

# CURRENT Form BA-4 (Internet)

**ERS**

United States  
Railroad Retirement Board

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Date posted: 10/25/2007

Date updated: 10/25/2007



## BA-4: Report of Creditable Compensation Adjustments

Please fill in the following information and click the submit button to display the BA-4 form and adjust compensation amounts.

Employer BA Number: 9999

\* Year: 2017 ▾

\* Social Security Number:

\* Employee Last Name:

\* Employee First Name:

Employee Middle Initial:

\* Required information





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US Railroad Retirement Board  
Form BA-4 (01-08)Form Approved  
OMB No. 3220-0008

## Form BA-4: Report of Creditable Compensation Adjustments

Year:	<input type="text" value="2017"/>	Employer BA Number:	<input type="text" value="9999"/>
Social Security Number:	<input type="text" value="*****6789"/>	<input type="radio"/> Increase <input type="radio"/> Decrease	
Last Name:	First Name:	Middle Initial:	
<input type="text" value="Jones"/>	<input type="text" value="Tom"/>	<input type="text"/>	

**Service Months**

To adjust service months, click the appropriate checkbox in the "Adjusted" row. Adjustment and new amount values will be calculated automatically.

Current:  Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

Adjusted:  Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

Current Amount	Adjustment Amount	New Amount
Months: <input type="text"/>	<input type="text"/>	<input type="text"/>

**Compensation Amounts**

Enter only adjusted compensation amounts. New amount values will be calculated automatically.

	Maximum for 2017	Current Amount	Adjustment Amount	New Amount
RUIA:	<input type="text" value="18540.00"/>	<input type="text"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
RUIAII:	<input type="text" value="23952.00"/>	<input type="text"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
Tier I:	<input type="text" value="127200.00"/>	<input type="text"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
Tier II:	<input type="text" value="94500.00"/>	<input type="text"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
Misc./Sick Pay:	<input type="text"/>	<input type="text"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**Daily Pay Rate**

Enter the full daily pay rate if Form BA-4 is being submitted in lieu of Form BA-3, for year above.

Is the adjustment amount outside the statute of limitations?  
If no, skip this section. If yes, select the applicable reason.

Public Law Board Award   
  Settlement Allocation   
  Wage Continuation Plan  
 RRB Request   
  Other Pay for Time Lost Allocation

The information contained in this report is required by law under Section 9 of the Railroad Retirement Act (RRA) and Section 6 of the Railroad Unemployment Insurance Act (RUIA). By approving this form, I affirm that to the best of my knowledge, the information I have given is true, complete and correct. I understand that failure to report or the making of a false or fraudulent report can result in criminal prosecution or civil penalties, or both.

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Date updated: 10/25/2007

US Railroad Retirement Board  
Form BA-4 (01-08)

Form Approved  
OMB No. 3220-0008

### Form BA-4: Report of Creditable Compensation Adjustments

Year:	<input type="text" value="2017"/>	Employer BA Number:	<input type="text" value="9999"/>
Social Security Number:	<input type="text" value="***** 6789"/>	<input checked="" type="radio"/> Increase <input type="radio"/> Decrease	
Last Name:	First Name:	Middle Initial:	
<input type="text" value="JONES"/>	<input type="text" value="TOM"/>	<input type="text"/>	

#### Service Months

To adjust service months, click the appropriate checkbox in the "Adjusted" row.  
Adjustment and new amount values will be calculated automatically.

Current:  Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

Adjusted:  Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

	Current Amount	Adjustment Amount	New Amount
Months:	<input type="text" value="12"/>	<input type="text" value="0"/>	<input type="text" value="12"/>

#### Compensation Amounts

Enter only adjusted compensation amounts. New amount values will be calculated automatically.

	Maximum for 2014	Current Amount	Adjustment Amount	New Amount
RUIA:	<input type="text" value="17280.00"/>	<input type="text" value="17280.00"/>	<input type="text" value="0.00"/>	<input type="text" value="17280.00"/>
RUIAII:	<input type="text" value="22320.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
Tier I:	<input type="text" value="117000.00"/>	<input type="text" value="67000.08"/>	<input type="text" value="0.00"/>	<input type="text" value="67001.08"/>
Tier II:	<input type="text" value="87000.00"/>	<input type="text" value="67000.08"/>	<input type="text" value="0.00"/>	<input type="text" value="67001.08"/>
Misc./Sick Pay:		<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

#### Daily Pay Rate

Enter the full daily pay rate if Form BA-4 is being submitted in lieu of Form BA-3, for year above.

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