

UFCW LOCAL 1262 AND EMPLOYERS PENSION FUND
1389 Broad Street, Clifton, NJ 07013
Tel. (973) 778-5800 or (800) 522-4161

STATE OF NEW JERSEY
DIVISION OF PENSIONS AND BENEFITS

Dear Retiree,

If you wish to have New Jersey Gross Income Tax withheld from your monthly pension check, change the amount currently withheld, or stop your current state tax withholding, please complete this form and return it to the address shown above. If you are a new retiree or beneficiary, DO NOT submit this form unless you wish to have New Jersey State income tax withheld. Be sure to sign and date your completed form below. The withholding will be applied with the next payroll cycle administratively possible.

If you have any questions concerning New Jersey Gross Income Tax, please call the New Jersey Division of Taxation at 1-800-323-4400 (within NJ, NY, PA, DE and MD) or 609-826-4400 (anywhere).

**Certificate of Voluntary Withholding of New Jersey Gross Income Tax
From Pension and Annuity Payments**
(Please print)

NJ-W-4P

Name: _____ Address: _____

Social Security Number: _____

(Check one box)

I elect to have New Jersey Gross Income Tax withheld from each monthly pension or annuity payment in the amount of \$_____.00 (Minimum \$10 per month.)

I reside in the state of _____ and wish to have State Tax withheld from each monthly pension or annuity payment in the amount of \$_____.00 (Minimum \$10 per month.)

Do not withhold State Tax

Your Signature: _____ **Date:** _____

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