



Appendix I Employer Reporting Instructions Effective 01-2008

U.S. Railroad Retirement Board Phone: (312) 751- 7139
844 North Rush Street TTY: (312) 751- 7401
Chicago IL, 60611-2092 Web: www.rrb.gov

Electronic File Format for Form BA-3, Annual Report of Creditable Compensation

The information contained in this report, which is required by law under Section 9 of the Railroad Retirement Act (RRA) and Section 6 of the Railroad Unemployment Insurance Act (RUIA), is needed to pay RRA and RUIA benefits and is authorized for collection under OMB control number 3220-0008.

This report is due at the Railroad Retirement Board by no later than the last day of February. Failure to report or the making of a false or fraudulent report can result in criminal prosecution or civil penalties, or both.

We estimate the electronic version of this form, transmitted by e-mail or FTP, takes an average of 46.25 hours per response to complete, including time for reviewing the instructions, getting the needed data, and reviewing the completed form.

This exhibit explains only magnetic media format. For information about the data to be entered, refer to Part V, Chapter 3.

Report Specifications	
Record Length	300 Characters
Money Fields	All money fields include two cent positions and no decimal point. No fields should be signed. Fill out money fields with zeros.
Numeric Fields	Fill out all numeric fields with zeros to the left of the significant digits.
Service and Compensation	There should be no record which contains neither service or compensation data. A record may contain only service months or only compensation, but must contain one or the other.
Totals Record	Every magnetic media report should include a grand-totals record at the end. The specific format is in the appendix. Optional subtotal records may be included.
Header Labels	Cartridges must have header labels in IBM standard format.
Block Size	Recommended block size is 3000 (factor 10).
Code Language	Cartridges: EBCDIC encoded on 9 track 1/2 inch CD ROM, floppy disk: and electronic files: Formatted ASCII text



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Form BA-3 Record Format	
Tape Positions	Data and Instructions
1	"0" (zero).
2-5	Four digit year being reported.
6	"7"
7-10	Four-digit BA number assigned by the Railroad Retirement Board.
11-20	Entries in this field are optional. The "Payroll ID" reference number shown here will be included on certain correspondence to the employer to assist the employer in locating the employee.
21-29	Employee's social security number.
30-49	First twenty (20) characters of the employee's surname. Spaces in such names as McCarthy, St. Clair, De La Cross are acceptable.
50-64	First fifteen (15) characters of the employee's first name.
65	Employee's middle initial.
66-72	RUIA I (\$\$\$\$\$¢¢) – Total compensation which is creditable under the RUIA to qualify for benefits. This amount should not exceed the RUIA I monthly maximum times 12.
73-74	Blank Filler.
75-81	RUIA II (\$\$\$\$\$¢¢) – Total compensation which is creditable under the RUIA to determine maximum benefits. This amount should not exceed the RUIA II monthly maximum times 12.
82-83	Blank Filler.
84-95	<p>Service Month Detail. The RRB has added service month codes 8 and 9 for employers to report employment relation information for non-worked months. The new codes would be used in place of code zero (0). The possible service month codes are:</p> <p>1 = worked 8 = not worked but has employment relation (new). 9 = not worked and has no employment relation (new) 0 = not worked and employment relation is unknown.</p> <p>All 12 positions should be filled. You cannot mix all four codes for a single employee. You must use either codes (1, 8, and 9) or use existing codes (1 and 0).</p>
96-97	Service Month Total. The sum of the characters in positions 84-95. Enter zeroes if no months are reported.
98-105	Creditable Tier I compensation, up to the annual maximum for the year. (\$\$\$\$\$¢¢)
106-107	Blank Filler.
108-115	Creditable Tier II compensation, up to the annual maximum for the year. (\$\$\$\$\$¢¢)
116-117	Blank Filler.
118-122	Last daily pay rate. (\$\$¢¢) If pay rate exceeds \$200.00, enter 20000.
123-124	Blank Filler.
125-132	Creditable Miscellaneous compensation. (\$\$\$\$\$¢¢)
133-134	Blank Filler.
135-142	Creditable Sick Pay compensation. (\$\$\$\$\$¢¢)
143-145	Blank Filler.



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Form BA-3 Record Format	
Tape Positions	Data and Instructions
146-175	Mailing Address Line 1 (Street Number, Post Office Box, etc.).
176-205	Mailing Address Line 2.
206-225	City
226-227	State
228-232	Zip Code
233-240	Effective date of the address information. (MMDDCCYY).
241-300	Blank Filler. (For future expansion).

Paperwork Reduction Act (PRA) Notice

Federal agencies may not conduct or sponsor, and respondents are not required to respond to, any collection of information unless it displays a valid OMB number. If you wish, send comments regarding the accuracy of our estimates or any other aspect of these forms, including suggestions for reducing completion time, to

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