

permissible for federally registered lobbyists to serve on advisory committees, such as RETAC, as long as they do so in a representative capacity, rather than an individual capacity. See *Revised Guidance on Appointment of Lobbyists to Federal Advisory Committees, Boards, and Commissions*, 79 FR 47,482 (Aug. 13, 2014). Members of RETAC are appointed to serve in a representative capacity. Further information about RETAC is available on the RETAC page of the Board's Web site at <http://www.stb.dot.gov/stb/rail/retac.html>.

The Board is soliciting nominations from the public for candidates to fill two vacancies on RETAC: (1) For a representative of the downstream segment of the domestic petroleum industry (e.g., refiners, petrochemical producers, NGL producers/distributors, logistics service providers, and other downstream participants); and (2) for a representative of the electric utility industry. Both vacancies are for a three-year term ending September 30, 2017.

Nominations for a candidate to fill this vacancy should be submitted in letter form and should include: (1) The name of the candidate; (2) the interest the candidate will represent; (3) a summary of the candidate's experience and qualifications for the position; (4) a representation that the candidate is willing to serve as a member of RETAC; and (5) a statement that the candidate agrees to serve in a representative capacity. Suggestions for candidates for membership on RETAC should be filed with the Board by December 3, 2014. Please note that submissions will be available to the public at the Board's offices and posted on the Board's Web site under Docket No. EP 670 (Sub-No. 2).

This action will not significantly affect either the quality of the human environment or the conservation of energy resources.

Authority: 49 U.S.C. 721; 49 U.S.C. 11101; 49 U.S.C. 11121.

Decided: October 31, 2014.

By the Board, Rachel D. Campbell, Director, Office of Proceedings.

Jeffrey Herzig,
Clearance Clerk.

[FR Doc. 2014-26287 Filed 11-4-14; 8:45 am]

BILLING CODE 4915-01-P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

Proposed Collection; Comment Request for Form 3491

AGENCY: Internal Revenue Service (IRS), Treasury.

ACTION: Notice and request for comments.

SUMMARY: The Department of the Treasury, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995, Public Law 104-13 (44 U.S.C. 3506(c)(2)(A)). Currently, the IRS is soliciting comments concerning Form 3491, Consumer Cooperative Exemption Application.

DATES: Written comments should be received on or before January 5, 2015 to be assured of consideration.

ADDRESSES: Direct all written comments to Christie Preston, Internal Revenue Service, room 6129, 1111 Constitution Avenue NW., Washington, DC 20224.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the form and instructions should be directed to LaNita Van Dyke, Internal Revenue Service, room 6517, 1111 Constitution Avenue NW., Washington, DC 20224, or through the internet at Lanita.VanDyke@irs.gov.

SUPPLEMENTARY INFORMATION:

Title: Consumer Cooperative Exemption Application.

OMB Number: 1545-1941.

Form Number: Form 3491.

Abstract: A cooperative uses Form 3491 to apply for exemption from filing information returns (Forms 1099-PATR) on patronage distributions of \$10 or more to any person during the calendar year.

Current Actions: There are no changes being made to the Form 3491 at this time.

Type of Review: Extension of a currently approved collection.

Affected Public: Business or other for-profit, individuals or households, and farms.

Estimated Number of Respondents: 200.

Estimated Time per Respondent: 44 minutes.

Estimated Total Annual Burden Hours: 148.

The following paragraph applies to all of the collections of information covered by this notice:

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid OMB control number.

Books or records relating to a collection of information must be retained as long as their contents may become material in the administration of any internal revenue law. Generally, tax returns and tax return information are confidential, as required by 26 U.S.C. 6103.

Request for Comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Approved: October 8, 2014.

Christie Preston,

IRS Reports Clearance Officer.

[FR Doc. 2014-26218 Filed 11-4-14; 8:45 am]

BILLING CODE 4830-01-P

DEPARTMENT OF VETERANS AFFAIRS

Publication of Wait-Times for the Department for the Veterans Choice Program

AGENCY: Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: The Veterans Access, Choice, and Accountability Act of 2014 directs the Department of Veterans Affairs (VA) to publish wait times for the scheduling of appointments in each VA facility for primary care, specialty care, and hospital care and medical services. This **Federal Register** Notice announces VA's publication of the wait times.

ADDRESSES: The wait-time data for all Veterans Health Administration (VHA) medical centers and clinics is available on the following Web site: <http://www.va.gov/health/access-audit.asp>.

FOR FURTHER INFORMATION CONTACT: Ms. Kristin J. Cunningham, Director, Business Policy (10NB6), Chief Business Office, Veterans Health Administration, 810 Vermont Avenue NW., Washington, DC 20420, Telephone: (202) 382-2508. (This is not a toll-free number.)

SUPPLEMENTARY INFORMATION: Section 206 of the Veterans Access, Choice, and Accountability Act of 2014 (Pub. L. 113-146, “the Act”) directs the Department of Veterans Affairs (VA), not later than 90 days after the date of the enactment of the Act, to publish in the **Federal Register**, and on a publicly-accessible Internet Web site of each VA Medical Center, the wait-times for the scheduling of an appointment in each VA facility by a veteran for the receipt of primary care, specialty care, and hospital care and medical services based on the general severity of the condition of the veteran. Whenever the wait-times for the scheduling of such an appointment change, the Secretary is also required to publish the revised wait times on a publicly-accessible Internet Web site of each VA Medical Center not later than 30 days after such change,

and in the **Federal Register** not later than 90 days after such change.

This **Federal Register** Notice announces the publication of the wait-times of the Veterans Health Administration (VHA) for primary care, specialty care, and mental health care as required by section 206 of the Act. VA is working to develop an accurate method for tracking and reporting wait times for hospital care and medical services and will begin reporting that data as soon as it is available.

This data release contains a new method of reporting. The previous method calculated wait time based on the create date (the date an appointment is made) and based on the desired date for scheduling an appointment. The previous method also reported data separately for new and established patients. The current method uses the date that an appointment is deemed clinically appropriate by a VA health care provider, or if no such clinical determination has been made, the date a veteran prefers to be seen, to calculate wait times and reports the wait times for all patients combined. This is consistent with the wait-time goals of VHA

published in the **Federal Register** on October 17, 2014. 79 FR 62519. As required by section 206, the new data is also reported for each VHA facility, down to the level of Community-Based Outpatient Clinics.

For this release, VA is publishing two reports, one that provides wait times data as of October 1 based on the previous reporting method, and one that reports the wait-times data for the same time period based on current reporting method. VA will continue to report average wait times using both methods for a period of time sufficient for veterans to become accustomed to the new reporting method.

The following is a summary of the wait times data, based on preferred appointment date, that is published at <http://www.va.gov/health/access-audit.asp>. This data can also be accessed from the Web sites of each VA Medical Center following the release of each update. The average wait times for primary care, specialty care, and mental health care by Veterans Integrated Service Network (VISN) are provided in the following tables:

SAMPLE TABLE WAIT TIMES BY VISN: CURRENT METHOD

VISN	Primary care average wait time	Specialty care average wait time	Mental health average wait time
VISN 1	4.60	5.50	4.30
VISN 2	3.24	7.54	3.82
VISN 3	2.39	4.66	1.94
VISN 4	4.24	8.13	2.67
VISN 5	7.83	6.69	4.14
VISN 6	13.49	8.12	6.83
VISN 7	11.29	7.93	4.89
VISN 8	3.75	7.90	2.53
VISN 9	8.04	4.61	4.12
VISN 10	4.60	6.94	2.77
VISN 11	3.67	4.71	1.99
VISN 12	5.32	7.73	3.67
VISN 15	2.59	5.95	2.51
VISN 16	7.52	7.12	4.37
VISN 17	9.72	5.95	7.16
VISN 18	10.98	10.59	7.50
VISN 19	10.28	8.50	8.33
VISN 20	6.18	7.75	1.91
VISN 21	6.71	9.77	2.78
VISN 22	6.66	9.05	4.78
VISN 23	3.94	5.00	2.35

Note: Wait Time is calculated from the veteran's preferred date or clinically appropriate date. Average wait time represents the average number of days patients are waiting for an appointment as of 10/1/2014. Primary Care is composed of three DSS Stop Codes, Specialty Care is composed of 41 DSS Stop Codes, and Mental Health is composed of 7 DSS Stop codes.

SAMPLE TABLE WAIT TIMES BY VISN: PREVIOUS REPORTING METHOD

VISN	New primary care average wait time	New specialty care average wait time	New mental health average wait time	Established patient primary care average wait time	Established patient specialty care average wait time	Established patient mental health average wait time
VISN 1	36.99	39.24	26.55	4.51	5.15	4.23
VISN 2	36.77	48.57	28.69	3.14	6.63	3.72
VISN 3	23.58	32.37	26.56	2.35	4.15	1.86

SAMPLE TABLE WAIT TIMES BY VISN: PREVIOUS REPORTING METHOD—Continued

VISN	New primary care average wait time	New specialty care average wait time	New mental health average wait time	Established patient primary care average wait time	Established patient specialty care average wait time	Established patient mental health average wait time
VISN 4	35.73	41.36	30.92	4.14	7.74	2.57
VISN 5	52.26	39.27	64.56	7.29	6.36	4.08
VISN 6	55.99	43.68	37.63	12.50	7.58	6.52
VISN 7	50.37	48.28	34.14	10.27	6.89	4.62
VISN 8	44.26	46.52	33.17	3.66	7.09	2.44
VISN 9	54.96	47.08	34.62	7.66	4.18	4.02
VISN 10	32.09	37.47	34.05	4.39	6.37	2.68
VISN 11	30.22	39.91	25.51	3.50	4.28	1.82
VISN 12	27.10	36.77	29.14	5.23	7.35	3.64
VISN 15	35.79	43.30	31.82	2.45	5.27	2.47
VISN 16	37.73	43.85	35.98	7.23	6.69	4.17
VISN 17	47.43	36.06	29.92	9.27	5.64	6.97
VISN 18	38.86	42.97	41.71	10.61	9.59	7.36
VISN 19	49.40	43.73	33.91	8.56	7.34	8.13
VISN 20	37.48	49.88	39.77	5.98	6.05	1.81
VISN 21	33.24	41.10	28.44	6.69	9.16	2.64
VISN 22	34.35	43.73	39.56	6.35	8.21	4.44
VISN 23	29.89	43.12	33.76	3.89	4.33	2.25

Note: Wait Time is calculated from appointment create date for new patient appointments and from appointment desired date for established patient appointments. Average wait time represents the average number of days patients are waiting for an appointment as of 10/1/2014. Primary Care is composed of three DSS Stop Codes, Specialty Care is composed of 41 DSS Stop Codes, and Mental Health is composed of 7 DSS Stop codes.

Signing Authority

The Secretary of Veterans Affairs, or designee, approved this document and authorized the undersigned to sign and submit the document to the Office of the

Federal Register for publication electronically as an official document of the Department of Veterans Affairs. Jose D. Riojas, Chief of Staff, approved this document on October 30, 2014, for publication.

Dated: October 31, 2014.

William F. Russo,

Acting Director, Office of Regulation Policy & Management, Office of the General Counsel, Department of Veterans Affairs.

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