		RRB Claim No.	SSN
		Annuitant's Name	
		Reporting Period	
IMPORTANT: Please complete and also read and retain the Statement of			
3 and 4.			
. Does the annuitant live with you?	YES NO		
If NO, enter the name, address and phon during the reporting period.	e number of the persons or	institutions with whom	the annuitant lived
		()	
NAME	ADDRESS	DAYI	TIME PHONE
		()	
NAME	ADDRESS	DAYI	TIME PHONE
Are you the court appointed guardian or f or fiduciary guardian is a person appointe individual.)			
YES-Attach a copy of the most r (Do not submit the document app			ed to the court.
☐ NO−Go to Item 3.			
B. Enter the total amount of railroad retire	ment benefits received by t	he	
annuitant during the reporting period.		\$	
. Enter the dollar amount of railroad ret annuitant's expenses during the reportin		he \$	
. Enter a breakdown of the total expenses Items 5(a) through 5(d).	entered in item 4 by the ca	tegories listed in	
a. Room/Board	b. Clothing/Per	sonal Spending	
c. Medical/Dental Care		d. Other	
orm G-99a (12-16)	DIEASE	ETURN THIS FORM IN THE	F FNCIOSED ENVEL

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

Cash \$	Checking Account \$	Savings Account \$	
Other:	tion) \$(Amount)	_;\$	mount)
			,
	of the account below.	vings accounts, indicate the title or owner	snip
"Beneficiary's r	name by your name"	"Your name for beneficiary's name))
Other (describe			
,	f the railroad retirement benefits expenses or requirements?	received by the annuitant during the repo	orting
☐ YES–Provide th	ne following information:		
Amount used \$		Explanation of use:	
□ NO–Go to Item	8.		
8. During the reporting	period, did the annuitant have in	ncome from any of the following sources?	
YES-Enter an '	'X" in the appropriate box(es) and	l provide the requested information.	
□ Social Se	ecurity \$		
		Claim Number	
Public Se	ervice Pension \$	Claim Number	
	Workers		
\Box Work	Amount	Amount	Claim Number
□ NO–Go to Item			
	Board or Social Security Adminis	eanor offense under the statutes administ stration, or are charges for such an offense	
☐ YES−Complete	items 9(a) through 9(f) below.	□ NO–Read the Certification Statements sign the form in the space provided.	nt below, and
a. What was/were the off	fense(s) for which you were convicted	?	
b. On what date(s) were	you convicted?		
c. What was/were your s	entence(s)?		
d. If imprisoned, when w	/ere you released?		
e. If probation was order	red, when did or will the probation en	d?	
f. If charges are currently number, if known.	y pending, please give the location of	the court in which charges are pending, and t	he court docket
Location:		Docket Number:	
	on to cause payment of benefits by the RR	nal penalties may be imposed on me for false or fraue B. I affirm that to the best of my knowledge, the info	
Sign Signature		DATE	
here DAYTIME PHONE	e ()		

Paperwork Reduction Act and 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 Associate Chief Information Officer for Policy and Compliance, Railroad Retirement Board, 844 North Rush Street, Chicago, Illinois 60611-1275.

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.