



60 Empire Drive • Suite 400  
 Saint Paul Minnesota 55103  
 800 657 3669 • fax 651 297 5999

Submit to TRA by mail or FAX (original is not required).

## Federal and State Tax Withholding Certificate

Your information				
Name			TRA Number	
Address				
City		State		Zip Code
Phone		Email		
Section 1. Your accounts				
Are you a <input type="checkbox"/> TRA member <input type="checkbox"/> Beneficiary of a member				
The withholding designations apply to the following accounts: <input type="checkbox"/> TRA <input type="checkbox"/> Minneapolis <input type="checkbox"/> Duluth <input type="checkbox"/> All plans <i>If no box is checked, the designation applies to only the largest account.</i>				
Section 2. FEDERAL Withholding designations				
Choose one to indicate how you want federal taxes withheld from your monthly pension payment. If you do not specify, TRA is required by law to assume a status of married with three allowances.				
1.	Do not withhold income tax. <i>(Do not complete lines 2 or 3.)</i>			<input type="checkbox"/>
2.	Withhold federal income tax based on the tax tables from each payment to be calculated using the number of allowances and marital status shown. <i>(Do not complete line 1.) You may designate an additional dollar amount on line 3.</i> Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher single rate			<u>          </u> (Enter number of allowances)
3.	Indicate an <u>optional additional amount</u> to be withheld based on the federal tax tables. <i>You must indicate your marital status and the number of allowances on line 2.</i>			\$
Section 3. MINNESOTA STATE Withholding designations				
Choose one to indicate how you want Minnesota state taxes withheld from your monthly pension payment.				
1.	Do not withhold Minnesota state income tax. <i>(Do not complete lines 2, 3 or 4.)</i>			<input type="checkbox"/>
2.	Withhold Minnesota state income tax based on the tax tables from each payment to be calculated using the number of allowances and marital status shown. <i>(Do not complete lines 1 or 4.) You may designate an additional dollar amount on line 3.</i> Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher single rate <i>Marital status must be the same as federal; allowances must be lower or equal to federal tax allowances.</i>			<u>          </u> (Enter number of allowances)
3.	Indicate an <u>optional additional amount</u> to be withheld based on the state tax tables. <i>You must indicate your marital status and the number of allowances on line 2.</i>			\$
4.	I elect to have this amount withheld from each payment. <i>(Do not complete lines 1,2 or 3)</i>			\$
Section 4. Your signature				
				Date

