



# MASSACHUSETTS LABORERS' PENSION FUND

P.O. Box 1501, 1400 District Avenue, Suite 200

Burlington, Massachusetts 01803

Telephone (781) 272-1000 • Toll Free (800) 342-3792 • Fax (781) 272-2226 • pension@mlbf.org

## SOLICITUD DE PENSIÓN DE SOBREVIVIENTE

**INSTRUCCIONES:** Lea esta solicitud cuidadosamente y ESCRIBA EN LETRA DE IMPRENTA todas las respuestas. Envíe por correo la solicitud llena a la oficina del Fondo junto con el Certificado de Defunción original, la evidencia de edad del miembro y, si aplica, su acta de matrimonio, evidencia de su edad y una copia de su licencia de conducir y su tarjeta del seguro social.

### DECLARACIÓN DEL SOLICITANTE

#### 1. QUANTO AO FALECIDO MEMBRO

a. Nombre: \_\_\_\_\_ b. N° de Seguro Social \_\_\_\_\_  
(Apellido) (Primer) (Segundo Nombre)

c. Fecha del deceso \_\_\_\_\_ (Adjunte el Certificado de Defunción)  
(Mes) (Día) (Año)

d. Fecha de nacimiento \_\_\_\_\_ (Adjunte evidencia de la edad)  
(Mes) (Día) (Año)

e. Número de Sindicato local \_\_\_\_\_ f. No. de Miembro (de la tarjeta del sindicato) \_\_\_\_\_

g. Fecha de ingreso al Sindicato \_\_\_\_\_

h. ¿El miembro recibió alguna vez Compensación de Trabajadores durante periodos de trabajo en los que se encontraba sin trabajar? \_\_\_\_Sí \_\_\_\_No. Si su respuesta es "Sí", adjunte cualquier registro de ello, incluido el nombre del Contratista, la Empresa de Seguros y cualquier otro registro del Consejo de Accidentes Industriales (Industrial Accident Board). Incluya también las fechas de la lesión y la duración de la compensación.

i. ¿El miembro recibió alguna vez beneficios semanales por parte del Fondo de Bienestar y Salud de Massachusetts (Massachusetts Laborers' Health & Welfare Fund)? \_\_\_\_Sí \_\_\_\_No

j. Fecha en la que el miembro trabajó por última vez en un empleo con cobertura. \_\_\_\_\_

#### 2. CON RELACIÓN AL SOLICITANTE

Escriba La Fecha Del Martimonio y adjunte copia del actua)

a. Su nombre \_\_\_\_\_ b. Data de matrimonio \_\_\_\_\_  
(Apellido) (Primer) (Segundo Nombre) (Escriba La Fecha Del Martimonio y adjunte copia del actua)

c. Su dirección \_\_\_\_\_  
(Numero) (Calle) (Ciudad) (Estado) (Zona Postal)

d. Su número de teléfono (\_\_\_\_\_) \_\_\_\_\_

e. Su número de Seguro Social \_\_\_\_\_

f. Su fecha de nacimiento \_\_\_\_\_ (si es viudo/a, incluya evidencia de la edad)

g. Su relación con el miembro fallecido \_\_\_\_\_

h. Si no es el viudo/a del fallecido, ¿es usted el administrador o ejecutor de su patrimonio? \_\_\_\_Sí \_\_\_\_No. Si su respuesta es "Sí", envíe el documento legal que prueba dicha afirmación.

Mediante este documento, solicito la Pensión de Sobreviviente del Fondo de Pensiones de los Trabajadores de Massachusetts y hago constar que las declaraciones expresadas en esta solicitud son verdaderas en la medida de mis conocimientos. Entiendo que una declaración falsa constituirá razón suficiente para la negación, suspensión o discontinuación de las indemnizaciones y que los miembros del Consejo de Administración tendrán derecho a recuperar los pagos efectuados a mi persona con relación a dicho falso testimonio.

\_\_\_\_\_  
(Firma del Solicitante)

\_\_\_\_\_  
(Fecha)

**NOTA:** Este es el formulario oficial que se debe utilizar cuando se solicita una pensión a este fondo. Se le enviará una notificación por escrito donde se indicará que su la Oficina del Fondo recibió la solicitud.

Se le enviará una notificación por escrito con la decisión del Consejo de Administración sobre su solicitud en un lapso aproximado de tres o cuatro meses.

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### RETENCIÓN DEL IMPUESTO SOBRE LA RENTA

Las distribuciones o retiros de este Plan están sujetas a retenciones del Impuesto sobre la Renta Federal y Estatal, a menos que usted decida lo contrario. Si usted no nos notifica que desea que se retengan sus impuestos, procederemos con la retención del Impuesto sobre la Renta según las tablas de impuestos que apliquen

Marque a continuación las opciones que correspondan. Tenga en cuenta que, incluso si usted elije que no le retengan el Impuesto sobre la Renta, igualmente será responsable del pago del mismo sobre la porción tributable de la indemnización de su pensión mensual. También podrá estar sujeto a penalizaciones impositivas según las normas de pago del impuesto estimado si sus pagos o la estimación y retención del impuesto no son adecuados, según sea el caso.

\_\_\_\_\_ (A) No deseo que se retenga el Impuesto sobre la Renta Federal ni Estatal de mi pensión. \_\_\_\_\_ (B) Deseo que se retenga el Impuesto sobre la Renta de mi pensión mensual. (Indique abajo el monto de retención que selecciona)

\_\_\_\_\_ (1) Monto en concordancia con las tablas impositivas que apliquen.

Número de exenciones: Federal \_\_\_\_\_ Estatal \_\_\_\_\_

Estado civil: Casado \_\_\_\_\_ Soltero \_\_\_\_\_

Casado pero bajo retención a una tasa individual más alta

(2 y 3 no aplican si optó por un acuerdo de suma global)

\_\_\_\_\_ (2) \$ \_\_\_\_\_ Federal \$ \_\_\_\_\_ Estatal

\_\_\_\_\_ (3) \_\_\_\_\_ % Federal \_\_\_\_\_ % Estatal

\_\_\_\_\_ (C) Estoy exento de la retención del impuesto sobre la renta en Massachusetts debido a que mi residencia legal (domicilio) se encuentra en otro lugar y el ingreso pagado no se derivó de ni estuvo relacionado con una ocupación, una profesión, un comercio ni un negocio llevado a cabo en Massachusetts.



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## Fondo de Pensiones de los Trabajadores de Massachusetts Formulario de Autorización de Depósito Directo

Mediante este documento, autorizo al Fondo de Pensiones de los Trabajadores de Massachusetts, en lo sucesivo denominado el "Fondo", para que realice depósitos directos en mi cuenta ( ) Corriente ( ) de Ahorros (*seleccione una*) en el banco que se indica a continuación, en lo sucesivo denominado el "Banco", y a acreditarlos en dicha cuenta.

**NOMBRE DEL BANCO:** \_\_\_\_\_ **OFICINA** \_\_\_\_\_  
**CIUDAD:** \_\_\_\_\_ **ESTADO/PROV.** \_\_\_\_\_ **CÓDIGO POSTAL** \_\_\_\_\_  
**NÚMERO TELEFÓNICO DEL BANCO** \_\_\_\_\_ **EXT:** \_\_\_\_\_  
**# DE ROUTING** \_\_\_\_\_ **# DE CUENTA** \_\_\_\_\_

Si desconoce su número de cuenta o enrutamiento (*routing*), contacte a su banco y solicite esta información. Asegúrese de especificar si es una cuenta corriente o de ahorros.

Esta autorización se mantendrá vigente hasta que el "Fondo" reciba una notificación POR ESCRITO de mi parte en la que se especifique su culminación de una manera que brinde tanto al "Fondo" como al "Banco" un tiempo razonable como para proceder al respecto.

**NOMBRE DEL PENSIONADO/BENEFICIARIO:** \_\_\_\_\_  
(En letra de imprenta)

**NÚMERO DE SEGURO SOCIAL DEL PENSIONADO/BENEFICIARIO:** \_\_\_\_\_

**FIRMA DEL PENSIONADO/BENEFICIARIO:** \_\_\_\_\_  
(Nombre) (Fecha)

**No. DE TELÉFONO RESIDENCIAL:** \_\_\_\_\_ **# LOCAL** \_\_\_\_\_  
(En caso de surgir dificultades con esta planilla)

**NOTA:** Toda autorización de crédito por escrito debe estipular que el receptor podrá revocar la autorización únicamente mediante notificación al emisor en la manera especificada en esta autorización.

**\*LLENE ESTE FORMULARIO PARA RECIBIR LOS CHEQUES DE SU PENSIÓN\***  
**OBLIGATORIO**

# Withholding Certificate for Periodic Pension or Annuity Payments

OMB No. 1545-0074

**2025**

Give Form W-4P to the payer of your pension or annuity payments.

## Step 1: Enter Personal Information

(a) First name and middle initial	Last name	(b) Social security number
Address		
City or town, state, and ZIP code		
(c) <input type="checkbox"/> Single or Married filing separately <input type="checkbox"/> Married filing jointly or Qualifying surviving spouse <input type="checkbox"/> Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

**TIP:** Consider using the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) to determine the most accurate withholding for the rest of the year if: you are completing this form after the beginning of the year; expect to receive your payments only part of the year; or have changes during the year in your marital status, number of pensions/jobs for you (and/or your spouse if married filing jointly), dependents, other income (not from jobs or pension/annuity payments), deductions, or credits. Have your most recent payment statements/pay stubs from this year available when using the estimator. At the beginning of next year, use the estimator again to recheck your withholding.

**Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5.** See pages 2 and 3 for more information on each step, when to use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App), and how to elect to have no federal income tax withheld (if permitted).

## Step 2: Income From a Job and/or Multiple Pensions/ Annuities (Including a Spouse's Job/ Pension/ Annuity)

Complete this step if you (1) have income from a job or more than one pension/annuity, or (2) are married filing jointly and your spouse receives income from a job or a pension/annuity. **See page 2 for examples on how to complete Step 2.**

Do **only one** of the following.

(a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for the most accurate withholding for this step (and Steps 3–4). If you or your spouse have self-employment income, use this option; **or**

(b) Complete the items below.

(i) If you (and/or your spouse) have one or more jobs, then enter the total taxable annual pay from all jobs, plus any income entered on Form W-4, Step 4(a), for the jobs less the deductions entered on Form W-4, Step 4(b), for the jobs. Otherwise, enter “-0-” . . . \$

(ii) If you (and/or your spouse) have any other pensions/annuities that pay less annually than this pension/annuity, then enter the total annual taxable payments from all lower-paying pensions/annuities. Otherwise, enter “-0-” . . . \$

(iii) Add the amounts from items (i) and (ii) and enter the **total** here . . . \$

**TIP:** To be accurate, submit a new Form W-4P for all other pensions/annuities if you haven't updated your withholding since 2021 or this is a new pension/annuity that pays less than the other(s). Submit a new Form W-4 for your job(s) if you have not updated your withholding since 2019.

**Complete Steps 3–4(b) on this form only if (b)(i) is blank and this pension/annuity pays the most annually. Otherwise, do not complete Steps 3–4(b) on this form.**

<b>Step 3: Claim Dependent and Other Credits</b>	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly):		
	Multiply the number of qualifying children under age 17 by \$2,000	\$	
	Multiply the number of other dependents by \$500 . . . . .	\$	
	Add other credits, such as foreign tax credit and education tax credits	\$	
	Add the amounts for qualifying children, other dependents, and other credits and enter the total here . . . . .		<b>3</b> \$
<b>Step 4 (optional): Other Adjustments</b>	(a) <b>Other income (not from jobs or pension/annuity payments).</b> If you want tax withheld on other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, taxable social security, and dividends . . .	<b>4(a)</b>	\$
	(b) <b>Deductions.</b> If you expect to claim deductions other than the basic standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . .	<b>4(b)</b>	\$
	(c) <b>Extra withholding.</b> Enter any additional tax you want withheld from <b>each payment</b> . . .	<b>4(c)</b>	\$

## Step 5: Sign Here

Your signature (This form is not valid unless you sign it.)

Date

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**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](http://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 1(a), 1(b), 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.

**When to use the estimator.** Consider using the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) if you:

1. Are submitting this form after the beginning of the year;
2. Have social security, dividend, capital gain, or business income, or are subject to the Additional Medicare Tax or Net Investment Income Tax;
3. Receive these payments or pension and annuity payments for only part of the year; or
4. Have changes during the year in your marital status, number of pensions/jobs for you (and/or your spouse if married filing jointly), number of dependents, or changes in your deductions or credits.

**TIP:** Have your most recent payment statements/pay stubs from this year available when using the estimator to account for federal income tax that has already been withheld this year. At the beginning of next year, use the estimator again to recheck your withholding.

**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, use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) to figure the amount to have withheld.

**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

Submit a **separate Form W-4P** for each pension, annuity, or other periodic payments you receive.

**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(b).

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

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

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

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

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

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

**Example 4.** Alex, a single filer, is completing Form W-4P for a pension that pays \$50,000 a year. Alex also has a job that pays \$25,000 a year and another pension that pays \$20,000 a year. Alex 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 Alex also has \$1,000 of interest income, which they entered on Form W-4, Step 4(a), they 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). They 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

Specific Instructions *(continued)*

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.

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 2025 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.

**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 2025, 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 2025 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: { • \$30,000 if you're married filing jointly or a qualifying surviving spouse • \$22,500 if you're head of household • \$15,000 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: • \$2,000 if you're single or head of household. • \$1,600 if you're married filing separately. • \$1,600 if you're a qualifying surviving spouse or you're married filing jointly and one of you is under age 65. • \$3,200 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	<b>Add</b> lines 3 through 5. Enter the result here and in <b>Step 4(b)</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.