

6. If there were surplus railroad retirement benefits at the end of the reporting period, show how the balance was held.

Cash \$ _____ Checking Account \$ _____ Savings Account \$ _____

Other: _____ (Description) \$ _____ (Amount) ; _____ (Description) \$ _____ (Amount)

NOTE: If surplus benefits were held in checking or savings accounts, indicate the title or ownership registration of the account below.

- Beneficiary's name by your name
Your name for beneficiary's name
Other (describe)

7. Have you used any of the railroad retirement benefits received by the annuitant during the reporting period for your own expenses or requirements?

YES-Provide the following information:

Amount used \$ _____ Explanation of use: _____

NO-Go to Item 8.

8. During the reporting period, did the annuitant have income from any of the following sources?

YES-Enter an 'X' in the appropriate box(es) and provide the requested information.

Social Security \$ _____ Amount _____ Claim Number _____

Public Service Pension \$ _____ Amount _____ Claim Number _____

Work \$ _____ Amount _____ Workers' Compensation \$ _____ Amount _____ Claim Number _____

NO-Go to Item 9

9. Have you ever been convicted of a criminal or misdemeanor offense under the statutes administered by the Railroad Retirement Board or Social Security Administration, or are charges for such an offense currently pending in a court of law?

- YES-Complete items 9(a) through 9(f) below.
NO-Read the Certification Statement below, and sign the form in the space provided.

Form with sections a-f: a. What was/were the offense(s) for which you were convicted? b. On what date(s) were you convicted? c. What was/were your sentence(s)? d. If imprisoned, when were you released? e. If probation was ordered, when did or will the probation end? f. If charges are currently pending, please give the location of the court in which charges are pending, and the court docket number, if known.

CERTIFICATION STATEMENT: I understand that civil and criminal penalties may be imposed on me for false or fraudulent statements, or for withholding information to cause payment of benefits by the RRB. I affirm that to the best of my knowledge, the information I have given is true, complete and correct.

Sign here SIGNATURE _____ DATE _____ DAYTIME PHONE () _____

Paperwork Reduction Act/Privacy Act Notices

This notice is given under the Paperwork Reduction Act of 1995 and the Privacy Act of 1974. The information requested on this form is used by the Railroad Retirement Board (RRB) to conduct an accounting of your performance as representative payee for the reporting period shown on the form. The RRB's authority for requesting this information is section 7(b)(6) of the Railroad Retirement Act.

Your obligation to provide the requested information is voluntary. **However, your failure to respond can result in your being asked to complete a more detailed report and it may result in a suspension of benefit payments or your removal as representative payee.**

The information you provide on this form may be disclosed without your approval to the individual or institution you identified in question number one. Such information may also be disclosed without your approval to the Government Accountability Office for audits, to the Justice Department for collecting overpayments owed to the RRB or the Social Security Administration, to law enforcement agencies and in court proceedings. A complete listing of the persons, organizations and agencies to which the information you give us may be released is available at any office of the RRB.

We estimate this form takes an average of 18 minutes per response to complete, including the time needed for reviewing the instructions, getting the needed data, and reviewing the completed form. Federal agencies may not conduct or sponsor, and respondents are not required to respond to, a collection of information unless it displays a valid OMB number. If you wish, send comments regarding the accuracy of our estimate or any other aspect of this form, including suggestions for reducing completion time, to the Chief of Information Resources Management, Railroad Retirement Board, 844 North Rush Street, Chicago, Illinois 60611-2092.

Representative Payee Duties

Use of benefits

You must use the railroad retirement benefits you receive for the annuitant in his or her best interest. To do this you must keep yourself informed of what the annuitant needs.

Record-keeping requirements

As part of your responsibilities as a representative payee, you must keep careful and accurate records regarding your receipt, disbursement and use of the annuitant's funds. Periodically, you will be asked to complete a report which will include the following questions:

- What was the amount of benefits on hand at the beginning of the year?
- How were the railroad retirement benefits available during the year used for support of the annuitant?
- How much of the railroad retirement benefits did you save for the annuitant?
- How did you invest the savings?
- Where did the annuitant live during the year?
- What was the annuitant's amount of income from other sources during the year?

Reporting to the RRB

The following changes must be reported by the representative payee to the RRB:

- You are discharged as legal guardian.
- A legal guardian is appointed or guardianship changes.
- You are no longer responsible for the annuitant's care.
- Your address changes.
- You are convicted of a criminal offense.
- The annuitant dies.
- The annuitant is restored to competency by a court.
- The annuitant marries, remarries, or divorces.
- The annuitant leaves your custody and care.
- The annuitant's address changes.
- The annuitant is outside the United States for more than 30 consecutive days.
- The annuitant performs any work, including self-employment.
- The annuitant is convicted of a criminal offense.
- The annuitant begins to receive a public service pension, or there is a change in the amount of the pension.
- An application for social security benefits is filed by the annuitant.
- A student annuitant graduates from high school or ceases full-time school attendance.