

**MARYLAND**

**State Income Tax Withholding Election Notice**

for Qualified Periodic and Non-Periodic Pension and Annuity Payments

Periodic and non-periodic pension or annuity payments to Maryland residents that are not eligible for rollover are not subject to state income tax withholding. However, you may request withholding from your payment(s) by completing the Maryland Form MW 507P below and returning it to the following address or fax it to (888) 499-4315.

The Prudential Insurance Company of America  
 P.O. Box 5370  
 Scranton, PA 18507  
 (800) 621-1089

If you want Maryland State income tax withheld from your payment, fill in a **whole dollar amount**, but not less than \$5.00, on Line B of the Withholding Certificate. Prudential is required to withhold Maryland state income tax at a rate of 7.75% from eligible rollover distributions. Exemption cannot be claimed from Maryland state withholding on pension distributions eligible for rollover.

Your election will become effective with the payment that is due at least one month after our receipt of the election and will remain in effect until you change or revoke it. You may change or revoke your election by filing another election form with us. Copies can be obtained from the above address.

Please note that withholding is a method of paying taxes. It does not increase or decrease the total amount of taxes you must pay. Penalties may be incurred under the estimated tax payment rules if sufficient tax is not paid either through withholding, estimated taxes, or both.

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 DETACH AND RETURN THIS CERTIFICATE TO THE ADDRESS ABOVE. KEEP THE TOP PORTION FOR YOUR RECORDS.

**Form MW 507P**  
 Comptroller of the Treasury  
 Revenue Administration Division  
 Annapolis, Maryland  
 21411-0001

**Annuity and Sick Pay Request**  
 for Maryland Income Tax Withholding

Type or print full name

Social Security Number

Home address (number and street)

City, state and zip code

A. Annuity contract claim or identification number.....

B. Enter the amount to be withheld from each annuity or sick pay payment

\$

I request voluntary income tax withholding from my annuity or sick pay payments as authorized by Section 10-907(b) of the Tax-General Article of the Annotated Code of Maryland.

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 (Date)

## INSTRUCTIONS

**Who may file** - Any recipient of an annuity or sick payment may file this form to have Maryland income tax withheld from each payment. However, the annuity must be payable over a period longer than one year.

**Sick Pay** – the term “sick pay” means any amount which is paid to an employee pursuant to a plan to which the employer is a party and constitutes remuneration or payment in lieu of remuneration for any period during which the employee is temporarily absent from work on account of sickness or personal injuries.

**Where and how to file** - *File this form with the payer of your annuity or sick pay payment.* Enter in Item B of page 1, the whole dollar amount that you wish withheld from each annuity or sick pay payment. The amount must not be less than \$5.00 a month for annuities, and at least \$2.00 per daily payment in the case of sick pay.

You may use the worksheet provided with the declaration as a guide in estimating your income tax liability.

You may find it convenient to request an amount to be withheld which will reduce your year-end tax balance on your individual Maryland tax return to an amount of \$250 or less and thus avoid having to file an individual Declaration of Estimated Tax (Form 502D or 502DEP).

**Duration of withholding request** - Your request for voluntary withholding will remain in effect until you terminate it.

**How to terminate a withholding request** - You may terminate, at any time, your request for voluntary withholding by giving your payer a written termination notice.

**Statement of income tax withheld** - At the close of the year your payer will furnish you with a Form MW 509 or other appropriate form showing the gross amount of annuity or sick pay payments and the total amount deducted and withheld as tax during the calendar year.

Do not mail this form to the Maryland Revenue Administration Division PS-2798