



District of Columbia Retirement Board (DCRB) Benefits Department

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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). The deadline for submission of this report and all requested documents is May 31, 2024. If you do not file your report by this date, the District of Columbia Retirement Board ("DCRB") will suspend your benefit payment.

Member Information

First Name Middle Initial Last Name Date of Birth Social Security Number

Street Address City State Zip Code Telephone Number and Email

Report of Earnings (Check One)

I have reportable income for the 2023 calendar year

\$ _____ (Line 9 Total Income)
IRS Form 1040—Single, Married filing separately or Qualifying widow(er)

Or

\$ _____ (Report just your income only if you are filing Married filing jointly or Head of household)

I do not have any reportable income for the 2023 calendar year

If you did not file a Federal income tax return for the 2023 calendar year, please check one of the following:

- Not required to file (Please attach Verification of Non-filing from the IRS)
- Applied for filing extension (Please attach a copy of IRS Form 4868)
- Other (Explain): _____

Certification

I certify that the information provided on this form is true and correct. I further understand that if I have provided any materially false information, I will forfeit all rights to my disability retirement annuity. I understand that making knowingly false or frivolous statements or representations may subject me to civil and criminal penalties under Federal and District of Columbia laws.

Member's Signature Member's Printed Name Date
(Must sign in the presence of a Notary Public)

Notary Public Verification

STATE OF _____ COUNTY OF _____
Before me, a Notary Public, on this day personally appeared _____ known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that s/he executed the same for purposes and consideration therein expressed.
Given under my hand and seal of office this _____ day of _____, 20____ (SEAL)

Signature of Notary Commission Expires