCOME TAX WITHHOLDING ELECTION**  
**FOR PERIODIC WITHDRAWALS–NOT ROLLOVER ELIGIBLE**  
**AND INCOME TEST DRIVE–NOT ROLLOVER ELIGIBLE**

Please print using black or dark blue ink.

**IMPORTANT:** A full Social Security Number/Taxpayer Identification Number is required to process your request.

If you claim residence AND citizenship outside the U.S., you must complete Form W-8BEN in addition to this form to certify your foreign tax status. To print the W-8BEN form, go to [TIAA.org/forms](http://TIAA.org/forms), and scroll to Find tax forms.

**1. PROVIDE YOUR INFORMATION**

|   |                           |                      |                |  |
|---|---------------------------|----------------------|----------------|--|
| First Name  |                           |                      | Middle Initial |  |
| Last Name   |                           |                      | Suffix         |  |
| Social Security Number/<br>Taxpayer Identification Number                                       | Contact Telephone Number  | Extension            |                |  |
| <input type="text"/>  | <input type="text"/>      | <input type="text"/> |                |  |
| State of Legal Residence<br><small>(if outside the U.S., write in Country of Residence)</small> | Citizenship (if not U.S.) |                      |                |  |
| <input type="text"/>  | <input type="text"/>      |                      |                |  |

**2. PROVIDE YOUR CONTRACT NUMBERS**

Please indicate the contract number to which your tax election will apply.

|                           |                      |                                     |
|---------------------------|----------------------|-------------------------------------|
| TIAA Number               | CREF Number          |                                     |
| <input type="text"/>      | <input type="text"/> |                                     |
| ATA/Life Insurance Number |                      |                                     |
| <input type="text"/>      |                      |                                     |
| Plan Number               | Sub Plan Number      | Income Test Drive Reference Number* |
| <input type="text"/>      | <input type="text"/> | <input type="text"/>                |
| Plan Name                 | <input type="text"/> |                                     |

**NOTE:** The Plan and Sub Plan numbers are for internal use only.

\*If you are updating state withholding for a contract with Income Test Drive, please provide the Income Test Drive reference number; otherwise, this field can be left blank.

**3. WITHHOLDING ELECTIONS**

I am selecting my state withholding for my Periodic Withdrawal that is not rollover eligible (Complete Section 3A). (If you elected Income Test Drive, you must also complete Section 3B.)

I am selecting my state withholding for my Income Test Drive payments that is not rollover eligible (Complete Section 3B).





**MANDATORY STATE INCOME TAX WITHHOLDING ELECTION  
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**3A. WITHHOLDING ELECTION FOR MY PERIODIC WITHDRAWAL –  
NOT ROLLOVER ELIGIBLE**

Based on your state of legal residence, state income taxes will be withheld from your payments at the following rate, unless you choose one of the available options.

**NOTE:** Marital status and allowances are only an option for residents of Arkansas, Georgia, Kansas, Maine, Michigan, Nebraska, North Carolina, Oklahoma, Oregon and Vermont.

\* Iowa residents: If you do not make a state election and your payments are less than \$500 per month, there will be no state withholding.

|             |                            |                |                           |
|-------------|----------------------------|----------------|---------------------------|
| Arkansas    | Married with 3 allowances  | Massachusetts  | 0 exemptions              |
| California  | 10% of federal withholding | Michigan       | 4.25%                     |
| Connecticut | 6.99%                      | Nebraska       | Married with 3 allowances |
| Delaware    | 5%                         | North Carolina | Single with 0 allowances  |
| Georgia     | Married with 3 allowances  | Oklahoma       | Married with 3 allowances |
| Iowa*       | 5%                         | Oregon         | Single with 0 exemptions  |
| Kansas      | Married with 3 allowances  | Vermont        | Married with 3 allowances |
| Maine       | Single with 0 exemptions   | Virginia       | 0 exemptions              |

If you would like state withholding from your distribution in an amount **OTHER THAN** the state prescribed rate, please check the appropriate box below and indicate your election.

- Marital Status:
- Single
  - Married (Does not apply to Massachusetts and Virginia)
  - Married Filing Separate (Applies Only to Georgia)
  - Head of Household (Applies Only to Arkansas, Georgia, Massachusetts and North Carolina)
  - Total number of withholding allowances
  - Withhold the following **ADDITIONAL** amount from each payment \$
  - I choose the following percentage be withheld from the taxable portion of my payment  %
  - I choose **NOT** to have taxes withheld from my payment or my distribution is exempt. (For Iowa, Maine, Massachusetts and Nebraska Only: You can elect no state withholding only if you have elected no federal withholding.)





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**3B. WITHHOLDING ELECTION FOR MY INCOME TEST DRIVE PAYMENT(S) – NOT ROLLOVER ELIGIBLE**

Based on your state of legal residence, state income taxes will be withheld from your payments at the following rate, unless you choose one of the available options.

**Opting out of federal withholding also opts out of state withholding, except for Arkansas and Michigan.**

**Virginia residents:** Withholding on IRA and SEPs is voluntary.

| State          | Default                    |
|----------------|----------------------------|
| Arkansas       | 3%                         |
| California     | 10% of Federal Withholding |
| Delaware       | 5%                         |
| Iowa           | 5%                         |
| Kansas         | 4.50%                      |
| Maine          | 5%                         |
| Massachusetts  | 5.1%                       |
| Michigan       | 4.25%                      |
| Nebraska       | 5%                         |
| North Carolina | 4%                         |
| Oklahoma       | 5%                         |
| Oregon         | 8%                         |
| Vermont        | 24% of federal withholding |
| Virginia       | 4%                         |

If you would like state withholding from your distribution in an amount **OTHER THAN** the state prescribed rate, please check the appropriate box below and indicate your election.

Withhold the following **ADDITIONAL** amount from each payment \$

I choose the following percentage be withheld from the taxable portion of my payment  %

For states in the above table (except California) the percentage you choose must at least equal the default percentage shown

**Arizona only allows for**  10.7%  20.3%  24.5%  26.7%  33.1%

39.5% of federal withholding

I choose **NOT** to have taxes withheld from my payment or my distribution is exempt. (If Federal taxes are being withheld, does not apply to Kansas (except for exempt Board of Regents plan distributions), Massachusetts, Nebraska, Oklahoma)





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**4. WITHHOLDING ELECTIONS CONNECTICUT ONLY**

| <b>Married Filing Jointly</b>  | <b>Withholding Code</b> |
|--|-------------------------|
| Our expected combined annual gross income is less than or equal to \$24,000 or no withholding is necessary (i.e., withholding from other income source). | E                       |
| My spouse has income subject to withholding and our expected combined annual gross income is greater than \$24,000 and less than or equal to \$100,500   | A                       |
| My spouse does not have income subject to withholding and our expected combined annual gross income is greater than \$24,000.                            | C                       |
| My spouse has income subject to withholding and our expected combined annual gross income is greater than \$100,500                                      | D                       |
| I have significant other income and wish to avoid having too little tax withheld   | D                       |
| <b>Married Filing Separately</b>   | <b>Withholding Code</b> |
| My expected annual gross income is less than or equal to \$12,000 or no withholding is necessary (i.e., withholding from other income source).           | E                       |
| My expected annual gross income is greater than \$12,000.  | A                       |
| I have significant other income and wish to avoid having too little tax withheld.  | D                       |
| <b>Qualifying Widow(er) With Dependent Child</b>   | <b>Withholding Code</b> |
| My expected annual gross income is less than or equal to \$24,000 or no withholding is necessary (i.e., withholding from other income source).           | E                       |
| My expected annual gross income is greater than \$24,000.  | C                       |
| I have significant other income and wish to avoid having too little tax withheld.  | D                       |
| <b>Single</b>  | <b>Withholding Code</b> |
| My expected annual gross income is less than or equal to \$15,000 or no withholding is necessary (i.e., withholding from other income source).           | E                       |
| My expected annual gross income is greater than \$15,000.  | F                       |
| I have significant other income and wish to avoid having too little tax withheld.  | G                       |
| <b>Head of Household</b>   | <b>Withholding Code</b> |
| My expected annual gross income is less than or equal to \$19,000 or no withholding is necessary (i.e., withholding from other income source).           | E                       |
| My expected annual gross income is greater than \$19,000.  | B                       |
| I have significant other income and wish to avoid having too little tax withheld.  | D                       |

To see the amount of tax that will be withheld monthly, go to [www.ct.gov/drs](http://www.ct.gov/drs) and select 2018 CT-W4P Information under Featured Links, and select Monthly Connecticut Withholding Calculator - CT-W4P.

**Instructions for Recipients of Regularly Scheduled Retirement Pension:**

**Step 1:** (Required) Select the filing status and description of income from the chart above that best matches your situation. Enter the corresponding Withholding Code on Line 1.

**Step 2:** (Optional) To increase the amount that will be withheld, enter an additional amount on Line 2.

**Instructions for Other Retirement Account Distributions:** Do not use the chart above. Either enter Withholding Code E on Line 1 which will result in \$0 withholding, or enter Withholding Code E and a dollar amount on Line 2 for a specific amount to be withheld. If neither of these options are indicated, payer will withhold at 6.99%.





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## 4. WITHHOLDING ELECTIONS CONNECTICUT ONLY (CONTINUED)

1. Withholding Code: Enter Withholding Code letter chosen from above

2. Additional withholding amount per payment, if any \$

## 5. YOUR SIGNATURE

This form will become effective with your next available payment. You may revoke this election at any time by filing a new state income tax withholding election form with TIAA.

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 (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 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; and (4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Please sign your full legal name with suffix, if applicable, using black or dark blue ink, or online using TIAA's digital signing experiences. Non-TIAA digital signatures, such as signing with Adobe Acrobat, are not accepted. ▶

Your Signature

Today's Date (mm/dd/yyyy)

  /   / 20  

Please return ALL numbered pages including any pages you did not need to complete.

## RETURN COMPLETED FORM(S)

### Upload your documents easily from your mobile device or computer.

Use the TIAA mobile app to quickly upload your completed documents. It's as simple as taking a picture:

- Tap the **Message Center** icon in the upper-right corner of your main screen.
- Select the **Files** header and tap **Upload**. That's it!

Haven't downloaded the TIAA mobile app? Get it today in the **App Store** or **Google Play**.

Don't have a smartphone? It's still easy. From your personal computer, here's what you'll need to do:

- Log in to your **TIAA.org** account and select the **Actions** tab.
- Choose **Upload documents** from the options presented.
- Select **Upload Files** and follow the step-by-step instructions.

Faxing a document or using standard or overnight mail are also available, but can take more time. If you prefer one of these methods, use the information provided below to complete the process.

**FAX:**  
800-914-8922 (within U.S.)  
704-595-5795 (outside U.S.)

**STANDARD MAIL:**  
TIAA  
P.O. Box 1268  
Charlotte, NC 28201-1268

**OVERNIGHT:**  
TIAA  
8500 Andrew Carnegie Blvd.  
Charlotte, NC 28262

