UNFOLD TO SEE ALL TAX STATEMENT FORMS - SEE REVERSE SIDE FOR GENERAL INFORMATION

PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND ZIP CODE UNITED STATES RAILROAD RETIREMENT BOARD	2005	PAYMENTS BY THE RAILROAD RETIREMEN	NT BOARD
844 N RUSH ST CHICAGO IL 60611-2092 PAYER'S FEDERAL IDENTIFYING NO. 36-3314600	3. Gross Social Security Equivalent Benefit Portion of Tier 1 Paid in 2005		
1. Claim Number and Payee Code	4. Social Security Equivalent Benefit Portion of Tier 1 Repaid to RRB in 2005		
2. Recipient's Identification Number	5. Net Social Security Equivalent Benefit Portion of Tier 1 Paid in 2005		COPY C -
Recipient's Name, Street Address, City, State, and Zip Code	6. Workers' Compensation Offset in 2005		RECIPIENT'S RECORDS.
	7. Social Security Equivalent Benefit Portion of Tier 1 Paid for 2004		THIS
	8. Social Security Equivalent Benefit Portion of Tier 1 Paid for 2003		INFORMATION IS BEING FURNISHED
	9. Social Security Equivalent Benefit Portion of Tier 1 Paid for Years Prior to 2003		TO THE INTERNAL REVENUE
	10. Federal Income Tax Withheld	11. Medicare Premium Total	SERVICE.

FORM RRB-1099

DO NOT ATTACH TO YOUR INCOME TAX RETURN

PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND ZIP UNITED STATES RAILROAD RETIREMENT BO		ANNUITIES OR PENSIONS BY THE RAILROAD RETIREMENT BOARD
844 N RUSH ST CHICAGO IL 60611-2092	3. Employee Contributions	
PAYER'S FEDERAL IDENTIFYING NO. 36-3314600		
1. Claim Number and Payee Code	4. Contributory Amount Paid	COPY C -
2. Recipient's Identification Number	5. Vested Dual Benefit	FOR RECIPIENT'S
Recipient's Name, Street Address, City, State, and Zip Code	6. Supplemental Annuity 7. Total Gross Paid	RECORDS.
	8. Repayments	THIS INFORMATION IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE.
	9. Federal Income Tax Withheld	
	10. Rate of Tax	11. Country 12. Medicare Premium
FORM BBB-1000-B		DO NOT ATTACH TO YOUR INCOME TAX RETU

FORM RRB-1099-R

PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND CODE ANNUITIES OR PENSIONS BY THE 2005 UNITED STATES RAILROAD RETIREMENT BOARD RAILROAD RETIREMENT BOARD 3. Employee Contributions 844 N RUSH ST CHICAGO IL 60611-2092 PAYER'S FEDERAL IDENTIFYING NO. 36-3314600 1. Claim Number and Payee Code 4. Contributor iount F COPY 2 -2. Recipient's Identification Number Vested D Recipient's Name, Street Address, City, State, and Zip Code plemental Annuity 6 FILE THIS COPY WITH YOUR STATE, CITY, OR LOCAL INCOME TAX RETURN, WHEN REQUIRED. 7. Total Gross Paid 8. Repayments 9. Federal Income Tax Withheld 10. Rate of Tax 12. Medicare Premium Total ntry

FORM RRB-1099-R

PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND ZIP UNITED STATES RAILROAD RETIREMENT BO	2005	ANNUITIES OR PENSIONS BY THE RAILROAD RETIREMENT BOARD
844 N RUSH ST CHICAGO IL 60611-2092	3. Employee Contributions	
PAYER'S FEDERAL IDENTIFYING NO. 36-3314600		
1. Claim Number and Payee Code	4. Contributory Amount Paid	СОРҮ В -
2. Recipient's Identification Number	5. Vested Dual Benefit	REPORT THIS INCOME ON YOUR FEDERAL TAX
Recipient's Name, Street Address, City, State, and Zip Code	6. Supplemental Annuity	RETURN. IF THIS FORM SHOWS FEDERAL INCOME
	7. Total Gross Paid	TAX WITHHELD IN BOX 9 ATTACH THIS COPY TO YOUR RETURN.
	8. Repayments	THIS INFORMATION IS BEING
	9. Federal Income Tax Withheld	FURNISHED TO THE INTERNAL REVENUE SERVICE.
	10. Rate of Tax	11. Country 12. Medicare Premium Total

FORM RRB-1099-R