## 1300 W. HIGGINS ROAD, SUITE 103 PARK RIDGE, IL 60068

## **Dear Pension Applicant:**

Please find enclosed a Pension benefits application packet which consists of the following documents:

- A Pension Application. Please complete the application in its entirety, sign it and return it to the Fund Office. Note that you must return the original application. We cannot accept a photocopy. Please allow us at least ninety (90) days to process your application.
- A Form W-4P, along with instructions for completing this form. The Internal Revenue Service requires that we have a completed Form W-4P on file, even if you do not wish to have Federal Income Tax withheld from your benefit payment.
- Our 50% Qualified Joint and Survivor Annuity Notice. This explains your Husband and Wife Pension program. These options will be provided at least 30 days but not more than 180 days before the date your benefits are to begin.
- Direct Deposit Form. This form must be completed to direct your monthly pension payment
  to a checking or savings account. If you do not wish to direct deposit your monthly benefit
  check, please disregard the form and a paper check will be mailed on the first of every month
  to your home address.

Please note that we **must** verify your date of birth. We have enclosed a list of the documents that are accepted by the Plan. All married applicants must provide an original or certified marriage certificate issued by the State or County in which they were married. We must also verify your spouse's date of birth. Please refer to the attached list of documents that are accepted by the Plan. If you are widowed or divorced, you must also provide a certified copy of your spouse's death certificate or your divorce decree. You may submit the required original documents by mail. We will return them to you immediately, by U.S. Mail. Of course, you may also bring your documents personally to the Fund Office.

A Summary Plan Description explains your rights and benefits under the Plan. If you would like to receive a copy of the Summary Plan Description, please contact the Fund Office. If you have any questions regarding the material enclosed, please contact the Fund Office at 773-685-0340.

Sincerely,

**Board of Trustees** 

#### INSTRUCTIONS TO APPLICANT FOR RETIREMENT ON PROOF OF AGE

As part of the processing of your application for retirement benefits, we must verify your age and if applicable, your spouse's age. One of the documents listed below must be submitted to the Fund Office. The original document, or a certified copy, must be submitted. All document will be returned to you promptly.

- 1. A birth certificate.
- 2. A baptismal certificate or a statement as to the date of birth shown by a church record, certified by the custodian of such record.
- 3. Notification of registration of birth in a public registry of vital statistics.
- 4. Certification of record of age by the U.S. Census Bureau.
- 5. A foreign church or government record.
- 6. A signed statement by the physician or midwife who was in attendance at birth, as to the date of birth shown on their records.
- 7. Naturalization record.
- 8. Military record.
- 9. Passport.
- 10. School record, certified by the custodian of such record.
- 11. An insurance policy which has been in force for at least ten years and which shows the age or date of birth.
- 12. Other evidence such as signed statements from persons who have knowledge of the date of birth, voting records, poll-tax receipts, etc.

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### PENSION APPLICATION

Please read all instructions and questions carefully. Make sure you complete the entire application. If you need additional space, you may use the back of the application. Please print or type your answers. You will need to submit additional documents as indicated on this application. You should submit this completed application with the appropriate document(s). You may also be asked to submit other documents while your application is processed. All original document(s) will be promptly returned to you. You may also bring your application and any documents personally to the Fund Office. We request that you allow us at least three months to process your application and documentation. If you need any help completing this application, please contact the Fund Office.

PERSONAL DATA				
Name:				
Address:				
Phone Number: (		)		
Email Address :				
Social Security Number:				
Date of Birth:	/	//		
*** Please note that we documents that may be		• •	rth. We have inc	luded a list of
Date you retired or plan to ret	ire:	/	/	

## MARITAL DATA

SINGLE: I hereby attest that I am not legally married at this time. \_\_\_\_\_ I hereby attest that I am legally married at this time. MARRIED: Spouse's Name (including maiden):\_\_\_\_\_ Spouse's Social Security Number:\_\_\_\_\_-Spouse's Date of Birth: \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_/ Date of Marriage: /\_\_\_/\_\_\_/ \*\*\* Please note that we must verify your spouse's date of birth. We have included a list of documents that may be used to verify your spouse's age. In addition, you must submit an original or certified copy of your marriage certificate. Have you ever been divorced? \_\_\_\_\_ Yes \_\_\_\_ No. If YES, please complete the following: \_\_\_\_\_ I hereby attest that I am legally divorced. My former spouse IS NOT entitled to any benefit under a Qualified Domestic Relations Order. I hereby attest that I am legally divorced. My former spouse IS entitled to a benefit under a Qualified Domestic Relations Order. Former Spouse's Name: Date of Divorce: \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_ \*\*\* Please note that you must submit your divorce decree. If your former spouse is entitled to a benefit under a Qualified Domestic Relations Order, you must submit that Order unless previously submitted to the Fund Office. Have you ever been widowed? Yes No. If YES, please complete the following: Deceased Spouse's Name: Date of Spouse's Death: / / \*\*\* Please note that you must submit an original or certified copy of your spouse's death certificate.

Please check either SINGLE or MARRIED for your current marital status:

## **EMPLOYMENT DATA**

Please complete the following information about your employment:

List below the name and address of each employer you have worked for since you entered employment under the jurisdiction of the Soft Drink Industry. Also list the date which you started working (FROM) and stopped working (TO) and your job or title. Include work you did for this employer even if it was not within the jurisdiction of the Soft Drink Industry. If you need additional space, remember that you can use the back of this sheet.

Employer:	
Address:	
From:	To:
T 1 (77) 1	
Job/Title:	
Employer:	
Address:	
From:	To:
Job/Title:	
Joo/ Title.	
Employer:	
Address:	
From:	To:
Job/Title:	

Upon what date did you first become employed in the Soft Drink Industry?							
So that we may determine pensions under our Reciprocal Agreements please list all Teamsters Local Unions in which you have been a member and show dates of membership in each Fund							
Local Union No.	City	& State	Dates Employed				
	om membership, or t	transferred out of the S	oyment in the Soft Drink Soft Drink Industry?				
From:	To:	Reason:					
OTHER DATA							
Are you a United Sta	tes citizen or a Resid	lent Alien?	_ Yes No				
sickness or disability	(including work rela	nted injuries), leaves of	ach reasons as military service, f absence, layoffs, and strikes or or contact the Fund Office for				
are true to the best of	my knowledge and bension benefit and the	belief. I understand th at the Trustees shall ha	on Plan. The above statements nat a false statement may ave the right to recover any				
Signed:		Dat	e:				

1300 W. HIGGINS ROAD, SUITE 103 PARK RIDGE, IL 60068

Telephone: (773) 685-0340

## **JOINT AND SURVIVOR PENSION**

If you are married and have an eligible spouse when your pension payments begin, your Pension will be paid in the form of the Joint and Survivor Pension unless you elect otherwise.

A Joint and Survivor Pension is a form of Pension in which the Pension you are eligible for is reduced. This reduced Pension is paid to you for as long as you live after retirement. Upon your death, a portion of your reduced Pension is paid to your surviving spouse. The payment to your surviving spouse is made for as long as your spouse shall live.

The amount of the reduction in your benefit depends on your age and your spouse's age. Since the reduction will vary from one case to another, the Fund Office will furnish to you the actual figures applicable to the facts of your case. Also, your Pension will be rounded up to the next multiple of \$0.50.

A Joint and Survivor Pension benefit will be paid only if the following circumstances exist:

- A. You and your spouse were married to each other on the Effective Date of your Pension, and
- B. For at least the one year period immediately preceding the date of your death.

We will need proof of age for you and your spouse and your marriage certificate. (Originals must be submitted).

## **Soft Drink Industry Pension Fund**

## Benefit Payment Options Relative Value

Our Plan offers several optional forms of payment to eligible participants, in addition to the normal form of payment available under our Plan. These optional forms of payment have relatively the same value as the normal form of payment. The remainder of this notice explains why you need to know this, what this means, and how this was determined.

## What Is Relative Value?

Relative value means the actuarial present value of each optional form of payment compared to the actuarial present value of the normal form of payment under a plan. Actuarial values of benefits are determined using:

- Mortality assumptions, which are based on standardized tables developed by actuarial organizations
  and life insurance companies. Information is analyzed about large groups of people to project the
  rates at which groups of individuals at different ages are expected to die. These statistical mortality
  projections are used to develop "average life expectancies."
- Interest assumptions, which estimate the likely investment earnings, over time, of the money put aside to pay benefits. This is important in the determination of actuarial value because investment earnings provide some of the money used to pay benefits.

#### What Are The Relative Values Under Our Plan?

Under our Plan, the normal forms of payment are the:

- Single Life Annuity for single participants
- Qualified Joint and Survivor Annuity, which under the Plan is a 50% Joint and Survivor Annuity for married participants

Additional optional forms of payment for only married participants are below:

- 75% Joint and Survivor Annuity
- 100% Joint and Survivor Annuity

All optional forms of payment available under our Plan have approximately the same actuarial present value as the normal form.

#### How Was This Determined?

The valuation and reporting methodologies used were based on IRS regulations, which can be found in Treasury Regulations Section 1.417(a)(3)-1. These methodologies are fairly technical and can be difficult to understand. However, IRS regulations require that we provide this information to you.

The values were calculated, for comparison purposes, assuming the Fund would earn 6.0% interest and that, on average, participants and spouses would live as long as predicted under the 1971 Group Annuity Mortality table (the Pension Benefits Guaranty Corporation Disabled Life table for disability pensioners). We also assumed for married participants that the spouse is the same age as the participant.

#### What Does This Mean To Me?

As stated earlier, basically, this means all optional forms of payment have relatively the same value as the normal form of payment under our Plan. However, it is important that you realize that this is not a guarantee or even a prediction of what you will actually be eligible to receive when you retire. The actual value of the different forms of payment will vary depending on how long the individual and spouse or beneficiary in fact live and on their ages when payments start.

Upon your written request, you will be provided with a similar comparison, based on your own age and estimated benefits, between your annuity form of payment and on any other forms of payment that you are eligible for. You may want to consult a financial advisor when you are nearing retirement to determine what is right for you.

1300 W. HIGGINS ROAD, SUITE 103 PARK RIDGE, IL 60068 Telephone: (773) 685-0340

### INCOME TAX WITHHOLDING INSTRUCTIONS

Attached, please find Form W-4P Withholding Certificate for Pension or Annuity Payments. Please complete the bottom portion of the attached W-4P Form and return it to the Fund Office.

- If you do not want federal income taxes withheld from your monthly benefit, check the box on line 1.
- If you would like federal income taxes withheld, you must indicate the number of allowances you are claiming on line 2 and complete your marital status on line 3.
- This Form must be completed and signed by you prior to receiving your first pension benefit check. Absence of a completed form will result in taxes being withheld at a Default election of Married with 3 allowances.



## Withholding Certificate for Pension or Annuity Payments

OMB No. 1545-0074

2021

**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.** Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of federal income tax to withhold from your payment(s). You may also use Form W-4P to choose (a) not to have any federal income tax withheld from the payment (except for eligible rollover distributions or for payments to U.S. citizens to be delivered outside the United States or its possessions), or (b) to have an additional amount of tax withheld.

Your options depend on whether the payment is periodic, nonperiodic, or an eligible rollover distribution, as explained on pages 2 and 3. Your previously filed Form W-4P will remain in effect if you don't file a Form W-4P for 2021.

## **General Instructions**

Section references are to the Internal Revenue Code.

Follow these instructions to determine the number of withholding allowances you should claim for pension or annuity payment withholding for 2021 and any additional amount of tax to have withheld. Complete the worksheet(s) using the taxable amount of the payments.

If you don't want any federal income tax withheld (see *Purpose of form*, earlier), you can skip the worksheets and go directly to the Form W-4P below.

Sign this form. Form W-4P is not valid unless you sign it.

You can also use the estimator at **www.irs.gov/W4App** to determine your tax withholding more accurately. Consider using this estimator if you have a more complicated tax situation, such as if you have more than one pension or annuity, a working spouse, or a large amount of income outside of your pensions. After your Form W-4P takes effect, you can also use this estimator to see how the amount of tax you're having withheld compares to your projected total tax for 2021. If you use the estimator, you don't need to complete any of the worksheets for Form W-4P.

Note that 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.

Filers with multiple pensions or more than one income. If you have more than one source of income subject to withholding (such as more than one pension or a pension and a job, or you're married filing jointly and your spouse is working), read all of the instructions, including the instructions for the Multiple Pensions/More-Than-One-Income Worksheet, before beginning.

Other income. If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. See Pub. 505, Tax Withholding and Estimated Tax, for more information. Get Form 1040-ES and Pub. 505 at <a href="https://www.irs.gov/FormsPubs">www.irs.gov/FormsPubs</a>. Or, you can use the Deductions, Adjustments, and Additional Income Worksheet on page 5 or the estimator at <a href="https://www.irs.gov/W4App">www.irs.gov/W4App</a> to make sure you have enough tax withheld from your payments. If you have income from wages, see Pub. 505 or use the estimator at <a href="https://www.irs.gov/W4App">www.irs.gov/W4App</a> to find out if you should adjust your withholding on Form W-4 or Form W-4P.

**Note:** Social security and railroad retirement payments may be includible in income. See Form W-4V, Voluntary Withholding Request, for information on voluntary withholding from these payments.

## Withholding From Pensions and Annuities

Generally, federal income tax withholding applies to the taxable part of payments made from pension, profit-sharing, stock bonus, annuity, and certain deferred compensation plans; from individual retirement arrangements (IRAs); and from commercial annuities. The method and rate of withholding depend on (a) the kind of payment you receive; (b) whether the payments are to be delivered outside the United States or its possessions; and (c) whether the recipient is a nonresident alien individual, a nonresident alien beneficiary, or a foreign estate. Qualified distributions from a designated Roth account or Roth IRA are nontaxable and, therefore, not subject to withholding. See page 3 for special withholding rules that apply to payments to be delivered outside the United States and payments to foreign persons.

	Separate	here and give Form W-4	P to the payer of your pension or annuity. Keep the workshee	t(s) for your	records
Eorm	W-4P Withholding Certificate		Withholding Certificate for	e for	
FOIIII			Pension or Annuity Payments		9 <b>01</b>
	tment of the Treasury al Revenue Service	► For Priv	acy Act and Paperwork Reduction Act Notice, see page 6.		2021
Your	first name and mid	dle initial	Last name	Your socia	l security number
Home address (number and street or rural route)				Claim or identification number (if any) of your pension or	
City	or town, state, and	ZIP code		annuity cor	itract
Con	plete the follow	ing applicable lines.			
1 (	Check here if you	do not want any fede	ral income tax withheld from your pension or annuity. (Do	on't comple	ete line 2 or 3.) ▶ □
			status you're claiming for withholding from each <b>periodic</b> pditional dollar amount on line 3.)		
		•	Married, but withhold at higher Single rate.	1!	(Enter number of allowances.)
3 /	additional amount	:, it any, you want withh	eld from each pension or annuity payment. ( <b>Note:</b> For perio	odic payme	nts,

Your signature ► Date ►

Cat. No. 10225T Form **W-4P** (2021)

you can't enter an amount here without entering the number (including zero) of allowances on line 2.) . . . . . ▶

Form W-4P (2021) Page **2** 

Because your tax situation may change from year to year, you may want to refigure your withholding each year. You can change the amount to be withheld by using lines 2 and 3 of Form W-4P.

Choosing not to have income tax withheld. You (or in the event of death, your beneficiary or estate) can choose not to have federal income tax withheld from your payments by using line 1 of Form W-4P. For an estate, the election to have no income tax withheld may be made by the executor or personal representative of the decedent. Enter the estate's employer identification number (EIN) in the area reserved for "Your social security number" on Form W-4P.

You may not make this choice for eligible rollover distributions. See *Eligible rollover distribution*—20% withholding below.

**Caution:** There are penalties for not paying enough federal income tax during the year, either through withholding or estimated tax payments. New retirees, especially, should see Pub. 505. It explains your estimated tax requirements and describes penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.

**Periodic payments.** Withholding from periodic payments of a pension or annuity is figured using certain withholding tables that are also used to figure withholding from wages. Periodic payments are made in installments at regular intervals over a period of more than 1 year. They may be paid annually, quarterly, monthly, etc.

If you want federal income tax to be withheld, you must designate the number of withholding allowances on line 2 of Form W-4P and indicate your marital status by checking the appropriate box. You can't designate a specific dollar amount to be withheld. However, you can designate an additional amount to be withheld on line 3.

If you don't want any federal income tax withheld from your periodic payments, check the box on line 1 of Form W-4P and submit the form to your payer. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 3.

**Caution:** If you don't submit Form W-4P to your payer, the payer must withhold from periodic payments as if you're married claiming three withholding allowances. Generally, this means that tax will be withheld if the taxable amount of your pension or annuity is at least \$2,100 a month.

If you submit a Form W-4P that doesn't contain your correct social security number (SSN), the payer must withhold as if

you're single claiming zero withholding allowances even if you checked the box on line 1 to have no federal income tax withheld

There are some kinds of periodic payments for which you can't use Form W-4P because they're already defined as wages subject to federal income tax withholding. These payments include retirement pay for service in the U.S. Armed Forces and payments from certain nonqualified deferred compensation plans and tax-exempt organizations' deferred compensation plans described in section 457. Your payer should be able to tell you whether Form W-4P applies.

For periodic payments, your Form W-4P stays in effect until you change or revoke it. Your payer must notify you each year of your right to choose not to have federal income tax withheld (if permitted) or to change your choice.

Nonperiodic payments—10% withholding. Your payer must withhold at a flat 10% rate from the taxable amount of nonperiodic payments (but see *Eligible rollover distribution—20% withholding* below) unless you choose not to have federal income tax withheld. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. You can choose not to have federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct SSN) to your payer and checking the box on line 1. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 3. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. You can't use line 2 for nonperiodic payments. But you may use line 3 to specify an additional amount that you want withheld.

**Caution:** If you submit a Form W-4P that doesn't contain your correct SSN, the payer can't honor your request not to have income tax withheld and must withhold 10% of the payment for federal income tax.

Eligible rollover distribution – 20% withholding. Distributions you receive from qualified pension or annuity plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a flat 20% federal withholding rate on the taxable amount of the distribution. The 20% withholding rate is required, and you can't choose not to have income tax withheld from eligible rollover distributions. Don't give Form W-4P to your payer unless you want an additional amount withheld. In that case, complete line 3 of Form W-4P and submit the form to your payer.

Form W-4P (2021)

**Note:** The payer won't withhold federal income tax if the entire distribution is transferred by the plan administrator in a direct rollover to a traditional IRA or another eligible retirement plan (if allowed by the plan), such as a 401(k) plan, qualified pension plan, governmental section 457(b) plan, section 403(b) contract, or tax-sheltered annuity.

Distributions that are (a) required by federal law, (b) one of a specified series of equal payments, or (c) qualifying "hardship" distributions are **not** "eligible rollover distributions" and aren't subject to the mandatory 20% federal income tax withholding. See Pub. 505 for details. See also *Nonperiodic payments*—10% withholding on page 2.

Tax relief for victims of terrorist attacks. For tax years ending after September 10, 2001, disability payments for injuries incurred as a direct result of a terrorist attack directed against the United States (or its allies), whether outside or within the United States, aren't included in income. You may check the box on line 1 of Form W-4P and submit the form to your payer to have no federal income tax withheld from these disability payments. However, you must include in your income any amounts that you received or would've received in retirement had you not become disabled as a result of a terrorist attack. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

## **Changing Your "No Withholding" Choice**

Periodic payments. If you previously chose not to have federal income tax withheld and you now want withholding, complete another Form W-4P and submit it to your payer. If you want federal income tax withheld at the 2021 default rate (married with three allowances), write "Revoked" next to the checkbox on line 1 of the form. If you want tax withheld at a different rate, complete line 2 on the form.

**Nonperiodic payments.** If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to the checkbox on line 1 and submit the Form W-4P to your payer.

## Payments to Foreign Persons and Payments To Be Delivered Outside the United States

Unless you're a nonresident alien, withholding (in the manner described above) is required on any periodic or nonperiodic payments that are to be delivered to you outside the United States or its possessions. Don't check the box on line 1 of Form W-4P. See Pub. 505 for details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates are generally subject to a 30% federal withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding even if no tax treaty applies. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for details. A foreign person should submit Form W-8BEN, Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals), to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's taxpayer identification number (TIN).

# Statement of Federal Income Tax Withheld From Your Pension or Annuity

By January 31 of next year, your payer will furnish a statement to you on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., showing the total amount of your pension or annuity payments and the total federal income tax withheld during the year. If you're a foreign person who has provided your payer with Form W-8BEN, your payer will instead furnish a statement to you on Form 1042-S, Foreign Person's U.S. Source Income Subject to Withholding, by March 15 of next year.

## **Specific Instructions**

#### **Personal Allowances Worksheet**

Complete this worksheet on page 4 first to determine the number of withholding allowances to claim.

**Line C.** Head of household please note: Generally, you can claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Page 3

Line D. Child tax credit. When you file your tax return, you may be eligible to claim a child tax credit for each of your eligible children. To qualify, 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 SSN. To learn more about this credit, see Pub. 972, Child Tax Credit and Credit for Other Dependents. To reduce the tax withheld from your payments by taking this credit into account, follow the instructions on line D of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total income includes all of your pensions, wages, and other income, including income earned by a spouse if you're filing a joint return.

Line E. Credit for other dependents. When you file your tax return, you may be eligible to claim a credit for other dependents for whom a child tax credit can't be claimed, such as a qualifying child who does not meet the age or SSN requirement for the child tax credit, or a qualifying relative. To learn more about this credit, see Pub. 972. To reduce the tax withheld from your payments by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total income includes all of your pensions, wages, and other income, including income earned by a spouse if you're filing a joint return.

Line F. Other credits. You may be able to reduce the tax withheld from your payments if you expect to claim other tax credits, such as tax credits for education (discussed in Pub. 970). If you do so, your payments will be larger, but the amount of any refund that you receive when you file your tax return will be smaller. Follow the instructions for the worksheet for converting credits to allowances in Pub. 505 if you want to reduce your withholding by taking these credits into account. If you figure all your credits using that worksheet in Pub. 505, enter "-0-" on lines D and E.

# **Deductions, Adjustments, and Additional Income Worksheet**

Complete this worksheet to determine if you're able to reduce the tax withheld from your pension or annuity payments to account for your itemized deductions and other adjustments to income, such as deductible IRA contributions. If you do so, your refund at the end of the year will be smaller, but your payments will be larger. You're not required to complete this worksheet or reduce your withholding if you don't wish to do so.

You can also use this worksheet to figure out how much to increase the tax withheld from your payments if you have a large amount of other income not subject to withholding, such as interest, dividends, or capital gains.

Another option is to take these items into account and make your withholding more accurate by using the estimator at www.irs.gov/W4App. If you use the estimator, you don't need to complete any of the worksheets for Form W-4P.

# Multiple Pensions/More-Than-One-Income Worksheet

Complete this worksheet if you receive more than one pension, if you have a pension and a job, or if you're married filing jointly and have a working spouse or a spouse who receives a pension. If you don't complete this worksheet, you might have too little tax withheld. If so, you will generally owe tax when you file your tax return and may be subject to a penalty.

Form W-4P (2021)

Use the Multiple Pensions/More-Than-One-Income Worksheet from only one Form W-4P to figure the number of allowances you're entitled to claim and any additional amount of tax to withhold from all pensions. If you (and/or your spouse if filing jointly) have two or more pensions, withholding will generally be more accurate if only the Form W-4P for the highest paying pension (a) claims any allowances after lines A through B in the Personal Allowances Worksheet or any allowances in the Deductions, Adjustments, and Additional Income Worksheet; and (b) uses the Multiple Pensions/More-Than-One-Income Worksheet. If you (and/or your spouse if filing jointly) have a pension and a job, withholding will generally be more accurate if the Form W-4P for the pension doesn't claim

any allowances after lines A through B in the Personal Allowances Worksheet or any allowances in the Deductions, Adjustments, and Additional Income Worksheet. However, you may need to use the Multiple Pensions/More-Than-One-Income Worksheet. If you (and/or your spouse if filing jointly) have more than one pension (or a pension and a job) and you need to complete a new Form W-4P or Form W-4 for a pension or a job, you (and/or your spouse) will generally get more accurate withholding by completing new Form(s) W-4P or Form(s) W-4 for all other pensions and jobs. See Pub. 505 for details.

Page 4

Another option is to use the estimator at www.irs.gov/W4App to figure your withholding more precisely.

	Personal Allowances Worksheet (Keep for your records.)				
A Enter "2" for yourself					
_	each eligible chil • If your total inc	ome will be higher than \$200,000 (\$400,000 if married filing jointly), enter "-0-"	D		
E	<ul> <li>Credit for other dependents. See Pub. 972 for more information.</li> <li>If your total income will be less than \$72,351 (\$105,051 if married filing jointly), enter "1" for each eligible dependent.</li> <li>If your total income will be from \$72,351 to \$181,950 (\$105,051 to \$351,400 if married filing jointly), enter "1" for every two dependents (for example, "-0-" for one dependent, "1" if you have two or three dependents, and "2" if you have four dependents).</li> </ul>				
	• If your total income will be higher than \$181,950 (\$351,400 if married filing jointly), enter "-0-"				
F	F Other credits. If you have other credits, see the worksheet for converting credits to allowances in Pub. 505 and enter the amount from that worksheet here. If you figure all your credits using that worksheet in Pub. 505, enter "-0-" on lines D and E				
G	Add lines A throu	ugh F and enter the total here	G		
	For accuracy, complete all worksheets that apply.	<ul> <li>If you plan to itemize or claim adjustments to income and want to reduce your withholding, or if you have a large amount of other income not subject to withholding and want to increase your withholding, see the Deductions, Adjustments, and Additional Income Worksheet on page 5.</li> <li>If you have more than one source of income subject to withholding or are married filing jointly and you and your spouse both have income subject to withholding and your combined income from all sources exceeds \$13,000 (\$25,000 if married filing jointly), see the Multiple Pensions/More-Than-One-Income Worksheet on page 5 to avoid having too little tax withheld, or use the estimator for more accuracy.</li> <li>If neither of the above situations applies, stop here and enter the number from line G on line 2 of Form W-4P above.</li> </ul>			

Form W-4P (2021) Page :

	Deductions, Adjustments, and Additional Income Worksheet		
	<b>te:</b> Use this worksheet <i>only</i> if you plan to itemize deductions, claim certain adjustments to income, or have ner income not subject to withholding.	a lar	ge amount of
1	Enter an estimate of your 2021 itemized deductions. These 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. See Pub. 505 for details	1	\$
	(\$25,100 if you're married filing jointly or qualifying widow(er) γ	•	<u>*</u>
2	Enter: { \$18,800 if you're head of household }	2	\$
•	\$12,550 if you're single or married filing separately	•	Φ
3 4	<b>Subtract</b> line 2 from line 1. If zero or less, enter "-0-"	3	\$
4	additional standard deduction for age or blindness. See Pub. 505 for information about these items .	4	\$
5	Add lines 3 and 4 and enter the total	5	\$
6		_	
7	capital gains)	6 7	\$
7 8		′	\$
0	<b>Divide</b> the amount on line 7 by \$4,300 and enter the result here. If a negative amount, enter in parentheses. Drop any fraction	8	
9		9	
10			
	Pensions/More-Than-One-Income Worksheet, also enter this total on line 1 below. Otherwise, stop	40	
	here and enter this total on Form W-4P, line 2, on page 1	10	

	Multiple Pensions/More-Than-One-Income Worksheet				
apı	te: Use this worksheet <i>only</i> if the instructions under line G from the <b>Personal Allowances Worksheet</b> directlies if you (and your spouse if married filing jointly) have more than one source of income subject to withhold in one pension, or a pension and a job, or you have a pension and your spouse works).	-			
1	Enter the number from the <b>Personal Allowances Worksheet</b> , line G, on page 4 (or from line 10 above if you used the <b>Deductions, Adjustments, and Additional Income Worksheet</b> )	1			
2	Find the number in <b>Table 1</b> on page 6 that applies to the <b>LOWEST</b> paying pension or job and enter it here. However, if you're married filing jointly and the amount from the highest paying pension or job is \$75,000 or less and the combined amounts for you and your spouse are \$107,000 or less, do not enter more than "7"	2			
3	If line 1 is <b>more than or equal to</b> line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4P, line 2, on page 1. <b>Do not</b> use the rest of this worksheet	3			
	te: If line 1 is less than line 2, enter "-0-" on Form W-4P, line 2, on page 1. Complete lines 4 through 9 ow to figure the additional withholding amount necessary to avoid a year-end tax bill.				
5 6 7 8	Enter the number from line 2 of this worksheet	6 7 8	\$ \$		
9	<b>Divide</b> line 8 by the number of payments remaining in 2021. For example, divide by 8 if you're paid every month and you complete this form in April 2021. Enter the result here and on Form W-4P, line 3, on page 1. This is the additional amount to be withheld from each payment	9	\$		

Form W-4P (2021) Page **6** 

Table 1

Married Filing Jointly		All Others		
If wages from <b>LOWEST</b> paying job or pension are—	Enter on line 2 above	If wages from <b>LOWEST</b> paying job or pension are—	Enter on line 2 above	
\$0 - \$799	0	\$0 - \$799	0	
800 - 5,100	1	800 - 5,100	1	
5,101 - 9,400	2	5,101 - 9,400	2	
9,401 - 13,700	3	9,401 - 13,700	3	
13,701 - 18,000	4	13,701 - 22,000	4	
18,001 - 22,300	5	22,001 - 27,500	5	
22,301 - 26,600	6	27,501 - 32,000	6	
26,601 - 35,000	7	32,001 - 40,000	7	
35,001 - 40,000	8	40,001 - 60,000	8	
40,001 - 46,000	9	60,001 - 75,000	9	
46,001 - 55,000	10	75,001 - 85,000	10	
55,001 - 60,000	11	85,001 - 95,000	11	
60,001 - 70,000	12	95,001 - 100,000	12	
70,001 - 75,000	13	100,001 - 110,000	13	
75,001 - 85,000	14	110,001 - 115,000	14	
85,001 - 95,000	15	115,001 - 125,000	15	
95,001 - 125,000	16	125,001 - 135,000	16	
125,001 - 155,000	17	135,001 - 145,000	17	
155,001 - 165,000	18	145,001 - 160,000	18	
165,001 - 175,000	19	160,001 - 180,000	19	
175,001 - 180,000	20	180,001 and over	20	
180,001 - 195,000	21			
195,001 - 205,000	22			
205,001 and over	23			

Table 2

Married Filing Jointly		All Others		
If wages from <b>HIGHEST</b> paying job or pension are—	Enter on line 7 above	If wages from <b>HIGHEST</b> paying job or pension are—	Enter on line 7 above	
\$0 - \$25,350	\$430	\$0 - \$7,375	\$430	
25,351 - 85,850	520	7,376 - 37,625	520	
85,851 - 176,650	950	37,626 - 83,025	950	
176,651 - 332,200	1,030	83,026 - 160,800	1,030	
332,201 - 420,300	1,380	160,801 - 204,850	1,380	
420,301 - 627,650	1,510	204,851 - 515,900	1,510	
627,651 and over	1,590	515,901 and over	1,590	

# 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 periodic pension or annuity payments based on your withholding allowances and marital status; (b) request additional federal income tax withholding from your pension or annuity; (c) choose not to have federal income tax withheld, when permitted; or (d) change or revoke 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). Providing false or 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 possessions 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.

## DIRECT DEPOSIT AGREEMENT

# SOFT DRINK INDUSTRY PENSION FUND 1300 W. HIGGINS RD., SUITE 103 PARK RIDGE, IL 60068 PHONE:(773) 685-0340

Pensioner First Name:			
Pensioner Last Name:			
Phone Number:			
Last 4 Digits of SSN	XXX-XX-		
Name of Financial Institution:			
Address of Financial Institution:			
City:		State:	Zip
Transit/Routing Number:  attach a voided check  if available			
Account Number:			
Account Type: Checking Savings Other			
Pavee's Signatu	ıre		Date

I authorize Union Bank and Trust Company to intiate automatic deposit entries to my checking or savings account for monthly pension payments.

I further authorize Union Bank and Trust Company to initiate appropriate entries to correct the amount of my pension payment, should it be necessary.

This authorization will remain in effect for each pension payment until I have advised Union Bank and Trust Company in writing to the contrary.