



UNITED STATES OF AMERICA
RAILROAD RETIREMENT BOARD

In reply refer to

XX

Date of Birth:

Work Deduction Amount: \$

Annual Earnings Questionnaire

Our records show that part of your annuity is being reduced because you are working for your last pre-retirement, nonrailroad employer. In order for us to determine if we withheld the correct amount, please complete the questionnaire on the next page and return it to us. Be sure to provide a monthly breakdown of your earnings. If your annuity has been recently adjusted to remove work deductions, please disregard this notice.

The questionnaire is divided into three parts. Following the instructions on the enclosed Form G-19L.1, you should complete the parts of the questionnaire corresponding to the type of employment you had in _____. Attach a copy of your Forms W-2 and a copy of your Schedule SE if you were self-employed in _____. Below are some guidelines and instructions that will help you complete the questionnaire.

- You are not required to give us a monthly breakdown of your earnings and/or hours of work if your earnings and/or hours of work were about the same in each month, including months you were on vacation, were sick or injured, or were on continuation of pay. Write "Same" instead.
- The total earnings you report in Items 1, 4, and 7 should match the totals on your Forms W-2 (generally the higher amount from Box 1, 3, or 5), or the amount shown on your Schedule SE in the item labeled "Net Earnings from Self Employment." Enter your total earnings for _____ even if you do not provide a monthly breakdown of your earnings.
- Remember to provide an estimate of your earnings for calendar year 1 in Items 2, 5, and 8.

Be sure to sign and date the form in the spaces provided. Attach your Forms W-2 or Schedule SE.

Sincerely,

Enclosures
Form G-19L.1
Return Envelope

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PART A COMPLETE THIS PART FOR EARNINGS THAT ARE FROM YOUR LAST PRE-RETIREMENT (NONRAILROAD) EMPLOYER				PART B COMPLETE THIS PART FOR NET SELF-EMPLOYMENT EARNINGS				PART C COMPLETE THIS PART FOR OTHER EARNINGS THAT ARE NOT REPORTED IN PART A OR PART B			
<u>LAST PRE-RETIREMENT</u> EMPLOYER				<u>NET SELF-EMPLOYMENT</u> TYPE OF WORK				<u>OTHER POST RETIREMENT</u> EMPLOYER			
ADDRESS				ADDRESS				ADDRESS			
MONTH	EARNINGS IN MONTH			MONTH	EARNINGS IN MONTH			MONTH	EARNINGS IN MONTH		
JANUARY				JANUARY				JANUARY			
FEBRUARY				FEBRUARY				FEBRUARY			
MARCH				MARCH				MARCH			
APRIL				APRIL				APRIL			
MAY				MAY				MAY			
JUNE				JUNE				JUNE			
JULY				JULY				JULY			
AUGUST				AUGUST				AUGUST			
SEPTEMBER				SEPTEMBER				SEPTEMBER			
OCTOBER				OCTOBER				OCTOBER			
NOVEMBER				NOVEMBER				NOVEMBER			
DECEMBER				DECEMBER				DECEMBER			
1. TOTAL : \$0.00				4. TOTAL : \$0.00				7. TOTAL : \$0.00			
2. 1 EARNINGS ESTIMATE FOR THIS EMPLOYMENT: \$				5. 1 EARNINGS ESTIMATE FOR NET SELF-EMPLOYMENT: \$				8. 1 EARNINGS ESTIMATE FOR THIS EMPLOYMENT: \$			
3. IF NO LONGER EMPLOYED, SHOW THE DATE YOUR WORK ENDED:				6. IF NO LONGER EMPLOYED, SHOW THE DATE YOUR WORK ENDED:				9. IF NO LONGER EMPLOYED, SHOW THE DATE YOUR WORK ENDED:			
DATE	MO.	DAY	YEAR	DATE	MO.	DAY	YEAR	DATE	MO.	DAY	YEAR

Do your best to complete all items that pertain to your earnings, especially Items 1 through 9. **Be sure to enclose copies of your Forms W-2 for and a copy of Schedule SE if you were self-employed.**

To avoid penalties, you must return this questionnaire within 30 days of the date of the form. If you need more time, let us know as soon as possible. We can allow additional time if you have special circumstances.

I CERTIFY THAT THE INFORMATION I AM GIVING IS TRUE, COMPLETE, AND CORRECT. I UNDERSTAND THAT CRIMINAL AND CIVIL PENALTIES MAY BE IMPOSED ON ME FOR FALSE AND FRAUDULENT STATEMENTS.

SIGNATURE _____

DATE _____

Daytime Telephone Number (optional)
(In case we have questions about your responses.)



Area Code			Telephone Number					

MAIL YOUR COMPLETED QUESTIONNAIRE TO:

U.S. RAILROAD RETIREMENT BOARD