

## IBEW Local 683 Pension Fund Pension Plan

## www.ibew683benefits.org

P.O. Box 39387 St. Louis, MO 63139 Toll Free 844/683-0683 Fax: 314/752-5813

## Application for Alternate Payee

As former spouse of a participant in the IBEW Local 683 Pension Fund Pension Plan I hereby submit this application for any pension benefits which are payable to me under the plan, according to the Qualified Domestic Relations Order on file with the plan.

			XXX-XX-		
Participant Name (First Name, M	liddle Initial, Last N	ame)	Social Security Number (last 4)		
ate Payee (Former Spou	ise) Information	n			
Name (First Name, Middle Initial, Last Name)		Social Security Number (all 9)			
,	,		Ž	,	
Birth Date (mm/dd/yyyy)	Phone		Email Address		
	Thone		Email 1	eda OSS	
Street Address					
Sifeet Address					
<b>~</b> '.		<u> </u>		7' 0 1	
City		State		Zip Code	
Alternate Payee Signature			Date Signed		
Notary Public Signature and Stan	np		Date Signed		
	_				
orting Documentation Ch	<b>recklist</b>				
	applicable supporti	ng docume	ents, listed below	<b>:</b>	
Please submit any of the below	* * * * *	☐ W4-P Federal Tax Withholding Certificate			
Please submit any of the below  Direct Deposit Authoriza	tion	□ W4-P F	ederal Tax Withh	olding Certificate	

IBEW Local 683 Pension Fund Pension Plan c/o IBEW-NECA Service Center PO Box 39387



Participant Signature

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## **Alternate Payee Beneficiary Designation** Participant Name Social Security Number Date of Birth Phone Email Address Street Address City Zip Code State Divorced Widowed Marital Status | Married Single Beneficiary Designation for Unmarried Participants Only I understand that this beneficiary designation cancels any previous designation I may have made. Further, I understand that this designation shall automatically be cancelled if I am or become legally married for one year. At that time, my spouse will automatically become my beneficiary. Finally, I understand that if I wish to name someone other than my spouse as my beneficiary, my spouse must consent in writing using a form available at the Fund Office or Local Union Office. I hereby state that I am NOT married and I hereby designate as my beneficiary/beneficiaries to receive any benefits that may be payable under the Pension Plan in the event of my death to the following individual(s): **Pension Fund Death Benefit Beneficiary:** Beneficiary Name Relationship to Participant Social Security Number Date of Birth Phone Number Street Address City State Zip Code

Please return this form to the address above.

Date Signed

## IBEW/NECA SERVICE CENTER

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#### **Direct Deposit Authorization Agreement**

#### Direct Deposit provides you with these valuable benefits:

- 1. Convenience With Direct Deposit you eliminate a trip to your bank to deposit your check. On payday your money has already been deposited into your account.
- 2. Peace of Mind With Direct Deposit you eliminate the worry of receiving your payment timely due to mail delays or having your check lost or stolen.
- **3. Freedom and Time Savings** With Direct Deposit you know your payment will be electronically deposited to your account, whether you are on vacation, traveling, or ill.
- **4. Interest** With Direct Deposit your money is deposited one to ten days earlier, so it goes to work for you that much quicker.
- **5. Weatherproofing** Many times bad weather makes depositing your check inconvenient or even hazardous. With Direct Deposit, you can do something about the weather ignore it, your deposit has been made for you!

#### Participant Authorization

I hereby authorize the IBEW Local 683 Pension Fund Pension Plan to initiate deposits as indicated below for all pension payments. I further authorize the plan to initiate corrections as adjustments for deposits made in error. This authorization is to remain in effect until the plan receives written notification from me terminating direct deposit or a change in account status.

		☐ Checking	☐ Savings	
Bank Name		Account Type (Please Check One)		
Routing Number		Account Number		
Participant Name	xxx-xx- Social Security Number (last 4)			
Participant Mailing Address	City	State	Zip Code	
Participant Signature		Date Signed		

Please provide a voided check or bank letter or other verification of routing/account numbers

\*Please note - savings account deposit slips should not be relied upon for accurate routing number\*



# Withholding Certificate for Periodic Pension or Annuity Payments

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Give Form W-4P to the payer of your pension or annuity payments.

2024

Step 1:	(a) First na	ame and middle initial	Last name	(b) Social security number				
Enter Personal Information	Address			<u> </u>				
imormation	City or town, state, and ZIP code							
	_ N	ingle or Married filing separately larried filing jointly or Qualifying survivin ead of household (Check only if you're unn	g spouse narried and pay more than half the costs of keeping up a home for yo	urself and a qualifying individual.)				
			vise, skip to Step 5. See pages 2 and 3 for more info ow to elect to have no federal income tax withheld (if					
Step 2: Income From a Job	jointly		ne from a job or more than one pension/annuity, or (a e from a job or a pension/annuity. See page 2 for ex					
and/or	Do <b>on</b>	ly one of the following.						
Multiple Pensions/	(a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3–4). If you or your spouse have self-employment income, use this option; or							
Annuities	<b>(b)</b> Co	emplete the items below.						
(Including a Spouse's Job/	(i)	(i) If you (and/or your spouse) have one or more jobs, then enter the total taxable annual pay from all jobs, plus any income entered on Form W-4, Step 4(a), for the jobs less the deductions entered on Form W-4, Step 4(b), for the jobs. Otherwise, enter "-0-" \$						
Pension/ Annuity)	(ii)		e any other pensions/annuities that pay less annually nnual taxable payments from all lower-paying pens					
	(iii	) Add the amounts from items (i) a	and (ii) and enter the <b>total</b> here	\$				
	TIP: T	o be accurate, submit a new Forr	m W-4P for all other pensions/annuities if you haven' pension/annuity that pays less than the other(s). Sub	-				
Complete Ste Steps 3–4(b) o			and this pension/annuity pays the most annually. Otl	herwise, do not complete				
Step 3:	If your	total income will be \$200,000 or	less (\$400,000 or less if married filing jointly):					
Claim Dependent	Mı	ultiply the number of qualifying ch	uildren under age 17 by \$2,000 \$					
and Other	Mι	ultiply the number of other depen	dents by \$500 <u>\$</u>	.				
Credits	Add o	ther credits, such as foreign tax o	redit and education tax credits \$					
	Add th total h		n, other dependents, and other credits and enter the	3 \$				
Step 4 (optional): Other Adjustments	on	other income you expect this ye	ension/annuity payments). If you want tax withheld ear that won't have withholding, enter the amount of e interest, taxable social security, and dividends					
	(b) De an en							
	(c) Ex	t <b>ra withholding.</b> Enter any additi	onal tax you want withheld from each payment .	4(c) \$				
Step 5:								
Sign Laro								
Here	Your si	<b>gnature</b> (This form is not valid ur	nless you sign it.)	te				
	I D .	and Deduction Ast Note.	0 1 N 4000FT	5 W 4D (000.4)				

Form W-4P (2024) Page **2** 

#### **General Instructions**

Section references are to the Internal Revenue Code.

**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 of form.** Complete Form W-4P to have payers withhold the correct amount of federal income tax from your periodic pension, annuity (including commercial annuities), profit-sharing and stock bonus plan, or IRA payments. Federal income tax withholding applies to the taxable part of these payments. Periodic payments are made in installments at regular intervals (for example, annually, quarterly, or monthly) over a period of more than 1 year. Don't use Form W-4P for a nonperiodic payment (note that distributions from an IRA that are payable on demand are treated as nonperiodic payments) or an eligible rollover distribution (including a lump-sum pension payment). Instead, use Form W-4R, Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions, for these payments/distributions. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

Choosing not to have income tax withheld. You can choose not to have federal income tax withheld from your payments by writing "No Withholding" on Form W-4P in the space below Step 4(c). Then, complete Steps 1a, 1b, and 5. Generally, if you are a U.S. citizen or a resident alien, you are not permitted to elect not to have federal income tax withheld on payments to be delivered outside the United States and its territories.

**Caution:** If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. If your tax situation changes, or you chose not to have federal income tax withheld and you now want withholding, you should submit a new Form W-4P.

**When to use the estimator.** Consider using the estimator at *www.irs.gov/W4App* if you:

- 1. Have social security, dividend, capital gain, or business income, or are subject to the Additional Medicare Tax or Net Investment Income Tax; or
- 2. Receive these payments or pension and annuity payments for only part of the year.

**Self-employment.** Generally, you will owe both income and self-employment taxes on any self-employment income you (or you and your spouse) receive. If you do not have a job and want to pay these taxes through withholding from your payments, use the estimator at <a href="https://www.irs.gov/W4App">www.irs.gov/W4App</a> to figure the amount to have withheld.

**Payments to nonresident aliens and foreign estates.** Do not use Form W-4P. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

Tax relief for victims of terrorist attacks. If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, write "No Withholding" in the space below Step 4(c). See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

## **Specific Instructions**

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you have at least one of the following: income from a job, income from more than one pension/annuity, and/or a spouse (if married filing jointly) that receives income from a job/pension/annuity. The following examples will assist you in completing Step 2(b).

**Example 1.** Bob, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Bob also has a job that pays \$25,000 a year. Bob has no other pensions or annuities. Bob will enter \$25,000 in Step 2(b)(i) and in Step 2(b)(iii).

If Bob also has \$1,000 of interest income, which he entered on Form W-4, Step 4(a), then he will instead enter \$26,000 in Step 2(b)(i) and in Step 2(b)(iii). He will make no entries in Step 4(a) on this Form W-4P.

**Example 2.** Carol, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Carol does not have a job, but she also receives another pension for \$25,000 a year (which pays less annually than the \$50,000 pension). Carol will enter \$25,000 in Step 2(b)(ii) and in Step 2(b)(iii).

If Carol also has \$1,000 of interest income, then she will enter \$1,000 in Step 4(a) of this Form W-4P.

**Example 3.** Don, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Don does not have a job, but he receives another pension for \$75,000 a year (which pays more annually than the \$50,000 pension). Don will not enter any amounts in Step 2.

If Don also has \$1,000 of interest income, he won't enter that amount on this Form W-4P because he entered the \$1,000 on the Form W-4P for the higher paying \$75,000 pension.

**Example 4**. Ann, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Ann also has a job that pays \$25,000 a year and another pension that pays \$20,000 a year. Ann will enter \$25,000 in Step 2(b)(i), \$20,000 in Step 2(b)(ii), and \$45,000 in Step 2(b)(iii).

If Ann also has \$1,000 of interest income, which she entered on Form W-4, Step 4(a), she will instead enter \$26,000 in Step 2(b)(i), leave Step 2(b)(ii) unchanged, and enter \$46,000 in Step 2(b)(iii). She will make no entries in Step 4(a) of this Form W-4P.

If you are married filing jointly, the entries described above do not change if your spouse is the one who has the job or the other pension/annuity instead of you.



**Multiple sources of pensions/annuities or jobs.** If you (or if married filing jointly, you and/or your spouse) have a job(s), do NOT complete Steps 3 through 4(b)

on Form W-4P. Instead, complete Steps 3 through 4(b) on the Form W-4 for the job. If you (or if married filing jointly, you and your spouse) do not have a job, complete Steps 3 through 4(b) on Form W-4P for **only** the pension/annuity that pays the most annually. Leave those steps blank for the other pensions/annuities.

**Step 3.** This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. Including these credits will increase your payments and reduce the amount of any refund you may receive when you file your tax return.

#### Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include amounts from any job(s) or pension/annuity payments. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than

Form W-4P (2024)

#### Specific Instructions (continued)

having tax on other income withheld from your pension, see Form 1040-ES, Estimated Tax for Individuals.

**Step 4(b).** Enter in this step the amount from the Deductions Worksheet, line 6, if you expect to claim deductions other than the basic standard deduction on your 2024 tax return and want to reduce your withholding to account for these deductions.

This includes itemized deductions, the additional standard deduction for those 65 and over, and other deductions such as for student loan interest and IRAs.

**Step 4(c).** Enter in this step any additional tax you want withheld from **each payment**. Entering an amount here will reduce your payments and will either increase your refund or reduce any amount of tax that you owe.

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**Note:** If you don't give Form W-4P to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer will withhold tax from your payments as if your filing status is single with no adjustments in Steps 2 through 4. For payments that began before 2024, your current withholding election (or your default rate) remains in effect unless you submit a new Form W-4P.

	Step 4(b) – Deductions Worksheet (Keep for your records.)		
1	Enter an estimate of your 2024 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income	1	\$
2	Enter:   • \$29,200 if you're married filing jointly or a qualifying surviving spouse • \$21,900 if you're head of household • \$14,600 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	If line 3 equals zero, and you (or your spouse) are 65 or older, enter:  • \$1,950 if you're single or head of household.  • \$1,550 if you're married filing separately.  • \$1,550 if you're a qualifying surviving spouse or you're married filing jointly and one of you is under age 65.  • \$3,100 if you're married filing jointly and both of you are age 65 or older.  Otherwise, enter "-0-". See Pub. 505 for more information	4	\$
5	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	5	\$
6	Add lines 3 through 5. Enter the result here and in Step 4(b) on Form W-4P	6	\$

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 pension or annuity payments based on your filing status and adjustments; (b) request additional federal income tax withholding from your pension or annuity payments; (c) choose not to have federal income tax withheld, when permitted; or (d) change 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). Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing 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 territories 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 are 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.