

addition, at least once a year, issuers, underwriters, or dealers, relying on rule 154 for the householding of prospectuses relating to open-end management investment companies that are registered under the Investment Company Act of 1940 (“mutual funds”) and each series thereof must explain to investors who have provided written or implied consent how they can revoke their consent.<sup>3</sup> Preparing and sending the notice and the annual explanation of the right to revoke are collections of information.

The rule allows issuers, underwriters, or dealers to household prospectuses if certain conditions are met. Among the conditions with which a person relying on the rule must comply are providing notice to each investor that only one prospectus will be sent to the household and, in the case of issuers that are mutual funds and any series thereof, providing to each investor who consents to householding an annual explanation of the right to revoke consent to the delivery of a single prospectus to multiple investors sharing an address. The purpose of the notice and annual explanation requirements of the rule is to ensure that investors who wish to receive individual copies of prospectuses are able to do so.

Although rule 154 is not limited to mutual funds, the Commission believes that it is used mainly by mutual funds and by broker-dealers that deliver mutual fund prospectuses. The Commission is unable to estimate the number of issuers other than mutual funds that rely on the rule.

The Commission estimates that, as of June 30, 2021, there are approximately 13,182 mutual fund series registered on Form N-1A, approximately 1,279 of which are directly sold and therefore deliver their own prospectuses. Of these, the Commission estimates that approximately half (640 mutual fund series): (i) Do not send the implied consent notice requirement because they obtain affirmative written consent to household prospectuses in the fund’s account opening documentation; or (ii) do not take advantage of the householding provision because of electronic delivery options which lessen the economic and operational benefits of rule 154 when compared with the costs of compliance. Therefore, the Commission estimates that each of the 640 directly sold mutual fund series will spend an average of 20 hours per year complying with the notice requirement of the rule, for a total of 12,800 burden hours. In addition, of the approximately 1,279 mutual fund series

that are directly sold, the Commission estimates that approximately 75% (or 960) will each spend 1 hour complying with the annual explanation of the right to revoke requirement of the rule, for a total of 960 hours.

The Commission estimates that as of December 31, 2020, there were approximately 462 broker-dealers that have customer accounts with mutual funds, and therefore may be required to deliver mutual fund prospectuses. The Commission estimates that each affected broker-dealer will spend, on average, 20 hours complying with the notice requirement of the rule, for a total of 9,240 hours. In addition, each broker-dealer will also spend one hour complying with the annual explanation of the right to revoke requirement, for a total of 462 hours. Therefore, the total number of respondents for rule 154 is 1,422 (960<sup>4</sup> mutual fund series plus 462 broker-dealers), and the estimated total hour burden is approximately 23,462 hours (13,760 hours for mutual fund series, plus 9,702 hours for broker-dealers).

The estimate of average burden hours is made solely for the purposes of the Paperwork Reduction Act, and is not derived from a comprehensive or even a representative survey or study of the costs of Commission rules and forms.

Compliance with the collection of information requirements of the rule is necessary to obtain the benefit of relying on the rule. Responses to the collections of information will not be kept confidential. The rule does not require these records be retained for any specific period of time. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid control number.

The public may view the background documentation for this information collection at the following website, [www.reginfo.gov](http://www.reginfo.gov). Comments should be directed to: (i) Desk Officer for the Securities and Exchange Commission, Office of Information and Regulatory Affairs, Office of Management and Budget, Room 10102, New Executive Office Building, Washington, DC 20503, or by sending an email to: [Lindsay.M.Abate@omb.eop.gov](mailto:Lindsay.M.Abate@omb.eop.gov); and (ii) David Bottom, Director/Chief Information Officer, Securities and Exchange Commission, c/o John R. Pezzullo, 100 F Street NE, Washington, DC 20549 or send an email to: [PRA\\_Mailbox@sec.gov](mailto:PRA_Mailbox@sec.gov). Written comments

<sup>4</sup> The Commission estimates that 640 mutual funds prepare both the implied consent notice and the annual explanation of the right to revoke consent + 320 mutual funds that prepare only the annual explanation of the right to revoke.

and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function.

Dated: December 28, 2021.

**J. Matthew DeLesDernier**,  
Assistant Secretary.

[FR Doc. 2021-28424 Filed 12-30-21; 8:45 am]

BILLING CODE 8011-01-P

## SOCIAL SECURITY ADMINISTRATION

[Docket No: SSA-2021-0054]

### Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection packages requiring clearance by the Office of Management and Budget (OMB) in compliance with Public Law 104-13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice includes revisions of OMB-approved information collections.

SSA is soliciting comments on the accuracy of the agency’s burden estimate; the need for the information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to minimize burden on respondents, including the use of automated collection techniques or other forms of information technology. Mail, email, or fax your comments and recommendations on the information collection(s) to the OMB Desk Officer and SSA Reports Clearance Officer at the following addresses or fax numbers.

(OMB) Office of Management and Budget, Attn: Desk Officer for SSA

Comments: <https://www.reginfo.gov/public/do/PRAMain>. Submit your comments online referencing Docket ID Number [SSA-2021-0054].

(SSA) Social Security Administration, OLCA, Attn: Reports Clearance Director, 3100 West High Rise, 6401 Security Blvd., Baltimore, MD 21235, Fax: 410-966-2830, Email address: [OR.Reports.Clearance@ssa.gov](mailto:OR.Reports.Clearance@ssa.gov).

Or you may submit your comments online through <https://www.reginfo.gov/public/do/PRAMain>, referencing Docket ID Number [SSA-2021-0054].

#### I.

The information collection below is pending at SSA. SSA will submit it to

<sup>3</sup> See Rule 154(c).

OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than March 4, 2022. Individuals can obtain copies of the collection instrument by writing to the above email address.

**Farm Self-Employment Questionnaire—20 CFR 404.1082(c) & 404.1095—0960-0061.** SSA collects the information on Form SSA-7156 on a voluntary and as-needed basis to determine the existence of an agriculture trade or business which may

affect the monthly benefit, or insured status, of the applicant. SSA requires the existence of a trade or business before determining if an individual or partnership has net earnings from self-employment. When an applicant indicates self-employment as a farmer, SSA uses the SSA-7165 to obtain the information we need to determine the existence of an agricultural trade or business, and subsequent covered earnings for Social Security entitlement purposes. As part of the application process, we conduct a personal

interview, either face-to-face or via telephone, and document the interview using Form SSA-7165. We also allow applicants to complete a fillable version of the form available on our website, which they can complete, print, and sign. The respondents are applicants for Social Security benefits whose entitlement depends on whether the worker received covered earnings from self-employment as a farmer.

*Type of Request:* Revision of an OMB-approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time in field office or for teleservice centers (minutes)**	Total annual opportunity cost (dollars)***
SSA-7156 .....	1,000	1	10	167	*\$14.49	** 21	***\$7,491

\* We based this figure on average Farmworkers and Laborers, Crop, Nursery, and Greenhouse salaries as reported by Bureau of Labor Statistics data (<https://www.bls.gov/oes/current/oes452092.htm>).

\*\* We based this figure on averaging both the average FY 2021 wait times for field offices and teleservice centers, based on SSA's current management information data.

\*\*\* This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

**II.**

SSA submitted the information collections below to OMB for clearance. Your comments regarding these information collections would be most useful if OMB and SSA receive them 30 days from the date of this publication. To be sure we consider your comments, we must receive them no later than February 2, 2022. Individuals can obtain copies of these OMB clearance packages by writing to *OR.Reports.Clearance@ssa.gov*.

**1. Application for a Social Security Number Card, the Social Security Number Application Process (SSNAP), and internet SSN Replacement Card (iSSNRC) Application—20 CFR 422.103—422.110—0960-0066.** SSA collects information on the SS-5 (used in the United States) and SS-5-FS (used outside the United States) to issue original or replacement Social Security cards. SSA also enters the application data into the SSNAP application when issuing a card via telephone or in

person. In addition, hospitals collect the same information on SSA's behalf for newborn children through the Enumeration-at-Birth process. In this process, parents of newborns provide hospital birth registration clerks with information required to register these newborns. Hospitals send this information to State Bureaus of Vital Statistics (BVS), and they send the information to SSA's National Computer Center. SSA then uploads the data to the SSA mainframe along with all other enumeration data, and we assign the newborn a Social Security number (SSN) and issue a Social Security card. Respondents can also use these modalities to request a change in their SSN records. In addition, the iSSNRC internet application collects information similar to the paper SS-5 for no-change replacement SSN cards for adult U.S. citizens. The iSSNRC modality allows certain applicants for SSN replacement cards to complete the internet application and submit the required

evidence online rather than completing a paper Form SS-5. Finally, oSSNAP collects information similar to that which we collect on the paper SS-5 for no change situations, with the exception of name change, new or replacement SSN cards for U.S. Citizens (adult and minor children), and replacement cards only for non-U.S. citizens. oSSNAP allows these applicants for new or replacement SSN cards to start the application process on-line, receive a list of evidentiary documents, and then submit the application data to SSA for further processing by SSA employees. Applicants need to visit a local SSA office to complete the application process. The respondents for this information collection are applicants for original and replacement Social Security cards, or individuals who wish to change information in their SSN records, who use any of the modalities described above.

*Type of Request:* Revision of an OMB-approved information collection.

Application scenario	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time in field office (minutes)**	Total annual opportunity cost (dollars)***
<b>EAB Modality</b>							
Hospital staff who relay the State birth certificate information to the BVS and SSA through the EAB process .....	3,587,284	1	5	298,857	*\$23.74	** 0	***\$7,094,865

Application scenario	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time in field office (minutes)**	Total annual opportunity cost (dollars)***
<b>ISSNRC Modality</b>							
Adult U.S. Citizens requesting a replacement card with no changes through the ISSNRC .....	3,141,061	1	5	261,755	* 25.72	** 0	*** 6,732,341
Adult U.S. Citizens requesting a replacement card with a name change through ISSNRC .....	44,818	1	5	3,735	25.72	** 0	*** 96,060
<b>oSSNAP Modality</b>							
Adult U.S. Citizens providing information to receive a replacement card through the oSSNAP+ .....	866,575	1	5	72,215	* 25.72	** 24	*** 10,772,683
Adult U.S. Citizens providing information to receive an original card through the oSSNAP+ .....	31,521	1	5	2,627	25.72	* 24	*** 391,848
Adult Non-U.S. Citizens providing information to receive an original card through the oSSNAP+ .....	114,429	1	5	9,536	25.72	** 24	*** 1,422,505
Adult Non-U.S. Citizens providing information to receive a replacement card through the oSSNAP+ .....	63,925	1	5	5,327	25.72	** 24	794,673
<b>SSNAP/SS-5 Modality</b>							
Respondents who do not have to provide parents' SSNs .....	2,791,499	1	9	418,725	* 25.72	** 24	*** 39,488,545
Respondents whom we ask to provide parents' SSNs (when applying for original SSN cards for children under age 12) .....	102,258	1	9	15,339	* 25.72	** 24	*** 1,446,542
Applicants age 12 or older who need to answer additional questions so SSA can determine whether we previously assigned an SSN .....	335,587	1	10	55,931	* 25.72	** 24	*** 4,891,069
Applicants asking for a replacement SSN card beyond the allowable limits (i.e., who must provide additional documentation to accompany the application) .....	2,428	1	60	2428	* 25.72	** 24	*** 87,427
<b>Enumeration Quality Review</b>							
Authorization to SSA to obtain personal information cover letter .....	500	1	15	125	* 25.72	** 24	*** 8,359
Authorization to SSA to obtain personal information follow-up cover letter .....	500	1	15	125	* 25.72	** 24	*** 8,359
<b>Grand Total</b>							
Totals .....	11,081,385	.....	.....	1,146,724	.....	.....	*** 73,235,275

\* The number of respondents for this modality is an estimate based on google analytics data for the SS-5 form downloads from SSA.Gov.  
 \*\* We based this figure on average Hospital Records Clerks (<https://www.bls.gov/oes/current/oes292098.htm>), and average U.S. worker's hourly wages ([https://www.bls.gov/oes/current/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/current/oes_nat.htm#00-0000)) as reported by the U.S. Bureau of Labor Statistics.  
 \*\*\* We based this figure on the average FY 2021 wait times for field offices, based on SSA's current management information data.  
 \*\*\*\* This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

2. *Statement of Household Expenses and Contributions—20 CFR 416.1130–416.1148—0960–0456.* SSA bases eligibility for Supplemental Security Income (SSI) on the needs of the recipient. In part, we assess need through determining the amount of income a recipient receives. This income includes in-kind support and maintenance in the form of food and shelter home owners provide. SSA uses Form SSA–8011–F3, Statement of Household Expenses and Contributions, to determine whether the claimant or recipient receives in-kind support and maintenance. This is necessary to

determine: (1) The claimant's or recipient's eligibility for SSI, and (2) the SSI payment amount. SSA only uses this form in cases where SSA needs the householder's (head of household) corroboration of in-kind support and maintenance. The SSA–8011–F3 provides information, which could affect SSI eligibility and payment amount. An SSA claims specialist collects the information on Form SSA–8011–F3 through telephone contact with the respondents, or through face-to-face interviews. The claims specialist records the information in our electronic SSI Claims System. When we

use this procedure, we do not use a paper Form SSA–8011–F3, and we do not require a wet signature, rather we request verbal attestation. However, for those few instances when we use a paper form, we ensure the appropriate person, *i.e.*, the householder, signs the form, and then the claims specialist documents the information in the SSI Claims System; faxes the form into the appropriate electronic folder; and shreds the form. Respondents are householders of homes in which an SSI applicant or recipient resides.

*Type of Request:* Revision of an OMB-approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time in field office or for teleservice centers (minutes)**	Total annual opportunity cost (dollars)***
SSA-8011-F3 (Paper) .....	21,000	1	15	5,250	*\$27.07	**21	***\$341,082
Interview (MCS) .....	398,759	1	15	99,690	*27.07	**21	***6,476,660
Totals .....	419,759			104,940			***6,817,742

\* We based this figure on the average U.S. worker's hourly wages, as reported by Bureau of Labor Statistics data ([https://www.bls.gov/oes/current/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/current/oes_nat.htm#00-0000)).

\*\* We based this figure on averaging both the average FY 2021 wait times for field offices and teleservice centers, based on SSA's current management information data.

\*\*\* This figure does not represent actual costs that SSA is imposing on claimants of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

**3. Integrated Registration Services (IRES) System—20 CFR 401.45—0960–0626.** The IRES System verifies the identity of individuals, businesses, organizations, entities, and government agencies seeking to use SSA's secured internet and telephone applications. Individuals need this verification to electronically request and exchange

business data with SSA. Requestors provide SSA with the information needed to establish their identities. Once SSA verifies identity, the IRES system issues the requestor a user identification number and a password to conduct business with SSA. Respondents are employers; employees; third party submitters of wage data

business entities providing taxpayer identification information; appointed representatives; representative payees; and data exchange partners conducting business in support of SSA programs.

*Type of Request:* Revision of an OMB-approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time for teleservice centers (minutes)**	Total annual opportunity cost (dollars)***
IRES Internet Registrations .....	266,210	1	5	22,184	*\$33.66	**0	***\$746,413
IRES Internet Requestors .....	14,472,710	1	2	482,424	*33.66	**0	***16,238,392
IRES CS (CSA) Registrations .....	15,247	1	11	2,795	*33.66	**19	***256,590
Totals .....	14,754,167			507,403			***17,241,695

\* We based this figure on average U.S. citizen's hourly salary, as reported by Bureau of Labor Statistics data ([https://www.bls.gov/oes/current/oes\\_nat.htm#00-00000](https://www.bls.gov/oes/current/oes_nat.htm#00-00000)); hourly wages for Information and Record Keeping Analysts hourly salary, as reported by Bureau of Labor Statistics data (<https://www.bls.gov/oes/current/oes434199.htm>); and average hourly wages for paralegals/legal assistants and lawyers as posted by the U.S. Bureau of Labor Statistics ([https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm)).

\*\* We based this figure on the average FY 2021 wait time for teleservice centers, based on SSA's current management information data.

\*\*\* This figure does not represent actual costs that SSA is imposing on claimants of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

**4. Site Review Questionnaire for Volume and Fee-for-Service Payees and Beneficiary Interview Form—20 CFR 404.2035, 404.2065, 416.665, 416.701, and 416.708—0960–0633.** SSA asks organizational representative payees to complete Form SSA-637, the Site Review Questionnaire for Volume and Fee-for-Service Payees, to provide

information on how they carry out their responsibilities, including how they manage beneficiary funds. SSA then obtains information from the beneficiaries these organizations represent via Form SSA-639, Beneficiary Interview Form, to corroborate the payees' statements. Due to the sensitivity of the information, the

forms are always completed based on the answers respondents give during the interviews. The respondents are individuals; State and local governments; non-profit and for-profit organizations serving as representative payees; and the beneficiaries they serve.

*Type of Request:* Revision of an OMB-approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Total annual opportunity cost (dollars)**
SSA-639—Individuals .....	22,000	1	10	3,667	*\$19.01	**\$69,710
SSA-637—Individuals .....	500	1	120	1,000	*19.01	**19,010
SSA-637—Organizations .....	4,500	1	120	9,000	*19.03	**171,270
Totals .....	27,000			13,667		**259,990

\* We based the figure for individuals by averaging both the average DI payments based on SSA's current FY 2021 data (<https://www.ssa.gov/legislation/2021FactSheet.pdf>), and the average U.S. worker's hourly wages, as reported by Bureau of Labor Statistics data ([https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm)). We based the figure for organizations by averaging both the average State and local governments (<https://www.bls.gov/oes/current/oes211093.htm>), and the average non-profit and for-profit organizations serving as representative payees (<https://www.bls.gov/oes/current/oes390000.htm>).

\*\* This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

5. *Request for Reinstatement (Title II)—20 CFR 404.1592b–404.1592f—0960–0742.* SSA allows certain beneficiaries to request expedited reinstatement (EXR) of benefits under Title II of the Social Security Act when their medical condition no longer

permits them to perform substantial gainful activity. SSA uses Form SSA–371 to obtain: (1) A signed statement from individuals requesting an EXR of their Title II disability benefits; and (2) proof the requestors meet the EXR requirements. SSA maintains the form in the disability folder of the applicant

to demonstrate the requestors' awareness of the EXR requirements, and their choice to request EXR. Respondents are applicants for EXR of Title II disability benefits.

*Type of Request:* Revision of an OMB-approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time for teleservice centers (minutes)**	Total annual opportunity cost (dollars)***
SSA-371 .....	10,000	1	2	333	*\$10.73	** 19	***\$38,325

\* We based this figure on the average DI payments based on SSA's current FY 2021 data (<https://www.ssa.gov/legislation/2021FactSheet.pdf>).  
 \*\* We based this figure on the average FY 2021 wait time for teleservice centers, based on SSA's current management information data.  
 \*\*\* This figure does not represent actual costs that SSA is imposing on claimants of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

6. *Important Information About Your Appeal, Waiver Rights, and Repayment Options—20 CFR 404.502–404.521—0960–0779.* When SSA accidentally overpays beneficiaries, the agency informs them of the following rights: (1) The right to reconsideration of the overpayment determination; (2) the right to request a waiver of recovery and

the automatic scheduling of a personal conference if SSA cannot approve a request for waiver; and (3) the availability of a different rate of withholding when SSA proposes the full withholding rate. SSA uses Form SSA–3105, Important Information About Your Appeal, Waiver Rights, and Repayment Options, to explain these

rights to overpaid individuals and allow them to notify SSA of their decision(s) regarding these rights. The respondents are individuals who are overpaid Social Security payments.

*Type of Request:* Revision of an OMB approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time in field office or for teleservice centers (minutes)**	Total annual opportunity cost (dollars)***
SSA-3105 (Paper Form) .....	500,000	1	15	125,000	*\$10.95	** 21	***\$3,285,000
Debt Management System .....	166,666	1	15	41,667	* 10.95	** 21	*** 1,095,000
Totals .....	666,666	.....	.....	166,667	.....	.....	***\$4,380,000

\* We based this figure on the average DI payments based on SSA's current FY 2021 data (<https://www.ssa.gov/legislation/2021FactSheet.pdf>).  
 \*\* We based this figure on averaging both the average FY 2021 wait times for field offices and teleservice centers, based on SSA's current management information data.  
 \*\*\* This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

7. *Promoting Opportunity Demonstration—0960–0809.* Section 823 of the Bipartisan Budget Act of 2015 required SSA to carry out the Promoting Opportunity Demonstration (POD) to test a new benefit offset formula for SSDI beneficiaries. Therefore, SSA is undertaking POD, a demonstration to evaluate the affect the new policy will have on Social Security Disability Insurance (SSDI) beneficiaries and their families in several critical areas. We previously obtained OMB approval for this demonstration and are close to completing the project. In this information collection request, we are seeking to renew the approval for both the POD Monthly Earnings and Impairment-related work Expenses (IRWE) Reporting Form, and the POD

End of Year reporting (EOYR) Documentation. The POD implementation team collects earnings and IRWE data from POD treatment group subjects whose monthly earnings exceed the POD threshold. The POD implementation team submits the data it collects from treatment group subjects to SSA. SSA uses the data to apply the POD offset to treatment group subjects' SSDI benefits. Respondents have two options for reporting their earnings and IRWE documentation contained in the POD Monthly Form and the POD EOYR Form: Paper (mail or fax) or an online reporting portal. Respondents are encouraged to submit their earnings and IRWE documentation monthly but can submit it the following year in advance of SSA's end of year reconciliation

process. While the collection of the earnings and IRWE data from respondents on the POD Monthly Form and the POD EOYR Forms is voluntary, failure to submit data could result in the inaccurate calculation of SSDI benefits.

*Note:* We have completed the survey portion of this demonstration project and expect to finish collecting the data by the end of the third quarter of fiscal year 2022.

Respondents are SSDI beneficiaries, who provided written consent before agreeing to participate in the study and whom we randomly assigned to one of the two study treatment groups.

*Type of Request:* Revision of an OMB-approved information collection.

Modality of completion	Number of respondents	Frequency of response	Number of responses	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars) *	Total annual opportunity cost (dollars) **
POD Monthly Earnings and Impairment-related work Expenses (IRWE) Reporting Form—Paper Version (faxed in) .....	1,000	6	6,000	40	4,000	* \$27.07	** \$108,280
POD Monthly Earnings and Impairment-related work Expenses (IRWE) Reporting Form—Internet Version .....	1,000	6	6,000	5	500	* 27.07	** 13,535
POD End of Year reporting (EOYR) Documentation .....	2,000	1	2,000	8	267	* 27.07	** 7,228
Totals .....	4,000	.....	14,000	.....	4,767	.....	** 129,043

\* We based this figure on the average U.S. worker's hourly wages ([https://www.bls.gov/oes/current/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/current/oes_nat.htm#00-0000)), as reported by the U.S. Bureau of Labor Statistics.

\*\* This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. *There is no actual charge to respondents to complete the application.*

Dated: December 27, 2021.

**Naomi Sipple,**  
*Reports Clearance Officer, Social Security Administration.*

[FR Doc. 2021-28387 Filed 12-30-21; 8:45 am]

**BILLING CODE 4191-02-P**

**DEPARTMENT OF TRANSPORTATION**

**Federal Aviation Administration**

**Noise Compatibility Program for Fort Worth Alliance Airport, Tarrant County, Texas**

**AGENCY:** Federal Aviation Administration, DOT.

**ACTION:** Notice of acceptance of a noise exposure map.

**SUMMARY:** The Federal Aviation Administration (FAA) announces its determination that the noise exposure map submitted by City of Fort Worth for Fort Worth Alliance Airport is in compliance with applicable statutory and regulatory requirements.

**DATES:** The effective date of the FAA's determination on the noise exposure map is December 23, 2021.

**FOR FURTHER INFORMATION CONTACT:** Dean McMath, 10101 Hillwood Parkway, Fort Worth, Texas 76177, 817-222-5617.

**SUPPLEMENTARY INFORMATION:** The FAA determined the noise exposure map submitted by City of Fort Worth for Fort Worth Alliance Airport, is in compliance with applicable statutory and regulatory requirements, effective December 23, 2021. Under Title 49 United States Code (U.S.C.) section 47503 of the Aviation Safety and Noise Abatement Act (hereinafter referred to as "the Act"), an airport operator may submit to the FAA, noise exposure maps depicting non-compatible uses as of the date such map is submitted, a

description of estimated aircraft operations during a forecast period that is at least five years in the future and how those operations will affect the map. A noise exposure map must be prepared in accordance with Title 14 Code of Federal Regulations (CFR) part 150, the regulations promulgated pursuant to section 47502 of the Act, and developed in consultation with public agencies and planning authorities in the area surrounding the airport, state and Federal agencies, interested and affected parties in the local community, and aeronautical users of the airport. In addition, an airport operator that submitted a noise exposure map, which the FAA determined is compliant with statutory and regulatory requirements, may submit a noise compatibility program for FAA approval that sets forth measures the operator has taken or proposes to take to reduce existing non-compatible uses and prevent the introduction of additional non-compatible uses.

The FAA completed its review of the noise exposure map and supporting documentation submitted by City of Fort Worth and determined the noise exposure map and accompanying documentation are in compliance with applicable requirements. The documentation that constitutes the Noise Exposure Map includes: Table 3.4 Existing Aircraft Operations; Table 3.8 Existing and Forecast Annual Operations; Table 4.5 Day/Night Operations by Aircraft Category; Table 4.6 Runway Utilization by Aircraft Category; Figure 3.2 Airport Layout Plan; Figure 4.1 North Flow Flight Tracks; Figure 4.2 South Flow Flight Tracks. This determination is effective on December 23, 2021. FAA's determination on an airport's noise exposure map is limited to a finding

that the noise exposure map was developed in accordance with the Act and procedures contained in 14 CFR part 150, Appendix A. FAA's acceptance of an NEM does not constitute approval of the applicant's data, information or plans, or a commitment to approve a noise compatibility program or to fund the implementation of that program. If questions arise concerning the precise relationship of specific properties within noise exposure contours depicted on a noise exposure map, it should be noted that the FAA is not involved in any way in determining the relative locations of specific properties with regard to the depicted noise contours or in interpreting the noise exposure maps to resolve questions concerning, for example, which properties should be covered by the provisions of section 47506 of the Act. These functions are inseparable from the ultimate land use control and planning responsibilities of local government. These local responsibilities are not changed in any way under 14 CFR part 150 or through FAA review and acceptance of a noise exposure map. Therefore, the responsibility for the detailed overlaying of noise exposure contours onto the map depicting properties on the surface rests exclusively with the airport operator that submitted a noise exposure map or with those public and planning agencies with which consultation is required under section 47503 of the Act. The FAA relied on the certification by the airport operator, under of 14 CFR 150.21 that the required consultations and opportunity for public review has been accomplished during the development of the noise exposure maps. Copies of the noise exposure map and supporting documentation and the FAA's evaluation of the noise exposure maps