

## AA-1 (Internet) Process and Screen Descriptions

The proposed AA-1 (Internet), *Application for Employee Annuity*, is not a form in the traditional sense. Although it collects essentially the same information as the other approved versions of the AA-1 application, it consists of a series of screens, which collect the necessary information. It also provides the required notices and certifications, as well as help messages designed to guide the applicant through the system and successfully complete the application. Depending on the response to specific questions, the application automatically displays additional, appropriate questions for the applicant to answer.

### Process

1. The applicant will access Form AA-1 (Internet) through the RRB's website, RRB.Gov, and complete the application without assistance by RRB personnel. However, before the AA-1 (Internet) can be accessed, the applicant's identity will be authenticated by Login.gov, which requires a two-factor authentication process. The applicant will be requested to provide information for a Level of Assurance 3 (LOA3), including full name, date of birth, home address, phone number, email address and password. A description of the process was posted in the Federal Register under GSA dated January 19, 2017 (attached). The RRB is updating its website to accommodate forms that will require authentication through Login.gov (**See Screens A-E**).
  2. Upon logging onto RRB.gov, *Benefit Online Services*, the Introduction Screen (**Screen 1**) will be displayed. The Introduction Screen contains a description of the process and the RRB toll-free number to contact an RRB representative for additional information. The screen also contains links to:
    - the Paperwork Reduction Act and Privacy Act Notices (**Screen 2**),
    - the Informational Booklet RB-1, "*Age and Service Employee Annuity*" (**Screen 3**), and
    - a checklist of information needed for completing the application (**Screen 4**),
  3. The left side of each screen will show the Quick Access bar which contains the RRB's government seal along with a list of the different steps used in the application process (**Screen 5**).
  4. Each step will have the option to:
    - continue to the next step by clicking "Next"
    - save the current step information and stay on the screen by clicking "Save," or
    - return to the previous step by clicking "Previous."
    - Applicants can also access a specific step using the Quick Access bar on the left-hand side of each screen.
- NOTE:** When the applicant clicks the "Next," "Save," or "Previous" buttons, the entered information will be saved.
5. Partially completed applications will be saved on a temporary database for 90 calendar days. During that time the applicant can resume completion at any time; however, after 90 days, a partially completed application will be deleted. To apply for an annuity, the

applicant will need to start the application process again. This is all described on the Introduction Screen (**Screen 1**).

6. Pressing the “Start Application” button (**Screen 1**) accesses Step 1, the “Employee Information” screen (**Screen 6**). The employee’s first and last names, email address, date of birth, address, and telephone number are prefilled from Login.gov. The applicant provides the additional identifying and contact information seen on **Screens 6-6a**.

**Note:** If the applicant is reentering a partially completed application, the “Start Application” button will change to “Resume Application.”

7. The first page of each subsequent step provides the items that the applicant must complete with a selection of either a “Yes/No” response, dropdown list, or radio button. The screens that follow each step show the input values for that step. Only input values that require a response are shown. For example, if the response to a question is “No” but the applicant must provide additional information, then those input screens are provided. However, if the response to a question is “No” and the applicant does not have to provide additional information, those screens are not shown.
8. The application has a popup screen accessed by clicking “Add” to provide additional information. For example, the popup is used when the applicant has to report employment or describe family members. A table at the bottom of the screen will display the information entered on the popup screen. For an example, see the bottom of Screen 8.
9. When the applicant has completed all of the screens, they are given the opportunity to review and edit their responses (**Screens 21 and 21a**). The applicant’s responses are displayed in contracted steps. Clicking on a title expands and contracts the information in each step to show the responses the applicant previously provided. Selecting the Edit key on any step, returns the applicant to that step to show the responses previously supplied and allows the applicant to make changes. Before submitting the application, the applicant will have the option of printing the responses.
10. The last step is the Certification screen (**Screen 22**). The application is officially filed when the Submit button is clicked and the application is successfully transmitted to the RRB. The applicant will receive an application submission confirmation email (**Screen 23**).
11. After the application is submitted, the information will be moved from the holding database to the currently existing APPLICATION EXPRESS (APPLE) system. Once the application has been successfully submitted, it is frozen and cannot be modified by the applicant. The applicant will receive an email (**Screen 23**) advising that the application has been successfully submitted and providing reminders of events that must be reported.

**Screen Descriptions** (Below is a brief description of each screen.)

- Screen 1 – Introduction Screen
- Screen 2 – Paperwork Reduction Act and Privacy Act Notices
- Screen 3 – Informational Booklet RB-1, Age and Service Employee Annuity
- Screen 4 – Checklist
- Screen 5 – Quick Access Bar (appears on left of all screens)
- Screens 6-6b, Step 1 – Employee Information
- Screens 7-7b, Step 2 - Information About Type of Annuity - The applicant indicates the type of annuity they wish to apply for.
- Screens 8-8k, Step 3 – Employee’s Family Info – The applicant provides information about current and past spouses and any children who may qualify the employee for additional benefits. After responding to questions concerning the type and number of spouses and children, the applicant will click on the “Add” button to access a popup screen and provide additional information about each family member.
- Screens 9-9a, Step 4 – Information About Your Railroad Work - This step requests information about the applicant’s railroad employment. All applicants will have at least one employer in the railroad industry. The applicant will click on the “Add” button to access a popup screen to enter additional information. Multiple employers can be entered. A table will display information entered for each employer. The applicant has the ability to edit or delete the information provided.
- Screens 10-10f, Step 5 – Information About Your Nonrailroad Work - This step requests information about the applicant’s nonrailroad employers in the previous six months or since the applicant stopped working in the railroad industry. A portion of the Tier 2 is not payable if the applicant continues working for an employer or begins working for an employer prior to the annuity beginning date. In addition, information about any self-employment will be provided. A table will display information entered for each employer. The applicant has the ability to edit or delete the information provided.
- Screens 11-11d, Step 6 – Information About Your Earnings - This step requests information about the applicant’s nonrailroad earnings which are over the annual earnings exempt amount. The Tier I portion of an employee’s annuity is reduced for earnings over the exempt amount. The Annual Earnings Exempt Amount is based on whether the employee has reached Full Retirement Age (FRA). The annual and monthly exempt amounts are automatically prefilled. When the applicant indicates they will have earnings over the exempt amount, they will be asked for the amount of last year’s earnings, if the annuity can begin before January of the current year. The applicant will also be asked for an estimate of the current year’s earnings and next year’s earnings. Applicants who are over FRA will not complete the questions for any full calendar year they are over FRA.
- Screens 12-12b, Step 7 – Information About Your Pay for Time Lost and Sick Pay - This step requests information about payments from the railroad for time lost, including personal injury settlements, wage continuation plans, dismissal allowances. The applicant also provides information about any lawsuit they have filed or expect to file.
- Screens 13-13c, Step 8 – Information About Garnishment, Criminal Offense, and Deemed Current Connection – This step requests information about legal process court orders and incarceration due to a conviction for a criminal offense. The applicant will also provide information to determine if entitled to a deemed current connection.
- Screens 14-14a, Step 9 – Information About Your Military Service – This step requests information about any active military service.

- Screens 15-15a, Step 10 – Information About Your Social Security Benefits - This step requests the applicant provide information about receiving and filing for social security benefits on the their own account or someone else’s account.
- Screens 16-16i, Step 11 – Information About Your Noncovered Service Pension - This step requests information about any pension or lump-sum payment the applicant received or will receive from work after 1956 that is not covered by the Railroad Retirement Act or the Social Security Act.
- Screens 17-17a, Step 12 – Information About Other Railroad Retirement Annuity – This step requests information about receiving and filing an RRA benefit under another employee’s earnings record.
- Screens 18-18f, Step 13 – Information About Private Pensions - This step requests information about a private pension the employee receives from any of the employee’s railroad employers.
- Screens 19-19f, Step 14 – Information About Medicare - Through a series of questions, the applicant advises if they currently have Part B Medicare, have recently filed for Part B Medicare or would like to file for Part B Medicare. Information concerning Employer Group Health Plans is also collected. These questions are only asked if the applicant has met the 64 years and 5 months age requirement for Medicare enrollment. Otherwise, the applicant is advised to go to the next step. (See **Screen 19**.)
- Screens 20-20a, Step 15 - Receiving Your Payments - The applicant selects whether their payments will be paid via direct deposit or by debit card. If direct deposit is selected, information about the applicant’s financial institution is also secured.
- Screens 21-21a, Step 16 – Summary
- Screen 22, Certification
- Screen 23, Confirmation, Printing, and Sample Email Messages

## **Additional Items**

The following questions have been added to the AA-1 (Internet) for clarity and/or to help us produce the correct fields.

1. Screen 6 - Does your name match the name on your social security card?

Clarifying question to make sure the name on the applicant's social security card matches the name the RRB has. If the applicant answers "No," the next question is "Name on SSA card."

2. Screens 6, 8d, 8f, 8g, 8i, and 12b - Do you currently live outside the United States?/Currently reside outside of the United States?/Did this marriage begin outside the United States?

Clarifying questions produce the appropriate fields to gather the address information. The standard U.S. format appears if they reside in the United States (Screen 6) and the foreign address format appears if they reside outside the United States (Screen 6a).

3. Screen 10d - Pay Period

Reworded current AA-1, Item 57 language, from "monthly salary" to "Pay Period" to give the applicant multiple options for indicating salary (Weekly, Bi-weekly, Monthly, Yearly).

**New Item** (Screen 8) - Are you expecting a newborn?/Expected Delivery Date

This information will help determine if the applicant can potentially receive an additional benefit amount.

RRB.gov outage for Sunday, February 26, 2017. [More](#)

Search



Field Office Locator



**U.S. Railroad Retirement Board**

- Home
- Our Agency
- Benefits
- Employers
- Resources
- Financial & Reporting
- News Room



## Change in Service Hours for Field Offices

Effective at noon on June 1, 2016, U.S. Railroad Retirement Board (RRB) field offices around the country will be closed to the public on Wednesday afternoons.

[Read More](#)

## Benefit Information



### Retirement

Information about retirement annuities for railroad employees and the benefits available to their spouses and survivors.



### Survivor

Information about survivor annuities for railroad employees and the benefits available to their spouses and survivors.



### Disability

Information about disability annuities for railroad employees and the benefits available to their spouses and survivors.



### Sickness

Information about sickness annuities for railroad employees and the benefits available to their



### Unemployment

Information about unemployment annuities for railroad employees and the benefits available to



### Benefit Online Services



## Benefit Online Services

Conduct private and secure RRB business over the Internet

### Login Required

- Get Retirement Annuity Rate Estimate
- Apply for Unemployment Benefits
- Claim Unemployment Benefits
- Claim Sickness Benefits
- View RUIA Account Statement
- View Service & Compensation History
- Access Online Retirement Application

### No Login Required

- Request Duplicate Tax Statement
- Request Monthly Rate Verification
- Request Replacement Medicare Card
- Request Service & Compensation History
- Online Bill Payment

#### More Information

- ▶ [PIN Password \(PPW\) FAQ](#)
- ▶ [Login.gov FAQ](#)

#### View Presentations

- ▶ [Requesting a PRC](#)
- ▶ [Benefit Online Services](#)

#### Related Links

- ▶ [Security Information](#)
- ▶ [Call toll free with RRB National Telephone Service](#)
- ▶ [RRBVision Video Library](#)
- ▶ [Glossary of RRB Terms](#)
- ▶ [Railroad Retirement Handbook](#)



### Login Required

Online services either use a Pin Password (PPW) account, or a Login.gov account. Please select the appropriate method depending on the application you are looking for.

### RUIA & Service History

The following Internet services are intended for railroad employees who are not receiving annuities.

- Apply for Unemployment Benefits
- Claim Unemployment Benefits
- View RUIA Account Statement
- Claim Sickness Benefits
- View Service and Compensation History
- Get Retirement Annuity Rate Estimate

First time users must establish an account by requesting a Password Request Code (PRC) be mailed to their home address.

[Log In to your PPW Account](#)

[Request a PRC | Establish Internet Account \(after receiving PRC\)](#)  
[Request New Password](#)

### Online Retirement Application

Apply for your retirement application, lorem ipsum dolor sit amet, consectetur adipiscing elit.

- Online Retirement Application

[Sign In](#)

with LOGIN.GOV

#### Related Links

- ▶ [PIN Password \(PPW\) FAQ](#)
- ▶ [Login.gov FAQ](#)
- ▶ [Service & Compensation History Info](#)
- ▶ [Retirement Annuity Rate Estimate Info](#)
- ▶ [Unemployment Benefits Application Info](#)
- ▶ [Unemployment Benefits Claim Info](#)
- ▶ [Sickness Benefits Claim Info](#)
- ▶ [RUIA Account Statement Info](#)
- ▶ [Security Information](#)

#### View Presentations

- ▶ [Requesting a PRC](#)
- ▶ [Benefit Online Services](#)
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- ▶ [Filing Unemployment Claims](#)
- ▶ [Filing Sickness Claims](#)

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- ▶ [Railroad Retirement Handbook](#)





U.S. Railroad Retirement Board



**Railroad Retirement Board is  
working with login.gov  
to make accessing your information  
easy and secure.**

To make a login.gov account you'll need to have an email address and phone number where we can reach you. You'll also need to verify your identity to access sensitive information about yourself.

**Get started**

Already have an account? [Sign in here](#)

You will need



**User goes through rest of the  
login.gov experience**

Welcome, **George Washington** ▾

Logout

Your account is managed by

• LOGIN.GOV

Account settings ▸

Another line item ▸

## Introduction

Before you start your application, we recommend that you take a moment to prepare by reviewing a few items.

- [Read the Paperwork Reduction Act and Privacy Act Notices.](#)
- [Read booklet RB-1, Age and Service Employee Annuity.](#) This booklet explains information you will need to answer many of the questions in this application, including the requirements to receive a Retirement Annuity, how to apply for an annuity and what will happen after you file your application.
- Gather all the information you need to complete the application process. See [Checklist](#).

We anticipate that completing this application will take about 45 minutes. You can save your application and return to complete it at any time, until you submit it for processing. A partially completed application will be saved for 90 calendar days. After 90 days, if the application has not been submitted, it will be deleted and you will need to start the application process again.

Make sure to submit to the Railroad Retirement Board (RRB) any necessary proofs or additional forms you were asked to complete.

NOTE: After the RRB receives your application, a receipt form with information about your claim will be sent to the email address you provided. When you receive this receipt, this confirms the RRB received your application and started the work needed to determine if you are entitled to benefits. **If you do not receive the receipt by email within two days after you filed the application, please contact us so we can determine what is causing the delay and provide you with a response.**

If you have any questions or concerns, please contact an RRB representative at our toll free number, 877-772-5772.

[Start Application](#)[Cancel](#)

# Paperwork Reduction Act and Privacy Act Notices

## PAPERWORK REDUCTION ACT AND PRIVACY ACT NOTICES

The RRB's authority for requesting this information is Section 7(b) of the Railroad Retirement Act (RRA) of 1974. Providing us with this information is voluntary on your part. However, if you fail to provide us with the requested information, we may be unable to pay you any benefits. The RRB needs this information to determine whether or not you are eligible to receive such benefits, and, if so, the amount you are entitled to receive. If your annuity application is approved and we begin to pay you benefits, information that we may request from you in the future will be used to determine whether you are entitled to continue to receive such benefits.

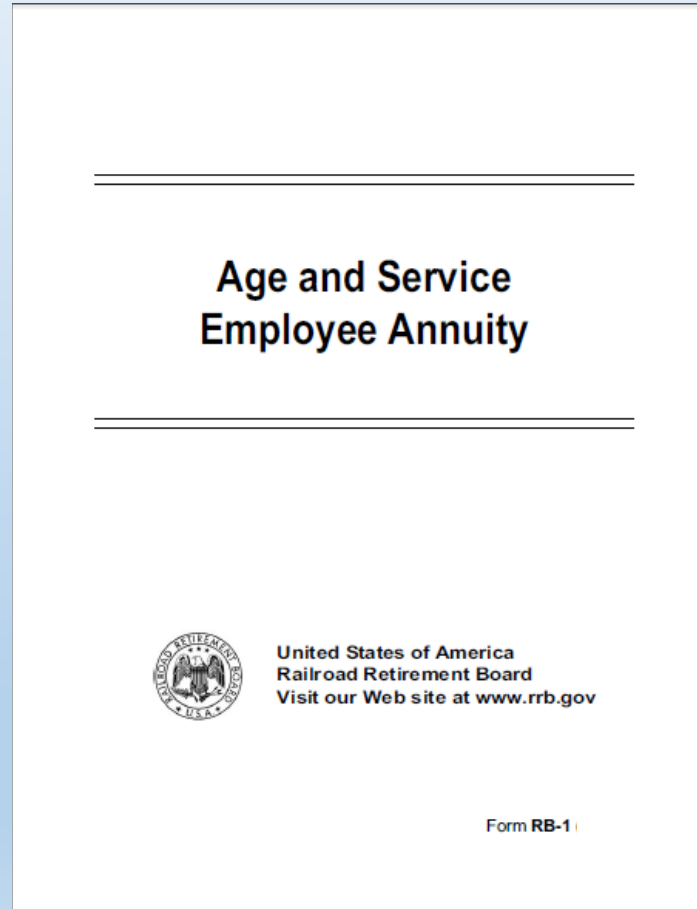
We estimate the application process takes an average of 45 minutes per response to complete, including the time for reviewing the instructions, getting the needed data, and reviewing the completed application. Federal agencies may not conduct or sponsor and respondents are not required to respond to, 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 aspect of this application process including suggestions for reducing the completion time to the Associate Chief Information Officer for Policy and Compliance, Railroad Retirement Board, 844 N. Rush St., Chicago, IL 60611-1275.

### Computer Matching and Privacy Protection Act Notice

The Computer Matching and Privacy Protection Act of 1988 requires the Railroad Retirement Board (RRB) to advise you that information you have provided may be used, without your consent, in automated matching programs. These matching programs are a computer comparison of RRB records with records kept by other Federal, state or local government agencies. Information from these Matching programs can be used to establish or verify a person's eligibility for federally funded or administered benefit programs and for repayment of payments or delinquent debts under these programs.

Close

# Informational Booklet RB-1, “Age and Service Employee Annuity”

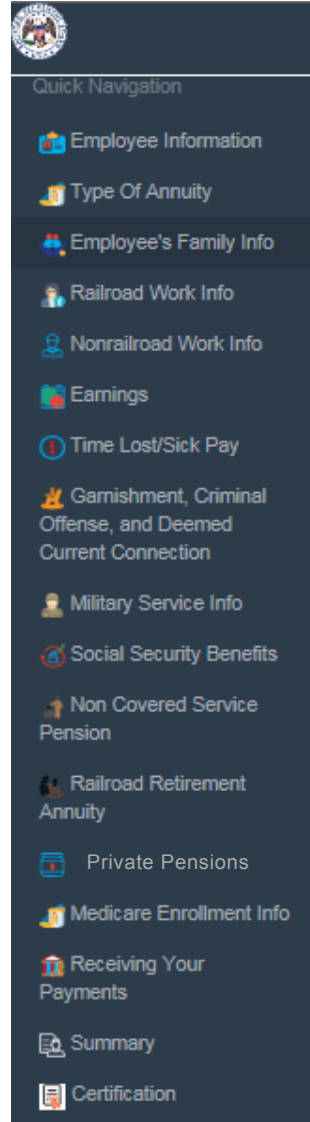


# Checklist

## ***CHECKLIST - Information Needed to Apply for an Annuity***

- Information that Identifies You:
  - Date and Place of Birth
  - Social Security Number (SSN)
  - Email Address
- Marriage:
  - Name, Date of Birth and SSN of Current or Former Spouse(s)
  - Beginning and Ending Date(s) of Marriage(s)
  - Place(s) of Marriage
- Dependents (Minor or Disabled Children):
  - Name
  - Date of Birth
  - SSN
- Railroad Employment History:
  - Railroad Employer Name
  - Beginning and Ending Dates of Employment
  - Railroad Pension Information
- Nonrailroad Employment History:
  - Employer Name and Address
  - Beginning and Ending Dates of Employment
  - Earnings Amount for Last Year, This Year and Next Year
  - Employer Identification Number (EIN). This number can be found on the Form W-2 you received from your employer.
- Self-Employment History:
  - Business Type
  - Total Net Income
- If Choosing Direct Deposit for Receiving Your Payments:
  - Financial Institution Routing Number
  - Your Checking or Savings Account Number

# Quick Access Bar (on all screens)



# Step 1 – Employee Information

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

Employee Information ? Step 1 of 17

Employee's Name *	<input type="text" value="William Sweeney"/>
Employee's Email *	<input type="text" value="Nunc.mauris@dulnec.org"/>
Sex *	<input type="radio"/> Male <input type="radio"/> Female
If your name was different at birth, enter that name	<input type="text"/>
Date of Birth *	<input type="text" value="05/01/1994"/>
Does your name match the name on your Social Security (SSA) card?	<input type="text" value="-- Select --"/>
<b>Mailing Address</b>	
Do you currently live outside of the United States?	<input type="text" value="No"/>
Address 1 *	<input type="text" value="2087 Tempor Road"/>
Address 2	<input type="text"/>
City *	<input type="text" value="Pulle"/>
State *	<input type="text" value="Illinois"/>
ZIP Code *	<input type="text" value="90341"/>
Daytime Telephone Number *	<input type="text" value="(xxx)xxx-xxxx"/>
Alternate Telephone Number	<input type="text" value="(xxx)xxx-xxxx"/>

See Screen 6a for "No" response

See Screen 6a for "Yes" response

See Screen 6b for dropdown choices



# Step 1 – Employee Information Input Values

Does your name match the name on your Social Security (SSA) card?

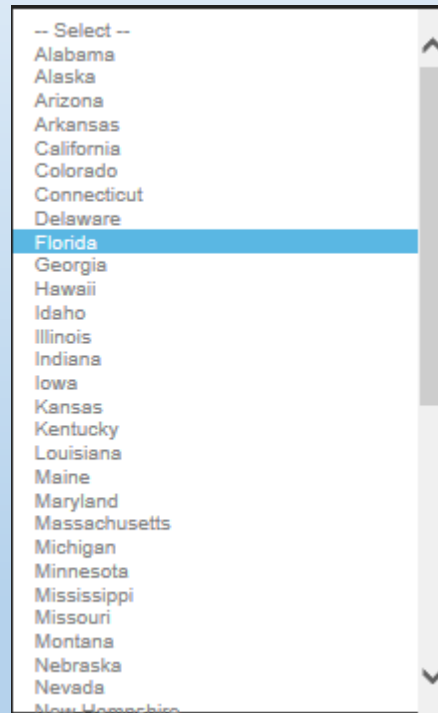
Name on SSA card

Do you currently live outside of the United States?

Address 1*	<input type="text" value="2087 Tempor Road"/>
Address 2	<input type="text"/>
City*	<input type="text" value="Pulle"/>
Province*	<input type="text" value="Quebec"/>
ZIP/Postal Code*	<input type="text" value="H3Z 2Y7"/>
Country*	<input type="text" value="Canada"/>
Daytime Telephone Number*	<input type="text" value="(555) 555-5555"/>
Alternate Telephone Number	<input type="text" value="(xxx)xxx-xxxx"/>

# Step 1 – Employee Information Input Values

- States



# Step 2 – Information About Type of Annuity

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

### Information About Type of Annuity ? Step 2 of 17

Please read Part I of the RB-1 booklet for information about age and service annuities.

What type of annuity are you applying for?\*

Do you want your annuity to begin on the earliest date permitted by law?\*

- Select -

- Select -

See Screen 7a

See Screen 7b

\* Indicates required field.

Previous Next Save

# Step 2 – Type of Annuity Input Values

## Information About Type of Annuity

What type of annuity are you applying for?\*

– Select –  
Full 60/30  
Full Age  
Reduced Age

- “Full 60/30” or “Full Age” selected

Will you accept a reduced age annuity if you are not eligible for a full age annuity?

– Select –  
No  
Yes

# Step 2 – Type of Annuity Input Values

Information About Type of Annuity

Do you want your annuity to begin on the earliest date permitted by law?\*

No

Select the date you want your annuity to begin.

MM/DD/YYYY

Sep		2016				
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

# Step 3 – Employee’s Family Info

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

## Employee's Family Info ?

Step 3 of 17

Select your current marital status.\*

Are you expecting a newborn?

**Do you have children who are unmarried and meet any of the following conditions?**

Under Age 18.\*

Age 18 through 19 and attending elementary or secondary school full-time.\*

Age 18 or older with a continuing disability that began before age 22 and prevents any kind of employment.\*

Click [+ Add](#) to enter spouse and children details.

Name	Relationship to Employee	Action
------	--------------------------	--------

\* Indicates required field.

Previous Next Save

# Step 3 – Employee’s Family Input Values

## Employee's Family Info

Select your current marital status\*

-- Select --
Married
Never Married
Other – Divorced/Widowed

- Current Marital Status = “Married or Other”

I was previously married. (Answer "No" if your only previous marriage was an earlier marriage to your current spouse.)

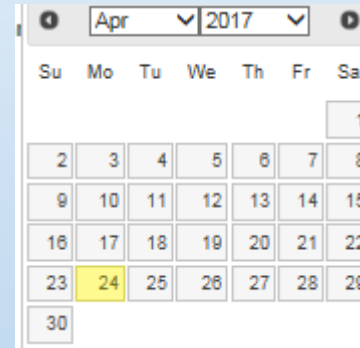
-- Select --
No
Yes

# Step 3 – Employee’s Family Input Values

## Employee's Family Info

Are you expecting a newborn?

Expected Delivery Date



### Do you have children who are unmarried and meet any of the following conditions?

Under Age 18.*	<input type="text" value="Yes"/>	Number of children.*	<input type="text"/>
Age 18 through 19 and attending elementary or secondary school full-time.*	<input type="text" value="Yes"/>	Number of children.*	<input type="text"/>
Age 18 or older with a continuing disability that began before age 22 and prevents any kind of employment.*	<input type="text" value="Yes"/>	Number of children.*	<input type="text"/>



# Step 3 – Add Family Member Input Values

Click **+ Add** to enter spouse and children details.

### Employee's Family Member Details X

Relationship To Employee\*

\* Indicates required field.

– Select –
<b>Spouse</b>
Female Spouse
Male Spouse
Divorced Spouse
Deceased Spouse
<b>Child</b>
Natural Child/Student
Stepchild/Student
Adopted Child/Student
Other Child/Student

See Screens 8d and 8e  
See Screens 8f and 8g  
See Screen 8h  
See Screen 8i. All "Child" screens except Screen 8j are the same.  
See Screen 8j.

**Save** **Cancel**

# Step 3 – Female/Male Spouse

Employee's Family Member Details

Relationship To Employee\*

Spouse Name\*  Spouse Date of Birth\*

Marriage Date\*

Do you know this spouse's SSN?

Did this marriage begin outside the United States? \*

Marriage Began City\*  Marriage Began State\*

Marriage Began County\*

Same as employee's mailing address

Currently reside outside of the United States?

Address 1  Address 2

City  State

ZIP Code  Phone Number

\* Indicates required field.

See Screen 8e

See Screen 8e

# Step 3 – Male/Female Spouse Input Values

## Employee's Family Member Details

Do you know this spouse's SSN?	<input type="text" value="-- Select --"/>		
Do you know this spouse's SSN?	<input type="text" value="Yes"/>	Spouse SSN	<input type="text" value="XXX-XX-XXXX"/>
Do you know this spouse's SSN?	<input type="text" value="No"/>		
Spouse Father's Name	<input type="text"/>	Spouse Mother's Maiden Name	<input type="text"/>
Spouse Place of Birth	<input type="text"/>		

# Step 3 – Male/Female Spouse Input Values

## Employee's Family Member Details

Currently reside outside of the United States?

Address 1*	<input type="text" value="2087 Tempor Road"/>
Address 2	<input type="text"/>
City*	<input type="text" value="Pulle"/>
Province*	<input type="text" value="Quebec"/>
ZIP/Postal Code*	<input type="text" value="H3Z 2Y7"/>
Country*	<input type="text" value="Canada"/>
Daytime Telephone Number*	<input type="text" value="(555) 555-5555"/>
Alternate Telephone Number	<input type="text" value="(xxx)xxx-xxxx"/>

## State

- Select --
- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- Florida**
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire

# Step 3 – Divorced Spouse

Employee's Family Member Details

Relationship To Employee\*

Spouse Name\*  Spouse Date of Birth\*

Marriage Date\*

Do you know this spouse's SSN?  **See Screen 8h**

Spouse Father's Name  Spouse Mother's Maiden Name

Spouse Place of Birth

Did this marriage begin outside the United States? \*

Marriage Began City\*  Marriage Began State\*  **See Screen 8h**

Marriage Began County\*

How Marriage Ended  **See Screen 8h** Marriage End Date

Marriage End City  Marriage End State  **See Screen 8h**

Same as employee's mailing address

Currently reside outside of the United States?  **See Screen 8h**

Address 1  Address 2

City  State

ZIP Code  Phone Number

\* Includes required field.

# Step 3 – Divorced Spouse Input Values

## Employee's Family Member Details

Spouse SSN unknown?   
No  
Yes

Marriage began state   
Alabama  
Alaska  
Arizona  
Arkansas  
California

How marriage ended?   
Annulment  
Divorce

Currently reside outside of the United States?   
No  
Yes

## Marriage Began/Ended State

Alabama  
Alaska  
Arizona  
Arkansas  
California  
Colorado  
Connecticut  
Delaware  
Florida  
Georgia  
Hawaii  
Idaho  
Illinois  
Indiana  
Iowa  
Kansas  
Kentucky  
Louisiana  
Maine  
Maryland  
Massachusetts  
Michigan  
Minnesota  
Mississippi  
Missouri  
Montana  
Nebraska  
Nevada  
New Hampshire



# Step 3 – Deceased Spouse

Employee's Family Member Details X

Relationship To Employee\*

Spouse Name\*

Marriage Date\*

Do you know this spouse's SSN?

Did this marriage begin outside the United States? \*

Marriage Began City\*

Marriage Began County\*

Spouse Date of Birth\*

Marriage Began State\*

\* Indicates required field.

# Step 3 – Child

Employee's Family Member Details X

Relationship To Employee\*

Child's Name\*

Child's Date of Birth\*

Same as employee's mailing address

Currently reside outside of the United States?

Address 1

Address 2

City

State

ZIP Code

Phone Number

\* Indicates required field.



# Step 3 – Child

### Employee's Family Member Details

Relationship To Employee*	Adopted Child/Student	Child's Date of Birth*	MM/DD/YYYY
Child's Name*			
Child SSN	XXX-XX-XXXX		
Date of Adoption*	MM/DD/YYYY		

Same as employee's mailing address

Do you currently reside outside the United States?	-- Select --	Address 2	
Address 1		State	-- Select --
City		Phone Number	(xxx)xxx-xxxx
ZIP Code			

# Step 4 – Information About Your Railroad Work

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

### Information About Your Railroad Work ? Step 4 of 17

Please read Part I of the [RB-1](#) booklet to find out what railroad work is creditable. Creditable railroad work is used to determine your annuity eligibility and is also used in the annuity computation.

Click [+ Add](#) to enter your railroad employment details.

Organization Name	Employment Begin Date	Employment End Date	Action

\* Indicates required field.

Previous Next

Row prefills once entire Screen 9a is completed.

# Step 4 – Railroad Employment Info Input

Click [+ Add](#) to enter your railroad employment details.

### Railroad Employment Info X

Railroad Employer*	<input type="text"/>	BA number of the railroad *	<input type="text"/>
Job Title*	<input type="text"/>		
Payroll Name *	<input type="text"/>	Payroll ID	<input type="text"/>
Department/Division *	<input type="text"/>	Division/Department Location *	<input type="text"/>

Enter the dates you worked for this employer. (If your railroad employment has not ended, enter the last date you will work for this employer in the "Employment End Date")

Employment Begin Date*	<input type="text" value="MM/DD/YYYY"/>	Employment End Date *	<input type="text" value="MM/DD/YYYY"/>
Date you gave up or will give up your seniority rights and all other rights to work for this employer*		<input type="text" value="MM/DD/YYYY"/>	

\* Indicates required field.

[Save](#) [Cancel](#)

# Step 5 – Information About Your Nonrailroad Work

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

### Information About Your Nonrailroad Work ?

Step 5 of 17

Please read Part IV of the RB-1 booklet, which explains how Last Pre-Retirement Nonrailroad Employment, self-employment, and other earnings affect your annuity. Also read Part I of the booklet which explains "Current Connection."

Did you work for pay outside the railroad industry either during the last 6 months you worked in the railroad industry or after you left the railroad industry? (Do not include self-employment if your business is not incorporated. Include any employment for an incorporated business which you own or public service. If you are a Canadian citizen or permanent resident, include employment in Canada for the U.S. railroad employer performed January 1, 1983, or later.) \*

Were you self-employed in a non-incorporated business during your last 6 months in the railroad industry or after you left the railroad industry? \* See Screen 10b

\* Indicates required field.

Previous Next Save

# Step 5 – Nonrailroad Work Input Values

## Information About Your Nonrailroad Work

Did you work for pay outside the railroad industry either during the last 6 months you worked in the railroad industry or after you left the railroad industry? (Do not include self-employment if your business is not incorporated. Include any employment for an incorporated business which you own or public service. If you are a Canadian citizen or permanent resident, include employment in Canada for the U.S. railroad employer performed January 1, 1983, or later.) \*

Yes

**Note:** If you had Last Pre-Retirement Nonrailroad Employment (LPE) after your annuity would begin, complete Form G-19F, Earnings Information Request, only when one of the following applies:

- (1) The annuity beginning date (ABD) is before January 1 of this year or
- (2) the ABD is January 1, or later, of this year, and you ceased working in LPE after the ABD month.

# Step 5 – Nonrailroad Work Input Values

## Information About Your Nonrailroad Work

Were you self-employed in a non-incorporated business during your last 6 months in the railroad industry or after you left the railroad industry?\*

**Note:** Complete and return to the RRB, Form AA-4, Self-Employment and Substantial Service Questionnaire.

See Screen 10c

Are you still self-employed?\*

See Screen 10c

Are you still self-employed?\*

See Screen 10c

Date last self-employed

# Step 5 – Nonrailroad Work Input Value

Click [+ Add](#) to enter your nonrailroad employment details.

Information About Your Nonrailroad Work X

Employment Type \*

*\* Indicates required field.*

[See Screen 10d-f for all types](#)

[Save](#) [Cancel](#)

<p>– Select –</p> <p>Nonrailroad with qualifying federal government agency</p> <p>Nonrailroad without qualifying federal government agency</p> <p>Seasonal</p> <p>Self-employment</p>
---

# Step 5 – Nonrailroad Work Input Values

Information About Your Nonrailroad Work

Employment Type \*

Company Name \*

Address 1  Address 2

City  State

ZIP Code  Foreign Country

Employment Begin Date\*  Employment End Date

---

Are you still working in last pre-retirement nonrailroad employment (LPE)?

LPE Salary (\$)

Pay Period \*

Employer Identification Number

\* Indicates required field.

See Screen 10e

See Screen 10e



# Step 5 – Nonrailroad Work Input Values

## Information About Your Nonrailroad Work

Are you still working in last pre-retirement nonrailroad employment (LPE)?

-- Select --  
No  
Yes

Pay Period

-- Select --  
Weekly  
Bi-Weekly  
Monthly  
Yearly

# Step 5 – Nonrailroad Work – Self-Employment

Information About Your Nonrailroad Work

Employment Type \*

Company Name \*

Address 1  Address 2

City  State

ZIP Code  Foreign Country

\* Indicates required field.

Company's State

- Select --
- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- Florida**
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire

# Step 6 – Information About Your Earnings

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

### Information About Your Earnings ?

Step 6 of 17

Please read Part IV of the RB-1 booklet to find out how earnings can affect an age and service annuity.

**Earnings for 2016**  
Do you expect your annuity to begin before January 1, 2017?\*

-- Select --

**Earnings for 2017**  
Do you expect your total earnings from all employment in 2017 to be more than \$12000.00? (If all your earnings are from only railroad employment before your date last worked, answer "No.") \*

-- Select --

**Earnings for 2018**  
Do you expect your total earnings from all employment in 2018 to be more than \$12000.00? (If all your earnings will be from only railroad employment before your date last worked, answer "No.") \*

\* Indicates required field.

Previous Next Save

# Step 6 – Earnings for 2016 Input Values

## Information About Your Earnings

### Earnings for 2016

Do you expect your annuity to begin before January 1, 2017?\*

Yes

Were your total earnings from all employment in 2016 more than \$12000.00? (If all your earnings were from only railroad employment before your date last worked, answer "No.")

No  
Yes

Prefills exempt amount.

Enter your total earnings for 2016 \*

\$ (Enter total dollar amount)

Did you earn more than the 2016 monthly earnings exempt amount of \$900.00 in all employment in every month of 2016?

Yes

Did you earn more than the 2016 monthly earnings exempt amount of \$900.00 in all employment in every month of 2016?

No

Indicate each month in 2016 that you did not earn more than the monthly earnings exempt amount from all employment.

JAN  FEB  MAR  APR  MAY  JUN  
 JUL  AUG  SEP  OCT  NOV  DEC

# Step 6 – Earnings for 2017 Input Values

## Information About Your Earnings

### Earnings for 2017

Do you expect your total earnings from all employment in 2017 to be more than **\$12000.00**? (If all your earnings are from only railroad employment before your date last worked, answer "No.")\*

Enter the total amount you expect to earn 2017 \*

# Step 6 – Earnings for 2017 Input Values

## Information About Your Earnings

**Earnings for 2017**

Do you expect to earn more than the monthly earnings exempt amount of \$900.00 in employment for hire, or to perform substantial services in self-employment in every month in 2017?

Indicate each month in 2017 that you did not earn, or do not expect to earn, more than the monthly earnings exempt amount.

JAN    FEB    MAR    APR    MAY  
 JUN  
 JUL    AUG    SEP    OCT    NOV  
 DEC

# Step 6 – Earnings for 2018 Input Values

## Information About Your Earnings

### Earnings for 2018

Do you expect your total earnings from all employment in 2018 to be more than **\$12000.00**? (If all your earnings will be from only railroad employment before your date last worked, answer "No.")\*

– Select –  
No  
Yes

### Earnings for 2018

Do you expect your total earnings from all employment in 2018 to be more than **\$12000.00**? (If all your earnings will be from only railroad employment before your date last worked, answer "No.")\*

Yes

Enter the total amount that you expect to earn 2018 \*

\$ (Enter total dollar amount)

Indicate each of the first four months in 2018 that you expect to earn LESS than the 2017 monthly earnings exempt amount of \$900.00.

JAN  FEB  MAR  APR

# Step 7 – Information About Your Pay for Time Lost and Sick Pay

Application For Employee Annuity Form AA-1 (xx-xx) Form Approved OMB No. 3220-0002 [Logout](#)

### Information About Your Pay For Time Lost And Sick Pay ? Step 7 of 17

Please read Part II of the RB-1 booklet to find out when sick pay or pay for time lost are creditable.

**Pay For Time Lost**

Did you receive or do you expect to receive pay for time lost from your last railroad employer?\*  [See Screen 12a](#)

**Note:** If answered "Yes" and you received an injury settlement or elected to receive "dismissal pay", you will need to provide a copy of your settlement or election with your application.

---

**Sick Pay**

Did you receive or do you expect to receive sick pay under a railroad wage continuation plan (other than your own regular salary) that was established through a company policy or labor agreement and this pay was for a period after the actual date you last worked for the railroad? (Answer "No" if you were carried on the payroll and just received your regular salary.)\*  [See Screen 12b](#)

Have you filed or do you expect to file a lawsuit or claim against any person or company for a personal injury where you also received sickness benefits as a result of that injury? \*  [See Screen 12b](#)

\* Indicates required field. [Previous](#) [Next](#) [Save](#)



# Step 7 – Pay For Time Lost Input Values

**Pay For Time Lost**

Did you receive or do you expect to receive pay for time lost from your last railroad employer?\*

**Note:** If answered "Yes" and you received an injury settlement or elected to receive "dismissal pay," you will need to provide a copy of your settlement or election with your application.

Select the dates for which these payments were made or will be made. \*

To\*

Sep 2016						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

Sep 2016						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

# Step 7 Railroad Sick Pay Input Values

Sick Pay

Did you receive or do you expect to receive sick pay under a railroad wage continuation plan (other than your own regular salary) that was established through a company policy or labor agreement and this pay was for a period after the actual day you last worked for the railroad? (Answer "No" if you were carried on the payroll and just received your regular salary.)\*

Yes

Enter the dates for which these payments were made or will be made for up to 6 months after your actual day last worked\*

MM/DD/YYYY To\* MM/DD/YYYY

Enter the name of the sick pay plan, if known

- Lawsuit Input Values

Sick Pay

Have you filed or do you expect to file a lawsuit or claim against any person or company for a personal injury where you also received sickness benefits as a result of that injury? \*

Yes

Name of the person/company

Currently reside outside of the United States?

-- Select --

Address 1 Address 2

City State

-- Select --

ZIP Code

# Step 8 Information About Garnishment, Criminal Offense, and Deemed Current Connection

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

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Information About Garnishment, Criminal Offense, and Deemed Current Connection ? Step 8 of 17

**Garnishment or Property Settlement**

Are you party to a court order to enforce either your child support or alimony obligation, or to pay part of your present or future railroad retirement benefit to a spouse or former spouse as a part of a property settlement in a divorce or legal separation proceeding? (NOTE: Reference to pension rights may be found in the property settlement.) \*

**See Screen 13a**

**Criminal Offense**

Within the past 12 months, have you been imprisoned or given a sentence of confinement due to a conviction for a criminal offense?\*

**See Screen 13b**

**Deemed Current Connection**

Please read Part I of the RB-1 booklet for an explanation of a deemed current connection.

Do you have at least 25 years of railroad service and have indicated on this application nonrailroad employment that could break your current connection?\*

**See Screen 13c**

\* Indicates required field.

Previous Next Save

# Step 8 – Garnishment or Property Settlement Input Values

**Garnishment or Property Settlement**

Are you party to a court order to enforce either your child support or alimony obligation, or to pay part of your present or future railroad retirement benefit to a spouse or former spouse as a part of a property settlement in a divorce or legal separation proceeding? (NOTE: Reference to pension rights may be found in the property settlement.) \*

Which situation applies?  Child Support or Alimony  Property Settlement

Yes

# Step 8 – Criminal Offense Input Values

**Criminal Offense**

Within the past 12 months, have you been imprisoned or given a sentence of confinement due to a conviction for a criminal offense?\*

Yes

Date of the conviction

Date of the sentence of confinement  Date the confinement began

Has the confinement ended?

Has the confinement ended?  Date the confinement ended\*

# Step 8 Deemed Current Connection

## Deemed Current Connection

Please read Part I of the [RB-1](#) booklet for an explanation of a deemed current connection.

Do you have at least 25 years of railroad service and have indicated on this application nonrailroad employment that could break your current connection? \*

Were you separated from your last railroad employer involuntarily and through no fault of your own on or after October 1, 1975? \*

Were you on furlough, leave of absence or absent because of injury status with your last railroad employer on October 1, 1975, and never called back to work? \*

Did you decline an offer to work in the railroad industry in the same "class or craft" as your last railroad job? \*

Were you separated from your last railroad employer involuntarily and through no fault of your own on or after October 1, 1975? \*

Did you decline an offer to work in the railroad industry in the same "class or craft" as your last railroad job? \*

**Note:** If you answered "No" to this question, you must submit the required proofs as soon as possible. This will preserve your rights under the deemed current connection provisions. The required proofs are explained in the [RB-1](#) booklet.

# Step 9 – Information About Your Military Service

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

---

Information About Your Military Service ? Step 9 of 17

Please read Part I of the RB-1 booklet for information about military service. Creditable military service is used to determine, in part, your annuity eligibility. It can also be used in your annuity computation.

Were you in active military service for the United States such as the Army, Navy, Air Force, or Marines?\*

-- Select -- See Screen 14a

\* Indicates required field.

Previous Next Save

# Step 9 – Military Service Input Values

## Information About Your Military Service

Were you in active military service for the United States such as the Army, Navy, Air Force, or Marines?\*

Yes



Note: If answered "Yes," you must submit proof of your military service, such as your discharge certificate or separation papers, as explained in the [RB-1](#) booklet.

Did you have voluntary military service during the period June 15, 1948, through December 15, 1950?

Yes



Did you have nonrailroad earnings after leaving the military service stated above and before returning to the railroad?

-- Select --

No

Yes



# Step 10 – Information About Your Social Security Benefits

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

### Information About Your Social Security Benefits ? Step 10 of 17

Please read Part V of the RB-1 booklet to see how this application can protect your rights to social security benefits, and to see what effect your receipt of social security benefits will have upon your railroad retirement annuity.

Have you filed, or do you plan to file within the next 90 days, an application for social security benefits?\*

Do you want this application to be used to protect the filing date for social security benefits?\*

\* Indicates required field.

Previous Next Save

# Step 10 – Social Security Benefits Input Values

Information About Your Social Security Benefits

Have you filed, or do you plan to file within the next 90 days, an application for social security benefits?\*

Yes

Are you currently receiving social security benefits?\*

No

Do you want this application to be used to protect the filing date for social security benefits?\*

-- Select --  
No  
Yes

Are you currently receiving social security benefits?\*

Yes

Are all or part of your social security benefits described above based on the earnings of someone other than yourself?\*

Yes

Name of the person on whose earnings your social security benefits are based

(Enter Name)

Social security number of the person on whose earnings your social security benefits are based

(xxx-xx-xxxx)

# Step 11 – Information About Your Noncovered Service Pension

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

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Information About Your Noncovered Service Pension (NCSP) ? Step 11 of 17

Please read Part V of the [RB-1](#) booklet for information concerning noncovered service pensions.

Are you receiving or expect to receive a pension or annuity or lump sum in excess of contributions based on any work after 1956 not covered by social security or railroad retirement?\*

-- Select --

\* Indicates required field.

Previous Next Save

# Step 11 – Noncovered Service Pension Input Values

## Employer Information About Your Noncovered Service Pension (NCSP)

Are you receiving or expect to receive a pension or annuity or lump sum in excess of contributions based on any work after 1956 not covered by social security or railroad retirement?\*

Click [+ Add](#) to enter pension details.

Employer Name	Non-profit Organization	Payment Type Code	Employment Begin	Employment End	Action
---------------	-------------------------	-------------------	------------------	----------------	--------

Line prefills once all questions in Step 11 are completed.

# Step 11 – Noncovered Service Pension Input Values

Click **+ Add** to enter pension details.

Employer Information About Your Noncovered Service Pension (NCSP) X

Type of Payment*	<input type="text" value="-- Select --"/> Lump Sum Recurring Recurring and Lump Sum	Non-profit Organization?	<input type="text" value="-- Select --"/>
Employer's Name*		Employment Begin Date	<input type="text" value="MM/DD/YYYY"/>
		Employment End Date	<input type="text" value="MM/DD/YYYY"/>
Filing Status	<input type="text" value="-- Select --"/>		

\* Indicates required field.

See Screens 16c-e  
See Screens 16f-g  
See Screen 16h

# Step 11 – Lump-Sum Input

Employer Information About Your Noncovered Service Pension (NCSP) X

Type of Payment\*

Employer's Name\*  Non-profit Organization?

Employment Begin Date  Employment End Date

Filing Status  See Screen 16d

---

**Lump-sum pension rates**

Lump-sum amount

Lump sum covers period from  Lump sum covers period to

**Lump Sum Payment**

Date the lump sum was paid  Earliest date the lump sum was eligible to be paid

Does the lump-sum payment equal your employee contributions plus interest?

Is the lump-sum paid in a foreign currency? \*  See Screen 16e

# Step 11 – Lump-Sum Payment Input Values

Employer Information About Your Noncovered Service Pension (NCSP)

Type of payment*	<input type="text" value="Lump Sum"/>	Non-profit organization?	<input type="text" value="No"/>
Employer's Name*	<input type="text"/>		
Employment begin date	<input type="text" value="MM/DD/YYYY"/>	Employment end date	<input type="text" value="MM/DD/YYYY"/>
Filing Status	<input type="text" value="-- Select --"/>		

Filing Status	<ul style="list-style-type: none"><li>-- Select --</li><li>Awarded</li><li>Not Awarded</li></ul>
---------------	--

# Step 11 – Lump-Sum Payment Input Values

Employer Information About Your Noncovered Service Pension (NCSP)

Is the lump sum paid  
in a foreign  
currency? \*



# Step 11 – Recurring Payment Input

Employer Information About Your Noncovered Service Pension (NCSP) X

Type of Payment\*

Employer's Name\*  Non-profit Organization?

Employment Begin Date  Employment End Date

Filing Status

---

Recurring Pension

NCBP Claim Number  Date Pension Begins

Pension Period  Earliest Eligible Date

Recurring Pension Rates

Current rate of recurring pension

Effective date of the current rate  Has the rate changed since annuity begin date?

\* Indicates required field.

See Screen 16g1

See Screen 16g2

See Screen 16g3

See Screen 16g4 and 16g5 if "Yes" is selected

# Step 11 – Recurring Payment Input Values

Employer Information About Your Noncovered Service Pension (NSCP)

1 Non-profit Organization?   
No  
Yes

2 Filing Status   
Awarded  
Not Awarded

3 Pension Period   
Yearly  
Monthly  
Biweekly  
Weekly

4 Has the rate changed since annuity begin date?   
No  
Yes

5 Effective date of the current rate	<input type="text" value="MM/DD/YYYY"/>	Has the rate changed since annuity begin date?	<input type="text" value="Yes"/>
Previous rate 1	<input type="text" value="(Enter total dollar amount)"/>	Effective date of the previous rate 1	<input type="text" value="MM/DD/YYYY"/>
Previous rate 2	<input type="text" value="(Enter total dollar amount)"/>	Effective date of the previous rate 2	<input type="text" value="MM/DD/YYYY"/>

# Step 11 – Recurring and Lump-Sum Input

Employer Information About Your Noncovered Service Pension (NCSP)

Type of Payment\*

Employer's Name\*  Non-profit Organization?

Employment Begin Date  Employment End Date

Filing Status

---

**Recurring Pension**

NCSP Claim Number  Date Pension Begins

Pension Period  Earliest Eligible Date

**Recurring Pension Rates**

Current rate of recurring pension

Effective date of the current rate  Has the rate changed since the RR annuity beginning date?

# Step 11 – Recurring and Lump-Sum Input

Employer Information About Your Noncovered Service Pension (NCSP)

**Lump-Sum Pension Rates**

Lump-Sum Amount

Lump sum covers period from  Lump sum covers period to

**Lump-Sum Payment**

Date the lump sum was paid  Earliest date the lump sum was eligible to be paid

Does the lump-sum payment equal your employee contributions plus interest?

Is the lump sum paid in a foreign currency? \*

\* Indicates required field.

# Step 12 – Information About Other Railroad Retirement Annuity

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

## Information About Other Railroad Retirement Annuity

Step 12 of 17

?

Please read Part V of the RB-1 booklet for an explanation of the effect of your employee annuity on any other railroad retirement annuity.

Have you filed within the last 30 days, or do you intend to file within the next 90 days, for an annuity based on another person's railroad earnings record?\*

-- Select --

See Screen 17a

\* Indicates required field.

Previous Next Save

# Step 12 – Other Railroad Retirement Annuity Input Values

## Information About Other Railroad Retirement Annuity

Have you filed within the last 30 days, or do you intend to file within the next 90 days, for an annuity based on another person's railroad earnings record?\*

Other Person's Name

Other Person's Railroad Retirement Claim Number

# Step 13 – Information About Private Pensions

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

## Information About Private Pensions

Step 13 of 17

?

Are you receiving or do you expect to receive a recurring pension or lump-sum pension payment from one or more railroad employers? \*

-- Select --

\* Indicates required field.

Previous Next Save

# Step 13 – Private Pension Input Values

## Information About Private Pensions

Are you receiving or do you expect to receive a recurring pension or lump-sum pension payment from one or more railroad employers? \*

Click [+ Add](#) to enter your private pension details

See Screen 18b



# Step 13 – Private Pension Input Values

Private Pension Info X

Select the correct option that describes the recurring pension or lump-sum pension you are receiving or expect to receive from any railroad employer.\*

Lump sum in lieu of Recurring  
Lump-Sum Small Benefit  
Recurring

See Screen 18c  
See Screen 18d  
See Screen 18e

\* Indicates required field.

# Step 13 – Private Pension Input Values

Private Pension Info X

Select the correct option that describes the recurring pension or lump-sum pension you are receiving or expect to receive from any railroad employer.\*

Name of the railroad employer from which you are receiving or expect to receive a recurring pension or lump sum from.\*

BA Number

Job category which most accurately applies to the job or position which qualified you for this pension.\*

Date your pension began, or will begin, or the date of your lump-sum pension payment.\*

Is this pension based on a collective bargaining (union) agreement? \*

\* Indicates required field.

# Step 13 – Private Pension Input Values

### Private Pension Info X

Select the correct option that describes the recurring pension or lump-sum pension you are receiving or expect to receive from any railroad employer.\*

Name of the railroad employer from which you are receiving or expect to receive a recurring pension or lump sum from.\*

BA Number

Job category which most accurately applies to the job or position which qualified you for this pension.\*

Date your pension began, or will begin, or the date of your lump-sum pension payment.\*

Is this pension based on a collective bargaining (union) agreement? \*

\* Indicates required field.

# Step 13 – Private Pension Input Values

### Private Pension Info X

Select the correct option that describes the recurring pension or lump-sum pension you are receiving or expect to receive from any railroad employer.\*

Name of the railroad employer from which you are receiving or expect to receive a recurring pension or lump sum from.\*

BA Number

Job category which most accurately applies to the job or position which qualified you for this pension.\*

See Screen 18f

Date your pension began, or will begin, or the date of your lump-sum pension payment.\*

Is the recurring pension you are receiving or expect to receive less than \$43 a month?

See Screen 18f

Is this pension based on a collective bargaining (union) agreement?

See Screen 18f

\* Indicates required field.

# Step 13 – Private Pension Input Values

## Private Pension Info

Select the correct option that describes the recurring pension or lump-sum pension you are receiving or expect to receive from any railroad employer.\*

Recurring 

Job category which most accurately applies to the job or position which qualified you for this pension.\*

-- Select --  
Agreement  
Non Agreement  
Salaried  
Other

Is the recurring pension you are receiving or expect to receive less than \$43 a month?

-- Select --  
No  
Yes

Is this pension based on a collective bargaining (union) agreement?

-- Select --  
No  
Yes

# Step 14 – Information About Medicare – Under Age 65

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

Information About Medicare ⓘ

Step 14 of 17

**Based on your date of birth you have not met the 64 years and 5 months of age requirement. You can skip this step and proceed to the next step.**

\* Indicates required field.

Previous Next

# Step 14 – Information About Medicare – Age 65 or Over

Application For Employee Annuity Form AA-1 (xx-xx) Form Approved OMB No. 3220-0002

### Information About Medicare ? Step 14 of 17

Based on your date of birth you meet the 64 years and 5 months of age requirement. Please read Part VI of the [RB-1](#) booklet for an explanation of the Medicare program.

Do you have a Medicare card that shows entitlement to Medicare medical insurance (Part B)? \*

No  
Yes

[See Screen 19b](#)

\* Indicates required field.

[Previous](#) [Next](#) [Save](#)

# Step 14 – Information About Medicare Input Values

## Information About Medicare

Do you have a Medicare card that shows entitlement to Medicare medical insurance (Part B)? \*

Choose your Medicare Claim Number Type

- Railroad Retirement       Social Security

Medicare Claim Number  
(If this is a railroad retirement filing, enter the prefix.  
If this is a social security filing, enter the suffix.)

Prefix	Claim Number	Suffix
--------	--------------	--------



# Step 14 – Information About Medicare Input Values

## Information About Medicare

Do you have a Medicare card that shows entitlement to Medicare medical insurance (Part B)? \*

No

Have you filed for Part B within the last three months?\*

-- Select --

No

Yes

Do you have a Medicare card that shows entitlement to Medicare medical insurance (Part B)? \*

No

Have you filed for Part B within the last three months?\*

No

Do you wish to enroll in Part B?

-- Select --

See Screen 19d for "Yes"

Note: You understand that by selecting "No" you are electing not to enroll in Part B and that the premium rate may be higher if you do enroll later in Part B.

# Step 14 – Information About Medicare Input Values

## Information About Medicare

Do you have a Medicare card that shows entitlement to Medicare medical insurance (Part B)? \*

No

Have you filed for Part B within the last three months?\*

No

Do you wish to enroll in Part B?

Yes

Note: You understand that by selecting "No" you are electing not to enroll in Part B and that the premium rate may be higher if you do enroll later in Part B.

Are you currently covered by an Employer Group Health Plan (EGHP) based on your own or your spouse's current employment?

– Select –  
No  
Yes

Do you wish to enroll in Part B?

Yes

Note: You understand that by selecting "No" you are electing not to enroll in Part B and that the premium rate may be higher if you do enroll later in Part B.

Are you currently covered by an Employer Group Health Plan (EGHP) based on your own or your spouse's current employment?

No

Were you previously covered by an EGHP based on your own or your spouse's current employment?

– Select –  
No  
Yes

See Screen 19e for "Yes"

# Step 14 – Information About Medicare Input Values

Information About Medicare

Are you currently covered by an Employer Group Health Plan (EGHP) based on your own or your spouse's current employment?

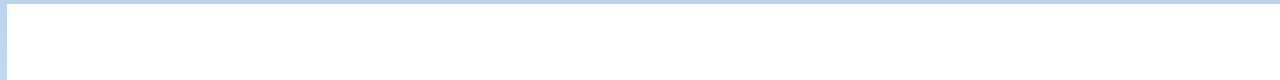
Were you previously covered by an EGHP based on your own or your spouse's current employment?

Beginning Date of EGHP coverage  Ending Date of EGHP coverage

Date Employment Stopped

Do you wish to enroll in a Special Enrollment Period?

See Screen 19f



# Step 14 – Information About Medicare Input Values

## Information About Medicare

Do you wish to enroll in a Special Enrollment Period?

Are you enrolling in Part B while either still covered by an EGHP or during the first full month after your EGHP coverage?

Part B Effective Date

Do you wish to enroll in a Special Enrollment Period?

Are you requesting premium surcharge relief for the months of EGHP coverage?


# Step 15 – Receiving your Payments

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

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Receiving Your Payments  Step 15 of 17

Please read Part VII of the [RB-1 booklet](#) for an explanation of Direct Deposit and the Direct Express® Debit MasterCard®.

Choose how you want to receive your payments.\*

- Direct Deposit **See Screen 20a**
- Direct Express® Debit MasterCard®
- Neither Direct Deposit nor Direct Express® Debit MasterCard®

\* Indicates required field.


Previous Next Save

# Step 15 – Payments Input Values

## Receiving Your Payments

Choose how you want to receive your payments.\*

- Direct Deposit
- Direct Express® Debit MasterCard®
- Neither Direct Deposit nor Direct Express® Debit MasterCard®

Routing Transit Number\* 

Account Number\*

Account Type\*

- Checking
- Savings

Financial Institution Name

# Step 16 – Summary

Application For Employee Annuity Form AA-1 (xx-xx) Form Approved OMB No. 3220-0002 [Logout](#)

### Summary Step 16 of 17

This is a summary of the information you provided. If you wish to edit any of the information previously entered, please click on the edit button located next to the corresponding step below. Also, please remember to submit the required forms listed below.

**Identifying Information** [Edit](#)

Employee's Name	William Sweeney
Employee's Email	Nunc.mauris@duinec.org
Sex	M
Date of Birth	5/1/1994
Does your name match the name on your Social Security (SSA) Card?	Y
<b>Mailing Address</b>	
Do you currently live outside of the United States?	N
Address 1	2087 Tempor Road
Address 2	
City	Pulle
State/Province*	IL

# Step 16 – Summary, continued

## Summary

▶ Information About Type of Annuity	<a href="#">Edit</a>
▶ Information About You and Your Family	<a href="#">Edit</a>
▶ Information About Your Railroad Work	<a href="#">Edit</a>
▶ Information About Your Nonrailroad Work	<a href="#">Edit</a>
▶ Information About Your Earnings	<a href="#">Edit</a>
▶ Information About Your Pay For Time Lost And Sick Pay	<a href="#">Edit</a>
▶ Information About Garnishment, Criminal Offense, and Deemed Current Connection	<a href="#">Edit</a>
▶ Information About Your Military Service	<a href="#">Edit</a>
▶ Information About Your Social Security Benefits	<a href="#">Edit</a>
▶ Information About Your Noncovered Service Pension (NCSP)	<a href="#">Edit</a>
▶ Information About Other Railroad Retirement Annuity	<a href="#">Edit</a>
▶ Information About <b>Private Pensions</b>	<a href="#">Edit</a>
▶ Information About Medicare	<a href="#">Edit</a>
▶ Receiving Your Payments	<a href="#">Edit</a>

### Forms Required For Submission

- Proof of Age
- W-4P
- G-77a
- AA-4
- G-209



# Certification

Application For Employee Annuity  
Form AA-1 (xx-xx)

Form Approved  
OMB No. 3220-0002

Logout

### Certification

Before selecting "Submit," please read the following statement.

See Attachment 22A

I agree with the certification above

Return to Summary Submit

## Attachment 22A

I understand that my application will be signed electronically when I select the "Submit" box. I also understand that my electronic signature means that I intend to file for an annuity and have provided accurate information. The information I provided will be used to process my application.

I certify that the information I have given to the Railroad Retirement Board (RRB) in relation to this application is true to the best of my knowledge. I know that if I make a false or fraudulent statement or withhold information, in order to receive benefits from the RRB, I am committing a crime under Federal law, which may be punishable by fines, imprisonment, or both.

I have reviewed the booklets RB-1, *Age and Service Employee Annuity*, and RB-9, *Employee and Spouse Annuities - Events that Must be Reported*. I understand that I am responsible for reporting events that would affect my annuity as explained in the booklets. Failure to report any of the events listed below or other events that may affect my annuity may result in a penalty deduction from my annuity, as well as criminal and/or civil prosecution.

I agree to immediately notify the RRB, if

- **Railroad Work** – I return to work for a railroad or railroad labor organization or return to work in any capacity in the railroad industry.
- **Railroad Work** – I change the date I will cease working for current railroad employer.
- **Social Security** – I file for social security benefits based on **any** person's earnings record.
- **Social Security** – Benefits I receive directly from the Social Security Administration are adjusted for a reason other than normal cost-of-living increases.
- **Public Pension** – I receive a lump-sum payment or begin to receive a pension based on earnings not covered by the Social Security Administration or the Railroad Retirement Board.
- **Pension** – I receive a lump-sum payment or begin to receive a monthly pension from my railroad employer.
- **Other Benefits** – I begin to receive worker's compensation or a public disability benefit.
- **Settlement** – I receive a settlement with credit for railroad service as "pay-for-time-lost" for months after the last day I worked for a railroad employer.
- **Employment** – There is a change in my status with my last nonrailroad employer.
- **Employment** – I perform work, including self-employment, for a family owned, controlled or managed business, including a business operated, managed or owned by me, a family member, friend or close associate, whether for pay or not, and without regard to how the business is organized (e.g., sole proprietorship, partnership, corporation, LLC, etc.).
- **Employment** – I become a corporate officer of, own or operate a corporation (including a corporation owned by a family member or friend), whether for pay or not.
- **Employment** – I receive anything of value in lieu of salary or wages for any work that I performed.
- **Earnings** – I work for any employer or perform any self-employment work.
- **Earnings** – My earnings for this year change.
- **Address** – My address changes, even if my payments are sent to a financial organization.
- **Bank Account** – My financial organization or the account number at my financial organization changes.
- **Criminal Offense** – I am confined in a jail, prison, penal institution, or correctional facility due to a conviction for a criminal offense.
- **Spouse** – My spouse who is receiving a benefit dies or our marriage ends in divorce or annulment.
- **Child** – A qualifying child marries or leaves my custody or residence.

If you are not FRA, in most cases, we calculate how much to reduce your annuity because of your earnings based on either the earnings estimate you gave us when you applied for benefits, or on reports submitted by employers to the Social Security Administration. As a reminder, you should report your earnings (1) when we ask for a report of your earnings or (2) if any of the following happens:

- You stop working;
- You start working and expect to earn more than the annual exempt amount;
- Your employment is not covered under the Social Security Act (i.e., FICA taxes are not deducted from your pay);
- You work for a railroad or railroad labor organization; or
- You return to work for your last pre-retirement nonrailroad employer.

If you change your address, or if there is some other change that may affect your application, you or your representative should report the change at once. If you have any questions, we will be glad to help you. You can report changes either by telephone, mail, or in person, whichever you prefer. You can contact our local office at 877-772-5772. Most Railroad Retirement Board offices are open to the public from 9:00 AM to 3:30 PM, Monday, Tuesday, Thursday, Friday and 9:00 AM to 12:00 PM Wednesday.

When you select "Submit", you will be sending this completed application electronically to the Railroad Retirement Board. Please make sure that everything is correct. **You will not be able to change the information once the application is submitted.**

# Confirmation and Printing

Confirmation

Are you sure you want to submit this application?

Confirmation

Do you want to print this application?

Confirmation

Your application has been successfully submitted for processing. Within the next two days, you will receive an email receipt indicating the RRB has received your application and has begun processing it.

**Application Submission Confirmation**

Dear Eve Gentry,

Your completed application has been submitted to the Railroad Retirement Board successfully.

If you have any questions or concerns, please contact an RRB representative at our toll free number, 877-772-5772.