## STEWARDSHIP AET WORKBOOK

NU							
	MBER HOLDER'S NAME		NUMBER HOLDER'S SSN				
BE	NEFICIARY'S NAME AND BI	С	X-REFERENCE CLAIM NUMBER	X-REFERENCE CLAIM NUMBER			
SA	MPLE MONTH AND YEAR		CLOSED YEAR				
the que ent of l	purpose of this review is to f estions about their entitlement itlement. If necessary, point beneficiaries. is information collection mee t of 1995. The beneficiary is a	ind out how well the Social Security to Social Security benefits and that out that the Social Security Adminis ts the clearance requirements of 44 Unot required to answer these question	is case is one of a small number selected program is working. Tell them that this we may need to talk to others who have tration is authorized by law to review for the second se	s review consists of the information about the time to time to the Paperwork Management and B	of asking ut their he entitlement Reduction sudget		
	DESK REVIEW						
P/-	ART I CLOSED Y MBR Annual Report	•	ERVICE MONTHS, AND S	SWP			
	Closed Year Earnings Amount Non-Service Months		Non-Service Months	LMETY			
2.	Closed Year Posted I	EarningsAs shown on the S	EQY/DEQY				
2.	Closed Year Posted F	EarningsAs shown on the S Noncovered Earnings	EQY/DEQY Posted SWP	Countable AF	ET Earnings		
2.	Covered Earnings  Do the posted earning year agree with the	Noncovered Earnings gs and special wage paymen Annual Report informati	<u> </u>	DEQY for the	he closed		
	Do the posted earning year agree with the	Noncovered Earnings gs and special wage paymen Annual Report informati	Posted SWP  t (SWP) information from the on from the MBR/Claims f	DEQY for the	he closed		
	Covered Earnings  Do the posted earning year agree with the Yes	Noncovered Earnings  gs and special wage payment Annual Report informati No (If No, describe the dev	Posted SWP  t (SWP) information from the ton from the MBR/Claims for the velopment needed to resolve to	DEQY for the	he closed		
<b>P</b> /	Covered Earnings  Do the posted earning year agree with the Yes  ART II ANNUAL I	Noncovered Earnings  gs and special wage paymen Annual Report informati No (If No, describe the dev	Posted SWP  t (SWP) information from the ton from the MBR/Claims for the present needed to resolve to closed year?	DEQY for the discrepance	he closed		
P/	Covered Earnings  Do the posted earning year agree with the Yes  ART II ANNUAL I Did the beneficiary for the User Earnings for the If Yes, was AET info	Noncovered Earnings  gs and special wage payment Annual Report informati No (If No, describe the dev  REPORT PROCESSING  file an annual report for the ne closed year available on Secondarion given or were the	Posted SWP  t (SWP) information from the ton from the MBR/Claims for the present needed to resolve to closed year?	DEQY for the discrepance	he closed  cy.)  No		

#### **FIELD REVIEW**

### **Date of Beneficiary Contact:**

#### PART I -- CLOSED YEAR EARNINGS, NSM AND SWP

1. Wages -- List beneficiary's employment allegations for the two years before the closed year through the date of the interview. (Get W-2 forms for the closed year and subsequent year, unless the DEQY agrees with the beneficiary's allegation. If earnings for the closed year are significantly lower than the years before and after, ask the reason for the decline.)

	Employer Name		Address	Years(s)	Amount of Earnings		
	Employer Nume		7 <b>Iddi C</b> 33	Employed	Closed Year	r Subsequent Year	
	5	s the beneficiary a corporate officer/related to a corporate officer of a close or family poration listed above?			ose or family		
	(If Yes, complete an SSA-795 per QRM 8044. If applicable, get a copy of resignation from office and the corporate minutes accepting the resignation. If a questionable retirement issue is still not resolved, get copies of tax returns and any other available evidence.)						
2.	<b>Self-Employment List beneficiary's self-employment allegations for the two years before the closed year through the date of the interview.</b> (Certify or make copies of schedules C or F and SE for closed year and subsequent year, if filed.)						
	Name & Address of Busin	ess	Type of Business	Date Started	Date Ended	If Ended, Reason Ended	

If business sold or transferred, give the name, address, and phone number of the present operator and relationship to the beneficiary:

Non-service Months If LMETY not used before non-service months. Check the Wages block if the in wages and/or the SE block if beneficiary was alleged NSMs are material to payment for the closed years.	<b>beneficiary</b> <b>SE and dic</b> vear, get evide	earned under the d not render subs	e monthly	<b>AET</b> limi	
Non-service Months If LMETY not used before non-service months. Check the Wages block if the in wages and/or the SE block if beneficiary was alleged NSMs are material to payment for the closed yet the employer. If SE, get the name/phone/address of people in the control of	ore the close beneficiary s SE and dic year, get evide	earned under the d not render subs	e monthly	<b>AET</b> limi	
Non-service Months If LMETY not used before non-service months. Check the Wages block if the in wages and/or the SE block if beneficiary was alleged NSMs are material to payment for the closed yet the employer. If SE, get the name/phone/address of people in the control of	ore the close beneficiary s SE and dic year, get evide	earned under the d not render subs	e monthly	<b>AET</b> limi	
Months Wages SE Months Wag	4. Non-service Months If LMETY not used before the closed year, enter the non-service months. Check the Wages block if beneficiary earned under the in wages and/or the SE block if beneficiary was SE and did not render substalleged NSMs are material to payment for the closed year, get evidence of wage NSMs the employer. If SE, get the name/phone/address of people with knowledge & contact the conta				
Wages 3E Months Wag	ges SE	Months	Wages	SE	
January May		September			
February June		October			
March July		November			
April August August		December			

# **CASE SUMMARY**

Countable AET Earnings Established by QR	If LMETY is Closed Year, NSM Established by QR
Do the payment adjustments, if any, made by S year or the last day of the sample month accurately Yes No (Explain):	
If there are any AET deficiencies which affect code the error, and prepare the SSA-93 for cor	<b>1</b>
REVIEWER'S SIGNATURE	DATE