

**SECTION 3 - CITIZENSHIP, RESIDENCY AND TAX TREATY EXEMPTION INFORMATION**

<b>A. RRB CLAIM NUMBER</b>		1. Enter your claimed country of citizenship → <input style="width:80%;" type="text"/>
<b>B. YOUR UNITED STATES TAXPAYER IDENTIFYING NUMBER</b>		2. Enter your claimed country of legal residence → <input style="width:80%;" type="text"/> <b>Note:</b> If this is different than the country shown in item G, you must submit proof of residency for the country entered in item 2.
<b>C. PAYEE CODE</b>	<b>D. CNTRY CODE</b>	3. Do you claim exemption (request reduced tax withholding) under any tax treaty in effect between your country of legal residence and the United States? → <input type="checkbox"/> YES <input type="checkbox"/> NO  <b>Note:</b> To receive an exemption, you <b>MUST</b> comply with certain requirements. See Form TB-26 for more information about claiming an exemption.
<b>E. CITZ CODE</b>	<b>F. NRA TAX CODE</b>	
<b>G. NAME AND ADDRESS</b>  _____  _____  _____		4. Enter your United States passport number only if you have a U.S passport that has not expired. <input style="width:80%;" type="text"/>  5. I understand that making a false or fraudulent statement to the RRB is a crime punishable by Federal law. I certify that the information provided on this certificate is true, complete, and correct. I will notify the RRB within 30 days of any change in this information.  → <b>SIGNATURE AND DATE</b> This certificate <b>MUST BE SIGNED</b> to be valid. <span style="float:right">(MO) (DAY) (YR)</span>

Form RRB-1001 (8-98)

UNITED STATES OF AMERICA  
RAILROAD RETIREMENT BOARD

**NONRESIDENT QUESTIONNAIRE**

FORM APPROVED  
OMB No. 3220-0145

**SECTION 1 - GENERAL INSTRUCTIONS**

Your railroad retirement benefits may be subject to United States income tax withholding. You must use this form to inform the Railroad Retirement Board (RRB) of your citizenship and legal residence status so we may determine if or how your benefits are subject to tax withholding. Read the enclosed Form TB-26. Then complete items A, B, C, and G, and items 1 through 5 on the other side of this form. If items A, B, C, and G have been completed for you, please check to be sure the information is correct. Promptly return the completed form to an office of the RRB using the envelope provided. We suggest you use air mail.

If you need any help completing this form, contact an office of the RRB or an American Embassy or Consulate. If you have any questions about your tax obligation, contact an office of the United States Internal Revenue Service (IRS).

**Paperwork Reduction and Privacy Act Notice**

The information requested on this form is needed to determine whether your Railroad Retirement Act benefits will be subject to tax withholding under United States income tax laws. The RRB's authority for requesting this information is 26 U.S.C. Section 1441. Providing the information requested is voluntary on your part. However, if you fail to do so, the RRB may be required to withhold taxes at a mandatory rate prescribed by the IRS. Federal agencies may not conduct or sponsor, and respondents are not required to a collection of information unless it displays a valid OMB number.

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**SECTION 2 - RRB/STATE DEPARTMENT USE**

Description of Proof of Residency:
Signature of Official and Date (Affix Stamp):