



FINANCIAL SERVICES
FOR THE GREATER GOOD

MASSACHUSETTS STATE INCOME TAX Withholding Election Instructions



IMPORTANT INFORMATION PLEASE **READ BEFORE** FILLING OUT FORM

QUESTIONS? For account information, to check the status of your request or any other questions, call: **800 842-2252**, Monday - Friday, 8 AM - 10 PM ET, Saturday, 9 AM - 6 PM ET, OR visit tiaa-cref.org **24 hours daily**. Have your user ID and password ready.

If you are a **legal resident of Massachusetts**, the state requires you to complete an Income Tax Withholding Election Form for all distributions that you receive from TIAA-CREF. If you do not return the withholding form, the state tax default rate will apply.

Payments that are directly rolled over to an IRA or another retirement plan are not subject to state income tax withholding. Therefore, if your payments are being rolled over, no further action is required.

For cash payments ONLY, please keep in mind:

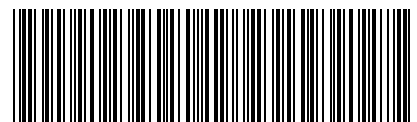
1. There may be penalties for not paying enough state income tax during the year, either through withholding or estimated tax payments.
2. State tax withholding rates are subject to change.

MASSACHUSETTS WITHHOLDING RULES

Rollover Eligible Payments are payments that can be directly rolled over to an IRA or a similar retirement plan. These include certain types of Single Sum cash withdrawals and the following periodic payments: Interest Payments, Annuity Certain Options paid over a period of less than 10 years, and Transfer Payout Annuities issued after October 31, 2001.

Non-Rollover Eligible Payments are payments that cannot be directly rolled over to an IRA or a similar retirement plan. These include Minimum Distribution Options, certain types of Single Sum cash withdrawals and the following periodic payments: all life annuities, Annuity Certain Options paid over a period of 10 years or more, and Transfer Payout Annuities issued before November 1, 2001.

Type of Payment	Rollover Eligible	If you do not make a state election, state withholding will default to:	Withholding options you can choose
Single Sum Periodic Payment	Yes	An election of zero allowances(5.3%) of the taxable amount of the payment	<ul style="list-style-type: none"> • Flat dollar amount • Fixed percentage of the taxable amount of the payment • CAN elect wage tables • CAN elect special exemptions • CANNOT elect "Do not withhold"
Single Sum Periodic Payment	No	<p>An election of zero allowances(5.3%) of the taxable amount of the payment</p> <p>There will be no state tax withheld when you have elected not to have federal</p>	<ul style="list-style-type: none"> • Flat dollar amount • Fixed percentage of the taxable amount of the payment • CAN elect special exemptions • CAN elect wages tables tax withheld • CAN elect "Do not withhold"





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MASSACHUSETTS STATE INCOME TAX Withholding Election Form

STEP ONE

PERSONAL INFORMATION

Please print in all capital letters using black or dark blue ink.

This form may only be completed for one plan and one contract. If you have multiple plans and/or multiple contracts, you must complete multiple withholding forms.

Name _____
first middle initial last

TIAA #

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CREF #

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NOTE: Please indicate the contract number to which your tax election will apply. **DO NOT USE DASHES.**

TIAA-CREF CONTRACT

PLAN INFORMATION

The Plan and Sub Plan numbers should have been provided to you. **If you don't have them, please contact us at 800 842-2252.**

Plan Name _____

Plan #

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Sub Plan #

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STEP TWO

WITHHOLDING ELECTION

(Applies to periodic payments only)

- Special Exceptions: *(select only one)*
 - Head of Household Spouse is an exemption
- Reduce withholding because:
 - I am blind Spouse is blind

Total Number of Withholding Allowances: _____

Withhold the following **ADDITIONAL** amount from each payment \$ _____

I want the following dollar amount withheld from each payment: \$ _____

OR

I want the following percentage withheld from the taxable portion of each payment: _____ %

Do not withhold *(you cannot elect this option if the distribution is rollover eligible.)*

STEP THREE

YOUR SIGNATURE



Your Signature _____

Today's Date _____
mm/dd/yyyy

The form will become effective with your next available payment. You may revoke this election at any time by filing a new state income tax withholding election form with TIAA-CREF.

