UNFOLD TO SEE ALL TAX STATEMENT FORMS - SEE REVERSE SIDE FOR GENERAL INFORMATION PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND ZIP CODE STATEMENT FOR NONRESIDENT PAYER STATEMENT FOR NONRESIDENT PAYMENTS BY 2008 THE RAILROAD UNITED STATES RAILROAD RETIREMENT BOARD ALIEN RECIPIENTS OF: RETIREMENT 844 N RUSH ST CHICAGO IL 60611-2092 PAYER'S FEDERAL DENTIFYING NO. 36-3314600 1. Claim Number and Payee Code Gross Social Security Equivalent Benefit Portion of Tier 1 Paid BOARD Social Security Equivalent Benefit Portion of Tier 1 Repaid to RRB in 2008 COPY C - Net Social Security Equivalent Benefit Portion of Tier 1 Paid in 2008 2. Recipient's Identification Number FOR RECIPIENT'S RECORDS. Workers' Compensation Offset in 2008 Recipient's Name, Street Address, City, State, and Zip Code THIS INFORMATION IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. 7. Social Security Equivalent Benefit Portion of Tier 1 Paid for 2007 Social Security Equivalent Benefit Portion of Tier 1 Paid for 2006 Social Security Equivalent Benefit Portion of Tier 1 Paid for Years Prior to 2006 10. Country 11. Rate of Tax 12. Federal Tax Withheld

FORM RRB-1042S

DO NOT ATTACH TO YOUR INCOME TAX RETURN

PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND 2 UNITED STATES RAILROAD RETIREMENT	ANNUITIES OR PENSIONS BY THE RAILROAD RETIREMENT BOARD	
844 N RUSH ST CHICAGO IL 60611-2092	3. Employee Contributions	
PAYER'S FEDERAL IDENTIFYING NO. 96-3314600		
1, Claim Number and Payee Code	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 (Sum of boxes 4, 5 and 6)	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 Total

FORM RRB-1099-R

DO NOT ATTACH TO YOUR INCOME TAX RETURN

PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND ZIP COD UNITED STATES RAILROAD RETIREMENT BOAR		2008	711/2007/11/11/2007	ENT FOR NONRESIDENT CIPIENTS OF:	PAYMENTS BY THE RAILROAD RETIREMENT
844 N RUSH ST CHICAGO IL 60611-2092	Gross Social Security Equivalent Benefit Portion of Tier 1 Paid in 2008		BOARD		
PAYER'S FEDERAL IDENTIFYING NO. 36-3314600	Portion of Her 1 Paid in 2008				
1. Claim Number and Payee Code	Social Security Equivalent Benefit Portion of Tier 1 Repaid to RRB in 2008			COPY B -	
2. Recipient's Identification Number	Net Social Security Equivalent Benefit Portion of Tier 1 Paid in 2008			FILE WITH RECIPIENT'S	
Recipient's Name, Street Address, City, State, and Zip Code	6. Worker	s' Compensation	Offset in 2008		FEDERAL TAX RETURN.
	Social Security Equivalent Benefit Portion of Tier 1 Paid for 2007				THIS INFORMATION IS BEING
	Social Security Equivalent Benefit Portion of Tier 1 Paid for 2006		FURNISHED TO THE INTERNAL REVENUE SERVICE.		
	9. Social Security Equivalent Benefit Portion of Tier 1 Paid for Years Prior to 2006				
	10. Country		11. Rate of Tax	12. Federal Tax Withheld	13. Medicare Premium Tota

FORM RRB-1042S

PAYER'S NAME, STREET ADDRESS, CITY, STATE, AND ZIP UNITED STATES RAILROAD RETIREMENT BO	2008	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			
Claim Number and Payee Code	Contributory Amount Paid	COPY B -	
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 (Sum of boxes 4, 5 and 6)	TAX WITHHELD IN BOX 9 ATTACH THIS COPY TO YOUR RETURN.	
	8. Repayments		
	Federal Income Tax Withheld	THIS INFORMATION IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE	
	10. Rate of Tax	11. Country 12. Medicare Premium To	