If you would like more details about the information in these tables, or wish to obtain the complete <u>Insurance Collision Report</u>, please contact HLDI directly, at:

Highway Loss Data Institute 1005 North Glebe Road Arlington, VA 22201 Tel: (703) 247-1600

[FR Doc. 04–6586 Filed 3–23–04; 8:45 am] **BILLING CODE 4910–59–C**

DEPARTMENT OF TRANSPORTATION

Surface Transportation Board

[STB Ex Parte No. 290 (Sub No. 5) (2004–2)]

Quarterly Rail Cost Adjustment Factor

AGENCY: Surface Transportation Board.

ACTION: Approval of rail cost adjustment factor.

SUMMARY: The Board has approved the second quarter 2004 rail cost adjustment factor (RCAF) and cost index filed by the Association of American Railroads. The second quarter 2004 RCAF (Unadjusted) is 1.033. The second quarter 2004 RCAF (Adjusted) is 0.518. The second quarter 2004 RCAF—5 is 0.493.

EFFECTIVE DATE: April 1, 2004.

FOR FURTHER INFORMATION CONTACT: Mac Frampton, (202) 565–1541 Federal Information Relay Service (FIRS) for the hearing impaired: 1–800–877–8339.

SUPPLEMENTARY INFORMATION:

Additional information is contained in the Board's decision. To purchase a copy of the full decision, call ASAP Document Solutions at (301) 577–2600. [Assistance for the hearing impaired is available through FIRS: 1–800–877– 8339.]

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

Pursuant to 5 U.S.C. 605(b), we conclude that our action will not have a significant economic impact on a substantial number of small entities within the meaning of the Regulatory Flexibility Act.

Decided: March 15, 2004. By the Board, Chairman Nober.

Vernon A. Williams,

Secretary.

[FR Doc. 04-6441 Filed 3-23-04; 8:45 am] BILLING CODE 4915-01-P

DEPARTMENT OF TREASURY

Submission for OMB Review; Comment Request

March 16, 2004.

The Department of Treasury has submitted the following public information collection requirement(s) to OMB for review and clearance under the Paperwork Reduction Act of 1995, Pub. L. 104–13. Copies of the submission(s) may be obtained by calling the Treasury Bureau Clearance Officer listed. Comments regarding this information collection should be addressed to the OMB reviewer listed and to the Treasury Department Clearance Officer, Department of the Treasury, Room 11000, 1750 Pennsylvania Avenue, NW., Washington, DC 20220.

DATES: Written comments should be received on or before April 23, 2004 to be assured of consideration.

Bureau of the Public Debt (PD)

OMB Number: 1535–0023. Form Number: PD F 4000. Type of Review: Extension.

Title: Request to Reissue United States Savings Bonds.

Description: Form is used by owners to identify the securities involved and to establish authority to reissue them.

Respondents: Individuals or households.

Estimated Number of Respondents: 600,000.

Estimated Burden Hours Per Respondent: 30 minutes.

Frequency of Response: On occasion.
Estimated Total Reporting Burden
Hours: 300,000 hours.

OMB Number: 1535–0042. Form Number: PD F 2216.

Type of Review: Extension.
Title: Application by Preferred
Creditor for Disposition without
Administration Where deceased
Owner's Estate Includes Securities Not

Exceeding \$500.

Description: Used by preferred creditor of decedent's estate to request payment of bonds/checks not exceeding \$500.

Respondents: Individuals or households, Business or other for-profit. Estimated Number of Respondents: 5,000. Estimated Burden Hours Per Respondent: 10 minutes.

Frequency of Response: On occasion. Estimated Total Reporting Burden Hours: 835 hours.

OMB Number: 1535–0062. Form Number: PD F 2966. Type of Review: Extension.

Title: Special Bond of Indemnity by Purchaser of United States Savings Bonds/Notes Involved in a Chain Letter Scheme.

Description: Used by the purchaser of savings bonds in a chain letter scheme to request refund purchase price of the bonds.

Respondents: Individuals or households.

 ${\it Estimated \ Number \ of \ Respondents:} \\ 5,000.$

Estimated Burden Hours Per Respondent: 8 minutes.

Frequency of Response: On occasion. Estimated Total Reporting Burden Hours: 665 hours.

OMB Number: 1535–0096. Form Number: PD F 1993. Type of Review: Extension. Title: Reinvestment Application.

Description: Used to request proceeds of matured Series H Savings Bonds be reinvested in Series HH Savings Bonds.

Respondents: Individuals or households.

Estimated Number of Respondents: 20,000.

Estimated Burden Hours Per Respondent: 15 minutes.

Frequency of Response: On occasion. Estimated Total Reporting Burden

Hours: 5,000 hours.

OMB Number: 1535–0127. CFR Part: CFR Part 343. Type of Review: Extension.

Title: Offering of U.S. Mortgage Guaranty Insurance Company Tax and Loss Bonds.

Description: Regulations governing the issue, reissue, and redemption of U.S. Mortgage Guaranty Insurance Company Tax and Loss Bonds.

Respondents: Business or other forprofit.

Estimated Number of Respondents:

Estimated Burden Hours Per Respondent: 15 minutes.

Frequency of Response: On occasion.

Estimated Total Reporting Burden Hours: 20 hours.

Clearance Officer: Vicki S. Thorpe, (304) 480–6553, Bureau of the Public Debt, 200 Third Street, Parkersburg, West VA 26106-1328.

OMB Reviewer: Joseph F. Lackey, Jr., (202) 395-7316, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503.

Lois K. Holland,

Treasury PRA Clearance Officer. [FR Doc. 04-6539 Filed 3-23-04; 8:45 am] BILLING CODE 4810-39-P

DEPARTMENT OF THE TREASURY

Submission for OMB Review: **Comment Request**

March 16, 2004.

The Department of Treasury has submitted the following public information collection requirement(s) to OMB for review and clearance under the Paperwork Reduction Act of 1995, Public Law 104-13. Copies of the submission(s) may be obtained by calling the Treasury Bureau Clearance Officer listed. Comments regarding this information collection should be addressed to the OMB reviewer listed and to the Treasury Department Clearance Officer, Department of the Treasury, Room 11000, 1750

Pennsylvania Avenue, NW., Washington, DC 20220.

DATES: Written comments should be received on or before April 23, 2004, to be assured of consideration.

Internal Revenue Service (IRS)

OMB Number: 1545-0008. Form Number: IRS Forms W-2, W-2c, W-2AS, W-2GU, W2VI, W-3, W-3c, W-3cPR, W-3PR, W-3SS.

Type of Review: Extension.

Title: Wage and Tax Statement (W–2/ W-3 Series).

Description: Employers report income and withholding on Form W–2. Forms W-2AS, W-2GU and W-2VI are the U.S. possessions versions of Form W-2. The Form W-3 series is sued to transmit Forms W–2 to the Social Security Administration (SSA). Forms W-2c, W-3c and W-3cPR are used to correct previously filed Forms W-2, W-3 and W–3PR. Individuals use Form W–2 to prepare their income tax returns.

Respondents: Business or other forprofit, individuals or households, Notfor-profit institutions, farms, Federal government, State, local or tribal

government.

Estimated Number of Respondents: 5,882,789.

Estimated Burden Hours Respondent:

Forms	Hours per response
W–2	30 min.
W–2AS	23 min.

Forms	Hours per response
W-2c	40 min. 25 min. 25 min. 28 min. 1 min. 52 min. 32 min. 27 min. 25 min.

Frequency of Response: Annually. Estimated Total Reporting Burden: 1

OMB Number: 1545-0047. Form Number: IRS Form 990 and

Schedules A and B.

Type of Review: Extension.

Title: Return of Organization Exempt From Income Tax Under section 501©, 527, or 4947(a)(1) of the Internal Revenue Code (Except Black Lung Benefit Trust or Private Foundation).

Description: Form 990 is needed to determine that Internal Revenue Code (IRC) section 601(a) tax-exempt organizations fulfill the operating conditions within the limitations of their tax exemption.

Respondents: Not-for-profit institutions.

Estimated Number of Respondents/ Recordkeepers: 287,769.

Estimated Burden Hours Respondent/ Recordkeeper:

Form	Recordkeeping	Learning about the law or the form	Preparing the form	Copying, assembling, and sending the form to the IRS
990	98 hr., 31 min.	15 hr., 4 min.	21 hr., 4 min.	1 hr., 4 min.
	29 hr., 10 min.	11 hr., 33 min.	14 hr., 14 min.	32 min.
	50 hr., 27 min.	9 hr., 26 min.	10 hr., 40 min.	0 min.
	4 hr., 46 min.	1 hr., 23 min.	1 hr., 31 min.	0 min.

Frequency of Response: Annually. Estimated Total Reporting/ Recordkeeping Burden: 48,166,918 hours.

OMB Number: 1545-0057. Form Number: IRS Form 1024. Type of Review: Extension.

Title: Application for Recognition of Exemption Under Section 501(a).

Description: Organizations seeking exemption from Federal income tax under Internal Revenue Code section 501(a) as an organization described in most paragraphs of section 501(c) must use Form 1024 to apply for exemption. The information collected is used to

determine whether the organization qualifies for tax-exempt status.

Respondents: Not-for-profit institutions.

Estimated Number of Respondents/ Recordkeepers: 4,718.

Estimated Burden Hours Respondent/ Recordkeeper:

Form	Recordkeeping	Learning about the law or the form	Preparing and sending the form to the IRS
1024, Parts I–III	1 hr., 40 min.	2 hr., 17 min. 47 min.	3 hr., 15 min. 51 min.
Schedule A	1 hr., 40 min.	18 min. 18 min. 12 min.	21 min. 20 min. 13 min.
Schedule D	4 hr., 4 min.	18 min. 18 min.	22 min. 20 min.