

# **SUPPORTING STATEMENT**

## **QUARTERLY CERTIFIED STATEMENT INVOICE FOR DEPOSIT INSURANCE ASSESSMENT (OMB No. 3064-0057)**

### **INTRODUCTION**

The FDIC is requesting OMB approval of the three-year extension, without change, of its collection of information entitled “Quarterly Certified Statement Invoice for Deposit Insurance Assessment” (OMB Control No. 3064-0057) which currently expires on October 31, 2026.

The FDIC collects assessments on a quarterly basis. Each assessment is based on the institution's quarterly report of condition for the prior calendar quarter. The information collection consists of a review by officials of the insured institutions to confirm that the assessment data are accurate and, in cases of inaccuracy, submission of corrected data.

### **A. JUSTIFICATION**

#### **1. Circumstances that make the collection necessary:**

The FDIC collects assessments from insured institutions pursuant to section 7 of the Federal Deposit Insurance Act (“FDI Act”), 12 U.S.C. section 1817(c), to assure that the Deposit Insurance Fund (“DIF”) is adequately capitalized. The Quarterly Certified Statement Invoice provides insured institutions with an accounting of the FDIC’s assessment and collection.

#### **2. Use of the information:**

The information contained in the certification is used exclusively by the FDIC to identify an institution, the amount of the deposit insurance assessment due from that institution for the prior quarter, and to memorialize how the assessment amount was calculated.

#### **3. Consideration of the use of improved information technology:**

Burden-reducing procedures permit the automated invoicing and direct debit of assessments. The Certified Statement contains confidential information relating to the risk classification of the institution. Insured depository institutions access their quarterly certified statement invoices in electronic form via the FDIC’s e-business website *FDICconnect*, a secure channel to the insured institutions. Correct invoices need not be signed or returned to the FDIC. If Internet access poses a hardship to some institutions, an alternative form of access may be provided by the FDIC.

4. **Efforts to identify duplication:**

There is no duplication. The certification is not available in any other form or place.

5. **Methods used to minimize burden if the collection has a significant impact on a substantial number of small entities:**

All insured institutions, large and small, are subject to the same requirements. Therefore, all insured depository institutions, regardless of size, receive and must review and certify a quarterly deposit insurance assessment invoice. There are currently 4,345 insured depository institutions. FDIC estimates that 2,096 of these are small entities which would be a substantial number of small entities. However, the time to respond is estimated to be only 20 minutes per quarter, per respondent. Therefore, this information collection does not have a significant impact on those respondents, and the information collection does not have a significant impact on a substantial number of small entities.

6. **Consequences to the Federal program if the collection were conducted less frequently:**

Less frequent collection would be inconsistent with the statutory requirement for certification of deposit insurance assessments.

7. **Special circumstances necessitating collection inconsistent with 5 CFR Part 1320.5(d)(2):**

None. The information is collected in a manner consistent with 5 CFR 1320.5(d)(2).

8. **Efforts to consult with persons outside the agency:**

The deposit insurance assessment system, including the Certified Statement, was developed through extensive consultation with stakeholders, and established through notice-and-comment rulemaking. The FDIC published a notice in the *Federal Register* seeking comment for a 60-day period on renewal of this information collection on June 4, 2026 (91 FR 33724). No comments were received.

9. **Payment or gifts to respondents:**

None.

10. **Any assurance of confidentiality:**

The risk rate classification of an insured depository institution is confidential. Information is kept private to the extent allowed by law.

**11. Justification for questions of a sensitive nature:**

Not applicable. No sensitive information is collected.

**12. Estimate of hour burden including annualized hourly costs:**

| Summary of Estimated Annual Burden (OMB No. 3064-0057)                                                 |                                        |                       |                                    |                                   |                       |
|--------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------|------------------------------------|-----------------------------------|-----------------------|
| Information Collection (IC) (Obligation to Respond)                                                    | Type of Burden (Frequency of Response) | Number of Respondents | Number of Responses per Respondent | Average Time per Response (HH:MM) | Annual Burden (Hours) |
| 1. Quarterly Certified Statement Invoice for Deposit Insurance Assessment, 12 CFR Part 327 (Mandatory) | Reporting (Quarterly)                  | 4,345                 | 4                                  | 00:20                             | 5,793                 |
| <b>Total Annual Burden (Hours):</b>                                                                    |                                        |                       |                                    |                                   | <b>5,793</b>          |
| Source: FDIC.                                                                                          |                                        |                       |                                    |                                   |                       |

| Summary of Hourly Burden Cost Estimate (OMB No. 3064-0057)                                 |                   |                                                                                                             |                   |                       |               |                        |                    |                                    |
|--------------------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------|-------------------|-----------------------|---------------|------------------------|--------------------|------------------------------------|
| Information Collection (IC) (Obligation to Respond)                                        | Hourly Weight (%) | Percentage Shares of Hours Spent by and Hourly Compensation Rates for each Occupation Group (by Collection) |                   |                       |               |                        |                    | Estimated Hourly Compensation Rate |
|                                                                                            |                   | Exec. & Mgr. (\$158.33)                                                                                     | Lawyer (\$178.57) | Compl. Ofc. (\$80.32) | IT (\$115.86) | Fin. Anlst. (\$100.73) | Clerical (\$42.33) |                                    |
| 1. Quarterly Certified Statement Invoice for Deposit Insurance Assessment, 12 CFR Part 327 | 100.00            | 40                                                                                                          | 0                 | 30                    | 0             | 30                     | 0                  | \$118.77                           |

|                                                   |  |  |  |  |  |  |  |                 |
|---------------------------------------------------|--|--|--|--|--|--|--|-----------------|
| (Mandatory )                                      |  |  |  |  |  |  |  |                 |
| <b>Weighted Average Hourly Compensation Rate:</b> |  |  |  |  |  |  |  | <b>\$118.77</b> |

| Total Estimated Cost Burden (OMB No. 3064-0057)                        |                       |                                           |                        |
|------------------------------------------------------------------------|-----------------------|-------------------------------------------|------------------------|
| Information Collection Request                                         | Annual Burden (Hours) | Weighted Average Hourly Compensation Rate | Annual Respondent Cost |
| Quarterly Certified Statement Invoice for Deposit Insurance Assessment | 5,793                 | \$118.77                                  | \$688,035              |
| <b>Total Annual Respondent Cost:</b>                                   |                       |                                           | <b>\$688,035</b>       |
| Source: FDIC.                                                          |                       |                                           |                        |

13. **Estimate of start-up costs to respondents:**

None.

14. **Estimate of annualized costs to the government:**

None.

15. **Analysis of change in burden:**

There is no change in the substance or methodology of this information collection. Total estimated annual burden decreased 547 hours from 6,340 hours in 2024 to 5,793 currently. The change in burden is due solely to the decrease in the number of IDIs.

16. **Information regarding collections whose results are planned to be published for statistical use:**

The information collected is for internal FDIC use only and is not published. Aggregate assessment information is published in financial reports.

17. **Display of expiration date:**

Not applicable. The FDIC does not seek approval to not display the expiration date for OMB approval for the information collection. The OMB control number and expiration date will be displayed on the Quarterly Certified Statement Invoice for Deposit Insurance Assessment form (FDIC Form 6420/07).

18. **Exceptions to certification:**

None.

**B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS**

Not applicable.