

DECLARATION OF PUERTO RICO COVERED EARNINGS FORM

This form must be submitted to the AFTRA Retirement Fund if you, the performer, reside in Puerto Rico or have covered earnings from working in Puerto Rico. Puerto Rico requires that contributions, submitted on behalf of participants residing in or working in Puerto Rico, be made to a plan qualified under the Puerto Rico tax code. These earnings should be identified to the AFTRA Retirement Fund.

The following participants must identify their Puerto Rico covered earnings:

- 1) participants of the AFTRA Retirement Fund who are Puerto Rico residents and have covered earnings (regardless of whether some work was performed in the U.S.); **or**
- 2) participants of the AFTRA Retirement Fund who are U.S. residents and who perform work in Puerto Rico (unless, during a tax year, they had less than \$3,000 in covered earnings, worked in Puerto Rico for 90 days or less, and were not employed by or under contract with an individual, partnership, or corporation that is engaged in a trade or business in Puerto Rico).

To expedite this identification process, please provide all items of information indicated in the space provided below on this form. If you need more space than allowed for any item, please attach additional sheets of paper and return your completed form to the AFTRA Retirement Fund using any of the following options:

By Portal	By Mail, Email or Fax
<ol style="list-style-type: none"> 1. Scan or save a copy of the completed form to your device. (Acceptable formats: .jpeg, .pdf, .png, .tiff). 2. Select “choose file(s)” and upload the completed form. 3. Confirm that the attachment is shown in your inquiry. 4. Submit your inquiry. <p>You will receive a confirmation email that your inquiry was submitted successfully.</p>	<p>Mail: AFTRA Retirement Fund Attn: Operations Department 1411 Broadway • Suite 1850 New York, NY 10018-3496</p> <p>Email: earnings@aftraretirement.org</p> <p>Fax: (212) 499-4973</p>

To update or confirm your current Puerto Rico home address, please fill out the ***"Puerto Rico Address Update"*** section of this form.

- Legal Name _____
- Social Security Number **or** Earnings Statement Ref. No. _____

PERFORMANCE DATE	EMPLOYER	COVERED EARNINGS

PUERTO RICO ADDRESS UPDATE

If you are a participant in the AFTRA Retirement Plan, and reside in Puerto Rico, you must confirm that the AFTRA Retirement Fund has a record of your current Puerto Rico home address to ensure compliance with the Puerto Rico tax code.

The AFTRA Retirement Fund intends to be a dual-qualified plan under both the U.S. and Puerto Rico tax codes. This means that in addition to the U.S. tax code, the AFTRA Retirement Fund must comply with the Puerto Rico tax code’s requirements concerning employer contributions made on your behalf. The AFTRA Retirement Fund must also comply with the Puerto Rico tax code’s requirements concerning withholding of Puerto Rico income tax and related reporting requirements when making pension payments.

To ensure that the AFTRA Retirement Fund is in full compliance with the U.S. and Puerto Rico tax codes, please make sure to update or confirm your current Puerto Rico home address by completing the information below:

Name _____

Social Security Number *or* Earnings Statement Ref. No. _____

c/o (if applicable) _____

Address Line 1 _____

Address Line 2 _____

City _____ State/Province _____ ZIP Code _____

Please sign, date and return your completed form to the Fund using any of the following instructions below. If you need a blank or clean copy of this form, a .PDF is available for download at www.aftraretirement.org (“Forms” | “General forms”).

By Portal	By Mail, Email, or Fax
<ol style="list-style-type: none"> 1. Scan or save a copy of the completed form to your device. (Acceptable formats: .jpeg, .pdf, .png, .tiff). 2. Select “choose file(s)” and upload the completed form. 3. Confirm that the attachment is shown in your inquiry. 4. Submit your inquiry. <p>You will receive a confirmation email that your inquiry was submitted successfully.</p>	<p>Mail: AFTRA Retirement Fund Attn: Operations Department 1411 Broadway • Suite 1850 New York, NY 10018-3496</p> <p>Email: memberupdate@aftraretirement.org</p> <p>Fax: (212) 499-4973</p>

It is very important that Puerto Rico residents provide their Puerto Rico home address and not merely the address of an agent or another location outside of Puerto Rico. If you are unsure of the address you have on file with the AFTRA Retirement Fund, you may call us at **(800) 562-4690** to confirm before submitting this form.

Signature

Date