

#### St. Paul Teachers' Retirement Fund Association

2550 University Avenue W, Suite 312N, St. Paul, MN 55114 Phone: (651) 642-2550 Fax: (651) 642-2553 Website: www.sptrfa.org

#### Application for a Retirement Annuity - Coordinated Plan

Section A – General Information		
Member's Full Name:		Member's Date of Birth:
Street Address: City, State, Zip Code		Social Security #
Personal Email Address:		Contact Phone #
Name of Spouse:	Spouse's Birth Date:	What is your current marital status?  Single Married Widowed
SPPS Resignation Date (mm/dd/yyyy):	Pension Date (mm/da	/yyyy):
Typically, resignation date is the last day worked.	Pension date must be 1s	t or 16 <sup>th</sup> of the month, at least one day after resignation.
<ol> <li>Have you ever been involved in a marriage dissolution?</li></ol>	decree required. redit with the following vish to receive a combi loyees	Minnesota public retirement fund(s): NONE
Section B - Annuity Plan Option (Select only one in	revocable monthly	lifetime retirement benefit option.)
C-1 Member Life Only – Payable to you for life. A certificate & driver's license OR signed passport.  C-2 Guaranteed Refund – Payable to you for life v your accumulated contributions will be payable to you survives you, any remaining balance of accumulated comember's birth certificate & driver's license OR signe	vith the guarantee that r designated beneficia ontributions will be pa	an amount equal to any remaining balance of any upon your death. If no designated beneficiary
C-3 15-year Certain – Payable to you for life. If yo payments will be made to your designated beneficiary survives you, any remaining guaranteed payments will member's birth certificate & driver's license OR signe	for the remainder of the be commuted and pa	he 15-year period. If no designated beneficiary
C-4 100% Joint and Survivor — Payable to you fo amount of your annuity for life. If your joint annuitant Member Life Only annuity amount for the remainder of provide member's and spouse's birth certificate & driv	t predeceases you, you of your life. You mus	or payments will be increased to the option C-1 through the joint annuitant's death. Must
C-5 50% Joint and Survivor — Payable to you for of your annuity for life. If your joint annuitant predect Life Only annuity amount for the remainder of your lift member's and spouse's birth certificate & driver's lice	eases you, your payme fe. You must notify u	ents will be increased to the option C-1 Member s of the joint annuitant's death. Must provide
Supplemental Needs Trust – Choose this option if y Supplemental Needs Trust. Attach necessary documental Needs Trust.		iary to be the Primary Trust Beneficiary of a
Section C - Normal or Acceleration/Deceleration Se	election (Select one.)	
I elect to receive the following type of payment:  Accelerated/Decelerated: Payment accelerated (incl	-	not changed through acceleration/deceleration. en decelerated (decreased) for future payments.

Page 1 of 2 Updated: March 2023

#### Section D – Beneficiary Designation (for C-2 Option or C-3 Option Only) In the case of my death after retirement benefits commence, if I have chosen the C-2 or C-3 option, any further benefit payable under the C-2 or C-3 option should be made in equal shares unless otherwise indicated to: **Date of Birth Address** Relationship Beneficiary Name(s) Further designations may be attached on a separate sheet of paper. This designation replaces any previous beneficiary designation. Designations of beneficiary may be updated at a later date by completing a Post-Retirement C-2 C-3 Beneficiary form. Section E – Spousal Information for C-4 or C-5 Joint & Survivor Options **Spouse Birth Date Spouse Social Security # Spouse Name** Section F – Spousal Notification I hereby affirm that I have been notified by my spouse of the annuity election designated on this form. I further affirm that I understand what this election means for me in the event of my spouse's death, that state law (Minn.Stat. §356.46) requires payment of at least a 50% joint and survivor benefit without my signature, and that SPTRFA policy requires spousal signature for all benefit options. Spouse Signature Date Notary Stamp - OR -Notary Data **Notary Public:** Sworn to before me this \_\_\_\_\_ day County , 20 State Notary Signature My Commission Expires **Section G – Member Signature** I have received and reviewed a description and explanation of the available St. Paul Teachers' Retirement Fund Association (SPTRFA) retirement benefits, including beneficiary and survivor options. I was given the opportunity to ask questions about the effects of my benefit option and I make the foregoing irrevocable benefit option freely and willfully.

Retirement payments are based on actual data subject to final audit of my SPTRFA records.

Page 2 of 2 Updated: March 2023

#### ST. PAUL TEACHERS' RETIREMENT FUND ASSOCIATION

2550 University Avenue W, Suite 312N Saint Paul, Minnesota 55114 Phone: (651) 642-2550 Fax: (651) 642-2553 Website: www.sptrfa.org

#### **Direct Deposit Agreement**

Routing Number					Checking	Saving
Account Number						
	Conta	ct your financia	al institution if	you are u	Number to prevent nsure.  ness day of the month	-
YOUR NAME 1234 Main Street Anywhere, OH 00000  PAY TO THE ORDER OF		DATE\$		<b>1</b>	equired: Write your Routing count Number and count Checking or	d type of
	ACCOUNT NUMBER	CNPCK NUMBER	DOLLARS  DO NOT INCL CHECK NUM	UDE BER N	OR Attach a blank voiceck here  ote: rect deposit is not avreign countries.	

I hereby authorize the St. Paul Teachers' Retirement Fund Association (SPTRFA) to electronically transfer to my individual or joint account in a financial institution with the National Automated Clearinghouse Association my monthly benefit payments. This agreement remains in effect until canceled by me or upon my death. I direct my financial institution to refund SPTRFA any benefit payments paid that I was not entitled upon my death. I have notified all joint account holders of the obligation to repay any overpayment to this account after my death if the overpayment is not repaid by the financial institution. I understand that if I wish to change financial institutions or account numbers, I must complete a new Direct Deposit Agreement.

This Direct Deposit Agreement may be completed and signed by a legal representative of the payment recipient. Power of Attorney or Conservatorship documents must be on file with SPTRFA or included with this form.

(PLEASE PRINT) Last	First Middle
SOCIAL SECURITY X X X -	· X X -
Date	If this form is received by the 20 <sup>th</sup> of the month, your direct deposit request will take effect at the
Current Address	beginning of the following month.
City/State/Zip	If your form is received after the 20 <sup>th</sup> , your direct deposit request
Phone Number	may be delayed one month.
Personal Email	Updated: October 2023



## Withholding Certificate for Periodic Pension or Annuity Payments

OMB No. 1545-0074

2023

Department of the Treasury Internal Revenue Service Give Form W-4P to the payer of your pension or annuity payments.

Step 1:	(a) First n	ame and middle initial	Last name		(b) Soc	cial security number
Enter						
Personal	Address					
Information						
	City or tow	n, state, and ZIP code				
	(c) S	Single or Married filing separately				
		Married filing jointly or Qualifying				
				nalf the costs of keeping up a home for yo	urself and	l a qualifying individual.)
		NLY if they apply to you; e no federal income tax wit		See pages 2 and 3 for more info	ormatio	n on each step
Step 2: Income	jointly			e than one pension/annuity, or (sion/annuity. See page 2 for ex		
From a Job and/or	-	nly one of the following.				
Multiple	(a) Re	eserved for future use.				
Pensions/	(b) C	omplete the items below.				
Annuities	` '	•	a) have one or more jobs. ti	hen enter the total taxable annu	al nav	
(Including a Spouse's Job/	(1)	from all jobs, plus any i		N-4, Step 4(a), for the jobs les	s the	\$
Pension/ Annuity)	(ii)	If you (and/or your spous this one, then enter the annuities. Otherwise, enter	total annual taxable payme	dannuities that pay less annually ents from all lower-paying pen	y than sions/	\$
	(ii	i) Add the amounts from ite	ms (i) and (ii) and enter the	total here		\$
	withh	olding since 2021 or this is	a new pension/annuity that	pensions/annuities if you haven' pays less than the other(s). Sub 019. If you have self-employme	omit a n	ew Form W-4 for
Complete Ste Steps 3–4(b) o			blank and this pension/anr	nuity pays the most annually. Ot	herwise	, do not complete
Step 3:	If you	r total income will be \$200,	000 or less (\$400,000 or les	ss if married filing jointly):		
Claim	М	ultiply the number of qualif	ying children under age 17 l	by \$2,000 \$		
Dependent and Other	М	ultiply the number of other	dependents by \$500	\$		
Credits			n tax credit and education	<del>-</del>	-	
		he amounts for qualifying o	children, other dependents,	and other credits and enter the		\$
Step 4 (optional): Other	(a) O	ther income (not from job n other income you expect	s or pension/annuity payr	ments). If you want tax withheld withholding, enter the amount of cial security, and dividends	1	
Adjustments	ar			an the basic standard deduction ons Worksheet on page 3 and		\$
	(c) E	ktra withholding. Enter any	/ additional tax you want wi	thheld from <b>each payment</b> .	4(c)	\$
Step 5:						
Sign						
Here	Your si	gnature (This form is not v	alid unless you sian it.)		te	

Form W-4P (2023)

#### **General Instructions**

Section references are to the Internal Revenue Code.

**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.** Complete Form W-4P to have payers withhold the correct amount of federal income tax from your periodic pension, annuity (including commercial annuities), profit-sharing and stock bonus plan, or IRA payments. Federal income tax withholding applies to the taxable part of these payments. Periodic payments are made in installments at regular intervals (for example, annually, quarterly, or monthly) over a period of more than 1 year. Don't use Form W-4P for a nonperiodic payment (note that distributions from an IRA that are payable on demand are treated as nonperiodic payments) or an eligible rollover distribution (including a lump-sum pension payment). Instead, use Form W-4R, Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions, for these payments/distributions. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

Choosing not to have income tax withheld. You can choose not to have federal income tax withheld from your payments by writing "No Withholding" on Form W-4P in the space below Step 4(c). Then, complete Steps 1a, 1b, and 5. Generally, if you are a U.S. citizen or a resident alien, you are not permitted to elect not to have federal income tax withheld on payments to be delivered outside the United States and its territories.

**Caution:** 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. If your tax situation changes, or you chose not to have federal income tax withheld and you now want withholding, you should submit a new Form W-4P.

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you (or you and your spouse) receive. If you do not have a job and want to pay these taxes through withholding from your payments, you should enter the self-employment income in Step 4(a). Then compute your self-employment tax, divide that tax by the number of payments remaining in the year, and include that resulting amount per payment in Step 4(c). You can also add half of the annual amount of self-employment tax to Step 4(b) as a deduction. To calculate self-employment tax, you generally multiply the self-employment income by 14.13% (this rate is a quick way to figure your self-employment tax and equals the sum of the 12.4% social security tax and the 2.9% Medicare tax multiplied by 0.9235). See Pub. 505 for more information, especially if your self-employment income multiplied by 0.9235 is over \$160,200.

Payments to nonresident aliens and foreign estates. Do not use Form W-4P. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

**Tax relief for victims of terrorist attacks.** If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, write "No Withholding" in the space below Step 4(c). See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

#### **Specific Instructions**

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you have at least one of the following: income from a job, income from more than one pension/annuity, and/or a spouse (if married filing jointly) that receives income from a job/pension/annuity. The following examples will assist you in completing Step 2.

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**Example 1.** Bob, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Bob also has a job that pays \$25,000 a year. Bob has no other pensions or annuities. Bob will enter \$25,000 in Step 2(b)(i) and in Step 2(b)(iii).

If Bob also has \$1,000 of interest income, which he entered on Form W-4, Step 4(a), then he will instead enter \$26,000 in Step 2(b)(i) and in Step 2(b)(iii). He will make no entries in Step 4(a) on this Form W-4P.

**Example 2.** Carol, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Carol does not have a job, but she also receives another pension for \$25,000 a year (which pays less annually than the \$50,000 pension). Carol will enter \$25,000 in Step 2(b)(ii) and in Step 2(b)(iii).

If Carol also has \$1,000 of interest income, then she will enter \$1,000 in Step 4(a) of this Form W-4P.

**Example 3.** Don, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Don does not have a job, but he receives another pension for \$75,000 a year (which pays more annually than the \$50,000 pension). Don will not enter any amounts in Step 2.

If Don also has \$1,000 of interest income, he won't enter that amount on this Form W-4P because he entered the \$1,000 on the Form W-4P for the higher paying \$75,000 pension.

**Example 4**. Ann, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Ann also has a job that pays \$25,000 a year and another pension that pays \$20,000 a year. Ann will enter \$25,000 in Step 2(b)(i), \$20,000 in Step 2(b)(ii), and \$45,000 in Step 2(b)(iii).

If Ann also has \$1,000 of interest income, which she entered on Form W-4, Step 4(a), she will instead enter \$26,000 in Step 2(b)(i), leave Step 2(b)(ii) unchanged, and enter \$46,000 in Step 2(b)(iii). She will make no entries in Step 4(a) of this Form W-4P.

If you are married filing jointly, the entries described above do not change if your spouse is the one who has the job or the other pension/annuity instead of you.



Multiple sources of pensions/annuities or jobs. If you (or if married filing jointly, you and/or your spouse) have a job(s), do NOT complete Steps 3 through 4(b)

on Form W-4P. Instead, complete Steps 3 through 4(b) on the Form W-4 for the job. If you (or if married filing jointly, you and your spouse) do not have a job, complete Steps 3 through 4(b) on Form W-4P for **only** the pension/annuity that pays the most annually. Leave those steps blank for the other pensions/annuities.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, 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 social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include **other tax credits** for which you are eligible in this step, such as the foreign tax credit and the education tax credits. Including these credits will increase your payments and reduce the amount of any refund you may receive when you file your tax return.

Form W-4P (2023)

#### Specific Instructions (continued)

#### Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include amounts from any job(s) or pension/annuity payments. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your pension, see Form 1040-ES, Estimated Tax for Individuals.

**Step 4(b).** Enter in this step the amount from the Deductions Worksheet, line 6, if you expect to claim deductions other than the basic standard deduction on your 2023 tax return and want to reduce your withholding to account for these deductions.

This includes itemized deductions, the additional standard deduction for those 65 and over, and other deductions such as for student loan interest and IRAs.

Page 3

**Step 4(c).** Enter in this step any additional tax you want withheld from **each payment**. Entering an amount here will reduce your payments and will either increase your refund or reduce any amount of tax that you owe.

**Note:** If you don't give Form W-4P to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer will withhold tax from your payments as if your filing status is single with no adjustments in Steps 2 through 4. For payments that began before 2023, your current withholding election (or your default rate) remains in effect unless you submit a new Form W-4P.

	Step 4(b) - Deductions Worksheet (Keep for your records.)		
1	Enter an estimate of your 2023 itemized deductions (from Schedule A (Form 1040)). Such deductions may 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	1	\$
2	Enter:   • \$27,700 if you're married filing jointly or a qualifying surviving spouse • \$20,800 if you're head of household • \$13,850 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	If line 3 equals zero, and you (or your spouse) are 65 or older, enter:  • \$1,850 if you're single or head of household.  • \$1,500 if you're married filing separately.  • \$1,500 if you're a qualifying surviving spouse or you're married filing jointly and one of you is under age 65.  • \$3,000 if you're married filing jointly and both of you are age 65 or older.  Otherwise, enter "-0-". See Pub. 505 for more information	4	\$
5	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	5	\$
6	Add lines 3 through 5. Enter the result here and in Step 4(b) on Form W-4P	6	\$

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 pension or annuity payments based on your filing status and adjustments; (b) request additional federal income tax withholding from your pension or annuity payments; (c) choose not to have federal income tax withheld, when permitted; or (d) change 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). Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing 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 territories 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.



# 2023 W-4MNP, Minnesota Withholding Certificate for Retirement Account, Pension, or Commercial Annuity Payments (Revised August 15, 2023)

Note: This form is not required for certain nontaxable periodic payments and nonperiodic distributions, including:

Last Name

- Designated Roth account distributions
- · Qualified Roth IRA distributions

First Name and Initial

Qualified Charitable Distributions (QCDs)

Complete Form W-4MNP so your plan administrator, financial institution, or other payer responsible for making your distributions can withhold the correct Minnesota income tax. Consider completing a new Form W-4MNP each year or when your personal or financial situation changes. If you do not complete this form and do not have a previous Form W-4MNP on file with your payer, they must withhold Minnesota taxes at a rate equal to 6.25% of the taxable payment or distribution.

Social Security Number

	zast Hame		Joseph Good Trans	
Permanent Address			Claim or Identificatio	n Number (if any) of your Account or Contract
City	State	ZIP Code		
Note: The 2023 Minnesota Inc	lividual Income Tax rat	tes and brackets are	provided in the inst	ructions on the next page.
Withholding election for perio	dic payments:			
<ul><li>□ Default rate of 6.25%</li><li>□ No withholding</li><li>□ Other percentage (specify):</li><li>□ Set dollar amount per perio</li></ul>				
Withholding election for nonp	eriodic distributions:			
<ul><li>□ Default rate of 6.25%</li><li>□ No withholding</li><li>□ Other percentage (specify):</li><li>□ Set dollar amount per distri</li></ul>				
<b>Sign here.</b> Give the completed distributions.	form to your plan adn	ninistrator, financial	institution, or other	payer responsible for making your
I certify that all information provia	led is correct.			
Pension or Annuity Recipient Signature		Date		Daytime Phone Number



# Form W-4MNP, Minnesota Withholding Certificate for Retirement Account, Pension, or Commercial Annuity Payments

Complete this form to request the percentage or amount of Minnesota income tax to be withheld from your taxable payments or distributions.

#### What's new?

On May 24, 2023, legislation was enacted to allow recipients of retirement, IRA, pension, or commercial annuity payments to request Minnesota income tax withholding at any rate or amount they choose, including none. This simplified method does not require you to calculate allowances. If you already have a Form W-4MNP on file with your plan administrator, you do not need to complete this form unless you choose to do so.

#### When should I complete Form W-4MNP?

Complete Form W-4MNP if you are a Minnesota resident and receive taxable payments or distributions from any of these:

- Employer deferred compensation plan (such as a 401(k))
- Pension plan
- Individual retirement plan
- Traditional IRA
- · Commercial annuity

This form is not required for certain nontaxable distributions, including designated Roth account distributions, qualified Roth IRA distributions, or Qualified Charitable Distributions (QCDs).

For taxable periodic payments, complete Form W-4MNP when you begin receiving payments from a retirement account, traditional IRA, annuity, or pension, or if your personal or financial situation changes. Use this form to specify a dollar amount or percentage to be withheld or to elect to have no Minnesota income tax withheld from these payments. If you were already having Minnesota income tax withheld from payments you received prior to May 24, 2023, you do not need to complete a Form W-4MNP unless you want to adjust your Minnesota income tax withholding.

For taxable nonperiodic distributions, you must complete Form W-4MNP to set the withholding amount or percentage for your distribution or elect not to withhold on the distribution. You may complete a new form or elect out of withholding each time you request a nonperiodic distribution.

Generally, if you submit a federal Form W-4P or W-4R for federal income tax withholding, you should complete a new Form W-4MNP.

If you previously completed Form W-4MNP for the same institution, you may use the election from the previous Form W-4MNP by confirming the election with the institution. In this case, you would not need to complete a new Form W-4MNP.

For this Form W-4MNP to be valid, you must enter your Social Security Number and sign the form. If this form is invalid or incomplete, the payer will withhold Minnesota income taxes equal to 6.25% of any taxable payment or distribution.

#### What are periodic payments and nonperiodic distributions?

Periodic payments are made in installments at regular intervals (such as quarterly, monthly, or annually) over a period of more than one year. Nonperiodic distributions are payments not made at regular intervals, including on-demand IRA distributions.

#### What if I receive multiple nonperiodic distributions?

This form is specific to the account or contract you identified above. If you have more than one account or contract with the financial institution or payer to which you are providing this form, complete a separate Form W-4MNP for distributions or payments from each account or contract.

#### What if I have completed federal Form W-4P or Form W-4R?

You will still need to complete Form W-4MNP to specify your Minnesota income tax withholding, if you have not already done so. If you do not complete Form W-4MNP and provide it to the payer, the payer will withhold Minnesota income taxes equal to 6.25% of your payments or distributions.

#### What if I choose to not have Minnesota income tax withheld?

Check the "No withholding" box and sign Form W-4MNP validate it. Consider making estimated tax payments to avoid possible penalties and interest when you file your Minnesota income tax return. If you do not check the "No withholding" box, the payer will withhold Minnesota income taxes equal to 6.25% of any taxable payment or distribution.

#### **Income Tax Rates**

Below are the 2023 Minnesota Individual Income Tax rates and brackets.

Rate	Married Filing	Jointly	Married Filing	Separately	Head of Housel	nold	Single	
-	Minnesota taxable income more than	But not more than						
5.35%	\$0	\$43,950	\$0	\$21,975	\$0	\$37,010	\$0	\$30,070
6.80%	\$43,950	\$174,610	\$21,975	\$87,305	\$37,010	\$148,730	\$30,070	\$98,760
7.85%	\$174,610	\$304,970	\$87,305	\$152,485	\$148,730	\$243,720	\$98,760	\$183,340
9.85%	\$304,970	-	\$152,485	-	\$243,720	-	\$183,340	-

#### **Use of Information**

All information on Form W-4MNP is private by state law. It cannot be given to others without your consent, except to the IRS, to other states that guarantee the same privacy, or by court order. Your name, address, and Social Security Number are required for identification. We ask for your phone number so we can call if we have questions.

#### **Questions?**

Website: www.revenue.state.mn.us
Email: withholding.tax@state.mn.us
Phone: 651-282-9999 or 1-800-657-3594

Form W-4MNP Payer Instructions on next page.



# Membership Application

Name	
Address	
City	
State	Zip
Phone (H)	
(C)	

Please send your application and check to:

Membership Treasurer

PO Box 4236

1430 Concordia Ave

Saint Paul, MN 55104

\$10

.Two-year or

Lifetime membership

Email

We look forward to meeting you at our luncheon at Ideal Hall.
You may pay your dues at that time.

Saint Paul Retired
Teachers, Inc. (SPRTI)
began in February
1944 when a group
of retired teachers
met for the first time.
It has since grown to
over 800 members
and is a registered
501(c)(3) organization.
SPRTI is still a social
organization but has
expanded to include
philanthropy and
other opportunities
for members.



Saint Paul Retired Teachers Inc.

SPRI

# Purpose and Benefits of Being a Member of SPRTI

Reconnect with colleagues and make new friends. A short business meeting before lunch includes news and sometimes an update from SPTRF regarding pensions. A terrific lunch follows and then on to the program.

Programs offer a wide variety of entertaining and educational topics. Past programs have included musicians, local celebrities, authors, and community experts (bee keeping, This Old Horse, flower arranging, and historical insights).

11:30 am Meeting Noon Lunch 1 pm Program You will receive a newsletter twice a year to keep you up to date and inform you of upcoming events. A membership directory is available for purchase with members' contact information.



# PHILANTHROPY AND OUTREACH

September is School Supplies month. SPRTI members generously provide two schools each year with additional student supplies.

December is the month to share cheer with residents at Ramsey County Care Center. SPRTI is the only organization providing holiday gifts.

Food Share Month is in March. Once again, members generously give non-perishable food and supplies which is distributed to Saint Paul food shelves.

The Scholarship Fund is a large part of what SPRTI is all about and helps strengthen Saint Paul Public Schools. Up to eight \$3000 scholarships are awarded each year to tenured teachers and professional staff for graduate studies. This endowed fund comes from money donated to honor someone or as a memorial contribution.

The fund produces enough interest to cover the annual scholarship expenses and is a registered 501(c)(3) organization.

Winners receive their awards at the May meeting.

The Outreach Committee sends cards to members who are ill, hospitalized, or need cheer.



We invite you to become a member of SPRTI. Please complete the form on the back and return it to the Membership Treasurer with a check written to SPRTI.

Meetings are held on the second Wednesday of each month except for January, July, and August. Lunch follows with a choice of three meals – entrée, salad, or vegetarian and cost \$15 including tax and tip. Meals are preordered.

If you plan to attend contact Mary Grundeen (Reservation Chair) at (651) 770-1056 for menu choices. You may also make an email reservation at sprti@hotmail.com.

# Membership

Lifetime \$50.00 2-Year \$10.00

### Location Ideal Hall

1494 North Dale Street Saint Paul, MN 55117

## Time

11:30 am Business Meeting

12:00 noon Luncheon 1:00 pm Program