

from the requirement from TD 9457 to file a return for the payment of the excise taxes under section 4980B, 4980D, 4980E, and 4980G of the code.

*Form:* 8928.

*Affected Public:* Businesses or other for-profits.

*Estimated Number of Respondents:* 100.

*Frequency of Response:* On occasion.

*Estimated Total Number of Annual Responses:* 100.

*Estimated Time per Response:* 23.48 hours per response.

*Estimated Total Annual Burden Hours:* 2,348.

*Title:* TD 9544 (REG-112805-10)—Branded Prescription Drugs.

*OMB Control Number:* 1545-2209.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* Section 9008 of the Patient Protection and Affordable Care Act (ACA), Public Law 111-148 (124 Stat. 119 (2010)), as amended by section 1404 of the Health Care and Education Reconciliation Act of 2010 (HCERA), Public Law 111-152 (124 Stat. 1029 (2010)) imposes an annual fee on manufacturers and importers of branded prescription drugs that have gross receipts of over \$5 million from the sales of these drugs to certain government programs (covered entity/covered entities). The previously approved final regulations supersede temporary regulations and describe how the IRS will administer the branded prescription drug fee. Section 51.7T(b) of the temporary regulations provides that the IRS will send each covered entity notification of its preliminary fee calculation by May 15 of the fee year. If a covered entity chooses to dispute the IRS' preliminary fee calculation, the covered entity must follow the procedures for submitting an error report that are established in § 51.8T.

*Form:* None.

*Affected Public:* Businesses or other for-profits.

*Estimated Number of Respondents:* 45.

*Frequency of Response:* On occasion.

*Estimated Total Number of Annual Responses:* 45.

*Estimated Time per Response:* 40 hours per response.

*Estimated Total Annual Burden Hours:* 1,800.

*Title:* Form 8952—Application for Voluntary Classification Settlement Program.

*OMB Control Number:* 1545-2215.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* Form 8952 was created by the IRS in conjunction with a new program developed to permit taxpayers to voluntarily reclassify workers as employees for federal employment tax purposes and obtain similar relief to that obtained in the current Classification Settlement Program. To participate in the program, taxpayers must meet certain eligibility requirements, apply to participate in VCSP, and enter into closing agreements with the IRS.

*Form:* 8952.

*Affected Public:* Businesses or other for-profits.

*Estimated Number of Respondents:* 1,700.

*Frequency of Response:* Annually.

*Estimated Total Number of Annual Responses:* 1,700.

*Estimated Time per Response:* 9.85 hours per response.

*Estimated Total Annual Burden Hours:* 16,745.

*Title:* Form 1098-MA—Mortgage Assistance Payments.

*OMB Control Number:* 1545-2221.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* This form is a statement reported to the IRS and to taxpayers. It will be filed and furnished by State Housing Finance Agencies (HFAs) and the Department of Housing and Urban Development (HUD) to report the total amounts of mortgage assistance payments and homeowner mortgage payments made to mortgage servicers. The requirement for the statement are authorized by Notice 2011-14, supported by Public Law 111-203, sec. 1496, and Public Law 110-343, Division A, sec. 109.

*Form:* 1098-MA.

*Affected Public:* State, Local, and Tribal Governments.

*Estimated Number of Respondents:* 52.

*Frequency of Response:* Annually.

*Estimated Total Number of Annual Responses:* 60,000.

*Estimated Time per Response:* 2.84 hours per response.

*Estimated Total Annual Burden Hours:* 170,400.

*Authority:* 44 U.S.C. 3501 *et seq.*

Dated: October 25, 2018.

**Spencer W. Clark,**

*Treasury PRA Clearance Officer.*

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**BILLING CODE 4830-01-P**

## DEPARTMENT OF THE TREASURY

### Agency Information Collection Activities; Submission for OMB Review; Comment Request; Multiple Fiscal Service Information Collection Requests

**AGENCY:** Departmental Offices, U.S. Department of the Treasury.

**ACTION:** Notice.

**SUMMARY:** The Department of the Treasury will submit the following information collection requests to the Office of Management and Budget (OMB) for review and clearance in accordance with the Paperwork Reduction Act of 1995, on or after the date of publication of this notice. The public is invited to submit comments on these requests.

**DATES:** Comments should be received on or before November 29, 2018 to be assured of consideration.

**ADDRESSES:** Send comments regarding the burden estimate, or any other aspect of the information collection, including suggestions for reducing the burden, to (1) Office of Information and Regulatory Affairs, Office of Management and Budget, Attention: Desk Officer for Treasury, New Executive Office Building, Room 10235, Washington, DC 20503, or email at [OIRA\\_Submission@OMB.EOP.gov](mailto:OIRA_Submission@OMB.EOP.gov) and (2) Treasury PRA Clearance Officer, 1750 Pennsylvania Ave. NW, Suite 8100, Washington, DC 20220, or email at [PRA@treasury.gov](mailto:PRA@treasury.gov).

**FOR FURTHER INFORMATION CONTACT:** Copies of the submissions may be obtained from Jennifer Quintana by emailing [PRA@treasury.gov](mailto:PRA@treasury.gov), calling (202) 622-0489, or viewing the entire information collection request at [www.reginfo.gov](http://www.reginfo.gov).

#### SUPPLEMENTARY INFORMATION:

##### Bureau of the Fiscal Service (FS)

1. *Title:* Annual Letters—Certificate of Authority (A) and Admitted Reinsurer (B).

*OMB Control Number:* 1530-0014.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* Annual letters sent to insurance companies providing surety bonds to protect the U.S. or companies providing reinsurance to the U.S. Information needed for renewal of certified companies and their underwriting limitations, and of admitted reinsurers.

*Form:* Annual Letter A, Annual Letter B.

*Affected Public:* Businesses or other for-profits.

*Estimated Number of Respondents:* 341.

*Frequency of Response:* Annually.  
*Estimated Total Number of Annual Responses:* 341.

*Estimated Time per Response:* 18.75 hours.

*Estimated Total Annual Burden Hours:* 6,394.

2. *Title:* Request for Payment of Federal Benefit by Check and EFT Waiver Form.

*OMB Control Number:* 1530-0019.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* 31 CFR part 208 requires that all Federal non-tax payments be made by electronic funds transfer (EFT). This form is used to collect information from individuals requesting a waiver from the EFT requirement because of a mental impairment and/or who live in a remote geographic location that does not support the use of EFT. These individuals may continue to receive payment by check. However, 31 CFR part 208 requires individuals requesting one of these waiver conditions to submit a written justification.

*Form:* FS Form 1201W, FS Form 1201W (SP), FS Form 1201W-DFAS.

*Affected Public:* Individuals and households.

*Estimated Number of Respondents:* 3,250.

*Frequency of Response:* Once.

*Estimated Total Number of Annual Responses:* 3,250.

*Estimated Time per Response:* 20 minutes.

*Estimated Total Annual Burden Hours:* 1,083.

3. *Title:* Claim for Lost, Stolen or Destroyed U.S. Savings Bonds and Supplemental Statement for U.S. Securities.

*OMB Control Number:* 1530-0021.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* The information is necessary to apply for relief on account of the loss, theft, or destruction of United States Savings Bonds or the non-receipt of United States Securities.

*Form:* FS Form 1048, FS Form 2243.

*Affected Public:* Individuals and households.

*Estimated Number of Respondents:* 72,000.

*Frequency of Response:* On occasion.

*Estimated Total Number of Annual Responses:* 72,000.

*Estimated Time per Response:* 17 minutes.

*Estimated Total Annual Burden Hours:* 20,352.

4. *Title:* Request by Fiduciary for Reissue of United States Savings Bonds.

*OMB Control Number:* 1530-0035.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* One or more fiduciaries (individual or corporate) must use this form to establish entitlement and request distribution of United States Treasury Securities and/or related payments to the person lawfully entitled due to termination of a trust, distribution of an estate, attainment of majority, restoration to competency, or other reason.

*Form:* FS Form 1455.

*Affected Public:* Individuals and households.

*Estimated Number of Respondents:* 17,700.

*Frequency of Response:* On occasion.

*Estimated Total Number of Annual Responses:* 17,700.

*Estimated Time per Response:* 30 minutes.

*Estimated Total Annual Burden Hours:* 8,850.

*Authority:* 44 U.S.C. 3501 et seq.

Dated: October 25, 2018.

**Spencer W. Clark,**

*Treasury PRA Clearance Officer.*

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## DEPARTMENT OF THE TREASURY

### Agency Information Collection Activities; Submission for OMB Review; Comment Request; Multiple Financial Crimes Enforcement Network Information Collection Requests

**AGENCY:** Departmental Offices, U.S. Department of the Treasury.

**ACTION:** Notice.

**SUMMARY:** The Department of the Treasury will submit the following information collection requests to the Office of Management and Budget (OMB) for review and clearance in accordance with the Paperwork Reduction Act of 1995, on or after the date of publication of this notice. The public is invited to submit comments on these requests.

**DATES:** Comments should be received on or before November 29, 2018 to be assured of consideration.

**ADDRESSES:** Send comments regarding the burden estimate, or any other aspect of the information collection, including suggestions for reducing the burden, to (1) Office of Information and Regulatory Affairs, Office of Management and Budget, Attention: Desk Officer for Treasury, New Executive Office Building, Room 10235, Washington, DC

20503, or email at [OIRA\\_Submission@OMB.EOP.gov](mailto:OIRA_Submission@OMB.EOP.gov) and (2) Treasury PRA Clearance Officer, 1750 Pennsylvania Ave. NW, Suite 8100, Washington, DC 20220, or email at [PRA@treasury.gov](mailto:PRA@treasury.gov).

#### FOR FURTHER INFORMATION CONTACT:

Copies of the submissions may be obtained from Jennifer Quintana by emailing [PRA@treasury.gov](mailto:PRA@treasury.gov), calling (202) 622-0489, or viewing the entire information collection request at [www.reginfo.gov](http://www.reginfo.gov).

#### SUPPLEMENTARY INFORMATION:

#### Financial Crimes Enforcement Network (FinCEN)

1. *Title:* Suspicious Activity Report by Securities and Futures Industries.

*OMB Control Number:* 1506-0019.

*Type of Review:* Extension without change of a currently approved collection.

*Description:* Treasury requires certain securities broker-dealers, futures commission merchants and introducing brokers in commodities to file suspicious activity reports. This renewal pertains to OMB approval of the information collection requirement per se imposed upon brokers or dealers in securities and futures commission merchants and introducing brokers in commodities. OMB approval of the allocated burden hours associated with these requirements (31 CFR 1023.320 and 1026.320), stemming from the submission and record maintenance of the BSARs themselves, is reflected in the burden for the BSAR as approved under OMB Control No. 1506-0065. This splitting in the coverage of the OMB numbers is a result of FinCEN's streamlining of SAR reporting into one a single, unified format. Although the means of reporting was consolidated into a single reporting format covering multiple industry sectors under OMB Control No. 1506-0065, the reporting requirements themselves are still contained in separate rules covered by various OMB control numbers. Consequently, the burden listed in this renewal under control number 1506-0019 is estimated at one response and one hour in order to avoid double-counting the same burdens that have already been included in the estimate under control number 1506-0065.

*Form:* FinCEN Form 111.

*Affected Public:* Businesses or other for-profits.

*Estimated Number of Respondents:* 1.

*Frequency of Response:* On Occasion.

*Estimated Total Number of Annual Responses:* 1.

*Estimated Time per Response:* 1 hour.

*Estimated Total Annual Burden Hours:* 1 hour.