FEDERAL TAXES

orm W-4P	Withholding Certificate for	OMB No. 1545-0074
epartment of the Treasury	Pension or Annuity Payments	2015
nternal Revenue Service	For Privacy Act and Paperwork Reduction Act Notice, see page 4.	
our first name and middle initial	Last name	Your social security number
lome address (number and stree	et or rural route)	Claim or identification number
City or town, state, and ZIP code		(if any) of your pension or annuity contract
Complete the following appl		
월 월상 신상·전·영상· 이 전· 이 전· 영상· 양상· 이 전· 이 전 영상·영상 전· 전· 전· 이 전· 이 전· 이 전· 이 전· 이 전· 이 전·	ant any federal income tax withheld from your pension or annuity. (Dones and marital status you are claiming for withholding from ϵ	Construction of the second
	so may designate an additional dollar amount on line 3.)	
	gle 🗌 Married 🔲 Married, but withhold at higher Single rate	(Enter number
	, you want withheld from each pension or annuity payment. (Not	of allowardes.)
	unt here without entering the number (including zero) of allowance	
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∕our signature ►	Cat. No. 10225T	► Form W-4P (2015
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Department	WITHHOLDING CERTIFICA	ATE FOR
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