

District of Columbia Retirement Board (DCRB) **Benefits Department**

900 7th Street, NW, 2nd Floor • Washington, DC 20001 Telephone: (202) 343-3272 • Toll Free: (866) 456-3272 • Fax: (202) 566-5001 www.dcrb.dc.gov

Annual Earned Income Report

The District of Columbia Police Officers and Firefighters' Retirement Plan requires that disability retirement annuitants under the age of fifty (50) submit a notarized statement reporting earned income for the prior calendar year (DC Code §5-714). If the space below is not sufficient to report all of your earned income sources, please submit additional pages. The deadline for submission of this report and all requested documents is June 30, 2023. If you do not file your report by this date, the District of Columbia Retirement Board ("DCRB") will stop your benefit payment.

Member Inform	nation			
First Name	Middle Initial	Last Name	Date of Birth	Social Security Number
Street Address	City	State	Zip Code	Telephone Number and Email
	ings (Check One) ble income for 2022 calen	dar year		
\$	(Line 9 T Or	otal Income—IRS Forr	n 1040—Single Reportir	ng)
\$	(Report j	ust <u>your</u> income if filir	ng Married Filing Jointly)	ı
☐ I do not have a	any reportable income for :	2022 calendar year		
not re applie other Certification I certify that the materially false in	nformation, I will forfeit a	ch Verification of Non- nse attach a copy of IR this form is true and Il rights to my disabil	filing from the IRS) S Form 4868) I correct. I further und retirement annuity.	derstand that if I have provided any I understand that making knowingly enalties under Federal and District of
Member's Signature (Must sign in the pres	e eence of a Notary Public)	Memb	er's Printed Name	Date
		*****	*****	
Notary Public \	/erification			
DCRBFormAEII	R-300			Revised 3/2023

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