NAVAJO NATION DEFINED BENEFIT PLAN INCOME TAX WITHHOLDING ELECTION FORM

NAME:ADDRESS:		SSN: PH. #:	
	A. I want to have Federal income tax withheld from n	y pension payments as follows:	
	Marital Status: Single Married	Exemptions:	
	Optional: Additional amount to be withheld: \$		
	B. I want to have this exact amount withheld: \$		
	C. I want to have% withheld from my pension p		
		•	
	D. I do not want Federal income tax withheld from m	y pension payments.	
	STATE TAX WITHHOLI	DING (For Arizona):	
	E. I elect to have Arizona income taxes withheld from	my pension payments as follows:	
	☐ .5% ☐ 1.0% ☐ 1.5% ☐ 2.0% ☐ 2.5% ☐ 3.0	0% 3.5% of the taxable amount of distribution.	
	Optional: Additional amount to be withheld: \$		
	F. I do not want Arizona state income tax withheld from	om my pension payments.	
	STATE TAX WITHHOLDING (For	r those calculated from table):	
	G. I want to have state income to	ax withheld from my pension payments as follows:	
	Marital Status: Single Married	Exemptions:	
	Optional: Additional amount to be withheld: \$	(must be greater than \$10.00)	
	H. I do not want state income ta	x withheld from my pension payments.	
reside 1	SE NOTE: State tax will be withheld according to the rule in a state that requires mandatory withholding, an electic listribution will be subject to the statutory minimum requ	on to not have taxes withheld will be disregarded and	
taxable	SE NOTE: Even if you elect <u>not</u> to have income taxes with le portion of your pension payments. You may also be subf your payment of estimated tax and withholding are not	ject to tax penalties under the Estimated Tax Payment	
Signat	ture	Date	