Complete Form then click on Submit Button to Process

UNITED STATES OF AMERICA RAILROAD RETIREMENT BOARD Employer's Quarterly Report of contributions under the Railroad Unemployment Insurance Act This Report is Required By Law - 20 C.F.R. 345.5			Paperwork Reduction Act Notice Employer Number			FORM APPROVED O.M.B. No. 3220-0012 Calendar Quarter and Year /									
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Month	Year		╣												
6a. Interest Penalties	/	6b. I/P Total			7. Report Total		0.00								
8. Amount of Remittance					1		0.00								
9. Preparer's Name	Robert Elling]!									
Telephone No.	312-751-4310														
L I CERTIFY THAT I HAVE EXAI HEREIN ARE TRUE AND COF FRAUDULENT INFORMATION BOTH.	MINED THIS REPOR RRECT, AND IN ACC	ORDANCE WITH T	THE LAW AND	REGULATIONS AP	PLICABLE HERETO. I UN	IDERSTAND THAT	PROVIDING FALSE OR								
SIGNATURE RobertElling TITLE															
FORM DC-1 (4-03) DESTROY	<u> </u>			Submit	DATE 3/25/200	 9									

INSTRUCTIONS

EMPLOYER'S CONTRIBUTIONS AND CONTRIBUTION REPORTS

Paperwork Reduction Act Notice. - We ask for this information to carry out the provisions of the Railroad Unemployment Insurance Act. We need it annual notice and in column (e) the amount of contribution due. to ensure that railroad employers are complying with the act and to allow us to compute and collect the correct amount of contributions. You are required Item 2 - Compensation Adjustments. - Enter in column (a) the month to give us this information.

needed data, and reviewing the completed form. Federal agencies may not net increase or decrease resulting from compensation adjustments of Information Resources Management, Railroad Retirement Board, 844 N. 345 of the RRB's regulation for years prior to 1981. Enter in column (e) the Rush St., Chicago, IL 60611-2092. Please do not return this form to this amount of contributions due. address.

General requirements. Unemployment Insurance Act is required to pay a contribution equal to a after the amount. percentage of the compensation earned by any employee. All employers are Item 3 - Total. - Enter the total of the compensation amounts shown for notified annually of the contribution rate with Form ID-40r. Annual Notice to items 1 and 2 in column (c) and the total of the contribution amounts in Employer - RUI Act. in October. The monthly compensation base is established every November via a separate notice.

one or more employees.

The report for each quarter must be filed and the contributions must be paid on or before the due date shown below:

> QUARTER ENDED DUE ON OR BEFORE March 31 April 30 June 30 July 31 September 30 October 31 December 31 January 31

report must be filed and the payment made on or before the next following Form DC -1 to be corrected. Enter on line 2 in columns (c) through (e), the business day. The report must be postmarked on or before the date on correct information. Additional corrections to Forms DC -1 should be which the report is required to be filed. Payments by electronic medium documented on an attachment in the same format as the first correction. must be effective on or before the date on which the DC -1 report is required On line 3 of columns (c) and (e) the net correction total is entered.

Penalties. - For failure to file a report on or before the date on which it is due, section 345 of the regulations provides a penalty of five to twenty-five percent of the contribution, depending upon the duration of the delinquency. unless the employer establishes to the satisfaction of the Railroad Retirement Board (RRB) that a reasonable cause exists for the delinquency.

Interest. - If any contribution is not paid when due, interest will accrue by this report. Add the amounts shown in items 5e and 6b. thereon at the rate of one percent per month or fraction of a month from the date on which it became due until it is paid. A fractional part of the month will Item 8 - Amount of Remittance. - Enter in this space, in column (e), the be treated the same as a full month, e.g. a contribution postmarked one day total amount remitted for this report. It should be the amount shown in item after the due date will be assessed a full month's interest.

Records. - Every employer under the Railroad Unemployment Insurance as well as a telephone number at which he or she may be reached. Act must keep accurate records containing sufficient information to enable the RRB to determine whether the contributions have been correctly computed and paid. Such records shall be maintained for a period of at least Signature. - Each report must be signed by (1) the individual if the five years after the date the contribution to which they relate becomes due employer is an individual, (2) the president, vice president, or other duly or the date the contribution is paid, whichever is later, and shall be open at authorized officer if the employer is a corporation, or (3) a responsible or all times to the inspection of the RRB or any of its officers or employees.

FILLING IN FORM DC-1 HEADING

Heading. - Enter the employer number used in reporting compensation to the RRB's Chief of Employee Service/Training Center; enter the final date of the period covered; enter in full the correct name and address of the employer. If future reports are not required please check "FINAL REPORT". Also check box to indicate method of payment.

BODY

Item 1 - Current reporting period. - No entry required in columns (a) and (b). Enter in column (c) the total compensation subject to contribution for the current reporting period, in column (d) the contribution rate indicated in the

indicated of Form BA - 4 Report of Creditable Compensation Adjustments. Enter in column (b) the calendar year which was adjusted by the Form BA (We think this form takes an average of 25 minutes per response to 4 (a BA - 4 that adjusts more than 1 calendar year requires a separate line complete, including the time for reviewing the instructions, getting the for each year). Enter in column (c) on the appropriate line the amount of the conduct or sponsor, and respondents are not required to respond to, a applicable to prior periods as reported on Form BA- 4 filed during the period collection of information unless it displays a valid OMB number. If you wish, covered by the report. The entry is to be made in the space provided for the send comments regarding the accuracy of our estimate or any other aspects period affected by the adjustment. Enter in column (d) the contribution rate of this form, including suggestions for reducing completion time, to the Chief applicable (8.0%) for years from 1/1/1981 through 12/ 31/1990; see section

- Every employer under the Railroad If any amount is a decrease, it should be noted by inserting the letter "D"

column (e). The total compensation reported on line 3 for the four quarters of each year should be the same as the total compensation reported of forms BA-3a. Annual Report of Creditable Compensation and BA-4 to the Reporting requirements. - Each employer must file a report and pay Chief of Employee Service/Training Center. If they do not agree, please contributions for each calendar quarter in which compensation is earned by attach a statement that explains the reason(s) for the difference in total compensation reported here and separately reported to the Chief of Employee Service/Training Center. The total compensation to be listed on this contribution report is to be derived form payrolls or other disbursement documents for appropriate quarter.

Item 4 - Correction to prior Forms DC-1. - Enter in this space corrections, underpayments or overpayments of contribution not involving BA-4 adjustments applicable to prior compensation reports. On line 1 in column (a) enter the calendar quarter and year of the Form DC -1 which requires correction. Enter in column (b) the calendar year adjusted. Entries If the due date falls on Saturday, Sunday, or a national legal holiday, the in columns (c) through (e) should be the same information as indicated on

> Item 5 - Total. - Add columns (c) and (e) of item 3 and line 3 of item 4 and enter the totals.

> Items 6a & b - Interest/penalties. - Indicate the quarter and year applicable in item 6a. Enter the amount of interest/penalties in item 6b.

Item 7 - Report Total. - Enter the total amount of the remittance required

Item 9 - The name of the individual preparing the form should be indicated

SIGNATURE

duly authorized member or officer having knowledge of its affairs, if the employer is a partnership or other incorporated organization. The title of the officer must be indicated as well as the date signed

DC -1 (4-03)

Paperwork Reduction Act Notice

We ask for this information to carry out the provisions of the Railroad Unemployment Insurance Act. We need it to ensure that railroad employers are complying with the act and to allow us to compute and collect the correct amount of contributions. You are required to give us this information.

We think this form takes an average of 25 minutes per response to complete, including the time for reviewing the instructions, getting the needed data, and reviewing the completed form. Federal agencies may not conduct or sponsor, and respondents are not required to respond to, a collection of information unless it displays a valid OMB number. If you wish, send comments regarding the accuracy of our estimate or any other aspects of this form, including suggestions for reducing completion time, to the Chief of Information Resources Management, Railroad Retirement Board, 844 N. Rush St., Chicago, IL 60611-2092. Please do not return this form to this address.