

requesting funding for the second or third year of a multi-year grant, the clinic must submit the application electronically at [www.grantsolutions.gov](http://www.grantsolutions.gov). All applicants must use the funding number of TREAS–GRANTS–052015–001 and grant applications for the 2015 grant year must be electronically filed by June 20, 2014.

**ADDRESSES:** The LITC Program Office is located at: Internal Revenue Service, Taxpayer Advocate Service, LITC Grant Program Administration Office, TA:LITC, 1111 Constitution Avenue NW., Room 1034, Washington, DC 20224. Copies of the *2015 Grant Application Package and Guidelines*, IRS Publication 3319 (Rev. 4–2014), can be downloaded from the IRS Internet site at [www.irs.gov](http://www.irs.gov) or ordered by calling the IRS Distribution Center at 1–800–829–3676.

**FOR FURTHER INFORMATION CONTACT:** The LITC Program Office at (202) 317–4700 (not a toll-free number) or by email at [LITCProgramOffice@irs.gov](mailto:LITCProgramOffice@irs.gov).

#### **SUPPLEMENTARY INFORMATION:**

##### **Background**

Section 7526 of the Internal Revenue Code authorizes the IRS, subject to the availability of appropriated funds, to award organizations matching grants of up to \$100,000 per year for the development, expansion, or continuation of qualified low income taxpayer clinics. Section 7526 authorizes the IRS to provide grants to qualified organizations that represent low income taxpayers in controversies with the IRS or inform individuals for whom English is a second language of their taxpayer rights and responsibilities, or both. The IRS may award grants to qualifying organizations to fund one-year, two-year, or three-year project periods. Grant funds may be awarded for start-up expenditures incurred by new clinics during the grant year.

##### **Mission Statement**

Low Income Taxpayer Clinics ensure the fairness and integrity of the tax system by educating low income taxpayers about their rights and responsibilities, by providing *pro bono* representation to taxpayers in tax disputes with the IRS, by conducting outreach and education to taxpayers who speak English as a second language, and by identifying and advocating for issues that impact low income taxpayers.

##### **Selection Consideration**

Applications that pass the eligibility screening process will undergo a two-

tier evaluation process. Applications will be subject to both a technical evaluation and a program office evaluation. The final funding decision is made by the National Taxpayer Advocate, unless recused. The costs of preparing and submitting an application are the responsibility of each applicant. Each application will be given due consideration and the LITC Program Office will notify each applicant once funding decisions have been made.

**Nina E. Olson,**

*National Taxpayer Advocate, Internal Revenue Service.*

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**BILLING CODE 4830–01–P**

## **DEPARTMENT OF VETERANS AFFAIRS**

[OMB Control No. 2900–0659]

### **Agency Information Collection (Statement in Support of Claim for Service Connection for PTSD) Under OMB Review**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–3521), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before June 16, 2014.

**ADDRESSES:** Submit written comments on the collection of information through [www.Regulations.gov](http://www.Regulations.gov), or to Office of Information and Regulatory Affairs, Office of Management and Budget, Attn: VA Desk Officer; 725 17th St. NW., Washington, DC 20503 or sent through electronic mail to [oira\\_submission@omb.eop.gov](mailto:oira_submission@omb.eop.gov). Please refer to “OMB Control No. 2900–0659” in any correspondence.

**FOR FURTHER INFORMATION CONTACT:** Crystal Rennie, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 632–7492 or email [crystal.rennie@va.gov](mailto:crystal.rennie@va.gov). Please refer to “OMB Control No. 2900–0659.”

#### **SUPPLEMENTARY INFORMATION:**

##### *Titles:*

a. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD), VA Form 21–0781.

b. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD) Secondary to Personal Assault, VA Form 21–0781a.

*OMB Control Number:* 2900–0659.

*Type of Review:* Revision of a currently approved collection.

*Abstract:* Veterans seeking compensation for post-traumatic stress disorder and need VA’s assistance in obtaining evidence from military records and other sources to substantiate their claims of in-service stressors must complete VA Forms 21–0781 and 21–0781a. Veterans who did not serve in combat or were not a prisoner of war and are claiming compensation for post-traumatic stress disorder due to in-service stressors, he or she must provide credible supporting evidence that the claimed in-service stressor occurred.

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 OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on January 16, 2014, at pages 2941–2942.

*Affected Public:* Individuals or households.

##### *Estimated Annual Burden:*

a. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD), VA Form 21–0781—16,800 hours.

b. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD) Secondary to Personal Assault, VA Form 21–0781a—980 hours.

##### *Estimated Average Burden per Respondent:*

a. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD), VA Form 21–0781—70 minutes.

b. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD) Secondary to Personal Assault, VA Form 21–0781a—70 minutes.

##### *Frequency of Response:* On occasion.

##### *Estimated Number of Respondents:*

a. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD), VA Form 21–0781—14,400.

b. Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD) Secondary to

Personal Assault, VA Form 21-0781a-  
840.

Dated: May 12, 2014.

By direction of the Secretary.

**Crystal Rennie,**

*Department Clearance Officer, Department of  
Veterans Affairs.*

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