

filing also will be available for inspection and copying at the principal office of the Exchange. All comments received will be posted without change; the Commission does not edit personal identifying information from submissions. You should submit only information that you wish to make available publicly. All submissions should refer to File Number SR-Topaz-2014-03, and should be submitted on or before February 20, 2014.

For the Commission, by the Division of Trading and Markets, pursuant to delegated authority.<sup>10</sup>

**Kevin M. O'Neill,**

*Deputy Secretary.*

[FR Doc. 2014-01808 Filed 1-29-14; 8:45 am]

**BILLING CODE 8011-01-P**

## SOCIAL SECURITY ADMINISTRATION

### 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, Fax: 202-395-6974, Email address: [OIRA\\_Submission@omb.eop.gov](mailto:OIRA_Submission@omb.eop.gov). (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).

I. The information collection below is pending at SSA. SSA will submit it to 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 31, 2014. Individuals can obtain copies of the collection

instruments by writing to the above email address.

Medicare Income-Related Monthly Adjustment Amount—Life-Changing Event Form—0960-0784. Federally mandated reductions in the Federal Medicare Part B and prescription drug coverage subsidies result in selected Medicare recipients paying higher premiums with income above a specific threshold. The amount of the premium subsidy reduction is an income-related monthly adjustment amount (IRMAA). The Internal Revenue Service (IRS) transmits income tax return data to SSA for SSA to determine the IRMAA. SSA uses the Form SSA-44 to determine if a recipient qualifies for a reduction in the IRMAA. If affected Medicare recipients believe SSA should use more recent tax data because a life-changing event that significantly reduces their income, they can report these changes to SSA and ask for a new initial determination of their IRMAA. The respondents are Medicare Part B and prescription drug coverage recipients and enrollees with modified adjusted gross income over a high-income threshold who experience one of the eight significant life-changing events.

*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) |
|---------------------------------------------|-----------------------|-----------------------|---------------------------------------|---------------------------------------|
| Personal Interview (SSA field office) ..... | 147,000               | 1                     | 30                                    | 73,500                                |
| SSA-44 Paper Form .....                     | 39,000                | 1                     | 45                                    | 29,250                                |
| Totals .....                                | 186,000               |                       |                                       | 102,750                               |

II. SSA submitted the information collections below to OMB for clearance. Your comments regarding the 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 March 3, 2014. Individuals can obtain copies of the OMB clearance packages

by writing to [OR.Reports.Clearance@ssa.gov](mailto:OR.Reports.Clearance@ssa.gov).

1. Missing and Discrepant Wage Reports Letter and Questionnaire—26 CFR 31.6051-2—0960-0432. Each year employers report the wage amounts they paid their employees to the IRS for tax purposes, and separately to SSA for retirement and disability coverage purposes. The same figures should be reported to SSA and the IRS. However, each year some employer wage reports

SSA receives are less than the wage amounts employers report to the IRS. SSA uses Forms SSA-L93-SM, SSA-L94-SM, SSA-95-SM, and SSA-97-SM to ensure employees receive full credit for their wages. Respondents are employers who reported lower wage amounts to SSA than they reported to the IRS.

*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) |
|-----------------------------------------------------------------------------|-----------------------|-----------------------|---------------------------------------|---------------------------------------|
| SSA-95-SM and SSA-97-SM (and accompanying cover letters SSA-L93, L94) ..... | 360,000               | 1                     | 30                                    | 180,000                               |

<sup>10</sup> 17 CFR 200.30-3(a)(12).

2. Benefit Offset National Demonstration—0960–0785. SSA is undertaking the Benefit Offset National Demonstration (BOND)—a demonstration and evaluation of policy changes and services on the Social Security Disability Insurance (SSDI) program—in an effort to produce strong evidence about the effectiveness of potential solutions that would improve the historically very low rate of return to work among SSDI beneficiaries. Under current law, Social Security beneficiaries lose their SSDI benefit if they have earnings or work activity above the threshold of Substantial Gainful Activity. The benefit-offset component of this demonstration reduces benefits by \$1 for each \$2 in earnings above the BOND threshold, resulting in a gradual reduction in benefits as earnings increase. The

experimental design for BOND tests a benefit offset alone and in conjunction with enhanced work incentives counseling. The central research questions include:

- What is the effect of the benefit offset alone on employment and other outcomes?

- What is the effect of the benefit offset in combination with enhanced work incentives counseling on employment and other outcomes?

The public survey data collections have four components—an impact study, a cost-benefit analysis, a participation analysis, and a process study. The data collections are a primary source for data to measure the effects of a more generous benefit offset and the provision of enhanced work incentives counseling on SSDI beneficiaries' work efforts and earnings. Ultimately, these data will benefit

researchers, policy analysts, policy makers and the United States Congress in a wide range of program areas. The effects of BOND on the well-being of SSDI beneficiaries could manifest themselves in many dimensions and could be relevant to an array of other public programs. This project offers the first opportunity to obtain reliable measures of these effects based upon a nationally representative sample. The long-term indirect benefits of this research are therefore likely to be substantial. Respondents are SSDI beneficiaries and concurrent SSDI beneficiaries and Supplemental Security Income recipients who we randomly assign to the study (Stage 1), and SSDI beneficiaries who agree to participate in the study (Stage 2).

*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) |
|--------------------------------------------|-----------------------|-----------------------|---------------------|---------------------------------------|---------------------------------------|
| Participation Agreement .....              | 12,954                | 1                     | 12,954              | 20                                    | 4,318                                 |
| Baseline Survey .....                      | 12,954                | 1                     | 12,954              | 41                                    | 8,852                                 |
| Stage 2, 12-month Interim Survey .....     | 10,363                | 1                     | 10,363              | 29                                    | 5,009                                 |
| Stage 1, 36-month Survey .....             | 8,000                 | 1                     | 8,000               | 49                                    | 6,533                                 |
| Stage 2, 36-month Survey .....             | 10,363                | 1                     | 10,363              | 60                                    | 10,363                                |
| Enhanced Work Incentives Assessment .....  | 3,089                 | 1                     | 3,089               | 35                                    | 1,802                                 |
| Key Informant Interviews .....             | 100                   | 7                     | 700                 | 60                                    | 700                                   |
| Stage 2, Participant Focus Groups .....    | 600                   | 1                     | 600                 | 90                                    | 900                                   |
| Stage 1, First Contact Letter Survey ..... | 500                   | 1                     | 500                 | 3                                     | 25                                    |
| Totals .....                               | 89,923                |                       | 59,523              |                                       | 38,502                                |

Dated: January 27, 2014.

**Faye Lipsky,**

*Reports Clearance Director, Social Security Administration.*

[FR Doc. 2014–01828 Filed 1–29–14; 8:45 am]

**BILLING CODE 4191–02–P**

## SOCIAL SECURITY ADMINISTRATION

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

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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, Fax: 202–395–6974, Email address: *OIRA\_Submission@omb.eop.gov*.

(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*.

I. The information collections below are pending at SSA. SSA will submit them to 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 31, 2014. Individuals can obtain copies of

the collection instruments by writing to the above email address.

1. Questionnaire About Employment or Self-Employment Outside the United States—20 CFR 404.401(b)(1), 404.415 & 404.417—0960–0050. When a Social Security beneficiary or claimant reports work outside the United States, SSA uses Form SSA–7163 to determine if foreign work deductions are applicable. Specifically, SSA uses Form SSA–7163 to determine: (1) Whether work performed by beneficiaries outside the United States is cause for deductions from their monthly benefits; (2) which of two work tests (foreign or regular test) is applicable; and (3) the number of months, if any, for SSA-imposed deductions. As the respondents are beneficiaries living and working outside the United States, SSA must determine whether the annual earnings test applies to all earnings from work covered by the Social Security Act (Act), including earnings from covered work performed outside the United States. However, because of the differences in foreign currency values, it is administratively