DEPARTMENT OF JUSTICE

Drug Enforcement Administration

[Docket No. DEA–1568A]

Proposed Adjustments to the Aggregate Production Quotas for Schedule I and II Controlled Substances and Assessment of Annual Needs for the List I Chemicals Ephedrine, Pseudoephedrine, and Phenylpropanolamine for 2026

AGENCY: Drug Enforcement Administration, Department of Justice.

ACTION: Notice with request for comments.

SUMMARY: The Drug Enforcement Administration (DEA) proposes to adjust the 2026 aggregate production quotas for several controlled substances in schedules I and II of the Controlled Substances Act and the assessment of annual needs for the list I chemical phenylpropanolamine.

DATES: Interested persons may file written comments on this notice in accordance with 21 CFR 1303.13(c) and 1315.13(d). Electronic comments must be submitted, and written comments must be postmarked, on or before December 28, 2026. Commenters should be aware that the electronic Federal Docket Management System will not accept comments after 11:59 p.m. Eastern Time on the last day of the comment period.

Based on comments received in response to this notice, the Administrator may hold a public hearing on one or more issues raised. In the event the Administrator decides in his sole discretion to hold such a hearing, the Administrator will publish a notice of any such hearing in the **Federal Register**. After consideration of any comments or objections, or after a hearing, if one is held, the Administrator will publish in the **Federal Register** a final order establishing the 2026 adjusted aggregate production quotas for schedule I and II controlled substances, and an adjusted assessment of annual needs for the list I chemicals ephedrine, pseudoephedrine, and phenylpropanolamine, as relevant.

ADDRESSES: To ensure proper handling of comments, please reference ''Docket No. DEA–1568A'' on all correspondence, including any attachments. DEA encourages that all comments be submitted electronically through the Federal eRulemaking Portal, which provides the ability to type short comments directly into the comment field on the web page or attach a file for lengthier comments. Please go to *www.regulations.gov* and follow the online instructions at that site for submitting comments. Upon completion of your submission, you will receive a Comment Tracking Number for your comment. Please be aware that submitted comments are not instantaneously available for public view on *www.Regulations.gov.* If you have received a Comment Tracking Number, your comment has been successfully submitted and there is no need to resubmit the same comment. Paper comments that duplicate electronic submissions are not necessary and are discouraged. Should you wish to mail a paper comment *in lieu of* an electronic comment, it should be sent via regular or express mail to: Drug Enforcement Administration, Attention: DEA Federal Register Representative/DPW, 8701 Morrissette Drive, Springfield, Virginia 22152.

FOR FURTHER INFORMATION CONTACT: Heather E. Achbach, Regulatory Drafting and Policy Support Section, Diversion Control Division, Drug Enforcement Administration; Mailing Address: 8701 Morrissette Drive, Springfield, Virginia 22152, Telephone: 571–776–3882.

SUPPLEMENTARY INFORMATION:

Posting of Public Comments

Please note that all comments received in response to this docket are considered part of the public record. They will, unless reasonable cause is given, be made available by the Drug Enforcement Administration (DEA) for public inspection online at *www.regulations.gov.* Such information includes personal identifying information (such as your name, address, etc.) voluntarily submitted by the commenter.

The Freedom of Information Act applies to all comments received. If you want to submit personal identifying information (such as your name, address, etc.) as part of your comment, but do not want it to be made publicly available, you must include the phrase ''PERSONAL IDENTIFYING INFORMATION'' in the first paragraph of your comment. You must also place all the personal identifying information you do not want made publicly available in the first paragraph of your comment and identify what information you want redacted.

If you want to submit confidential business information as part of your comment, but do not want it to be made publicly available, you must include the phrase ''CONFIDENTIAL BUSINESS INFORMATION'' in the first paragraph of your comment. You must also prominently identify confidential business information to be redacted within the comment.

Comments containing personal identifying information or confidential business information identified and located as directed above will generally be made available in redacted form. If a comment contains so much confidential business information or personal identifying information that it cannot be effectively redacted, all or part of that comment may not be made publicly available. Comments posted to *www.regulations.gov* may include any personal identifying information (such as name, address, and phone number) included in the text of your electronic submission that is not identified as directed above as confidential.

An electronic copy of this document is available at *www.regulations.gov* for easy reference.

Legal Authority and Background

Section 306 of the Controlled Substances Act (CSA) (21 U.S.C. 826) requires the Attorney General to establish aggregate production quotas (APQ) for each basic class of controlled substance listed in schedules I and II and for the list I chemicals ephedrine, pseudoephedrine, and phenylpropanolamine. The Attorney General has delegated this function to the Administrator of DEA pursuant to 28 CFR 0.100.

DEA established the 2026 APQ for substances in schedules I and II and the assessment of annual needs (AAN) for the list I chemicals ephedrine, pseudoephedrine, and phenylpropanolamine on January 5, 2026.[1] That order stipulated that, in accordance with 21 CFR 1303.13 and 1315.13, all APQ and AAN are subject to adjustment.

Analysis for Proposed Adjusted 2026 Aggregate Production Quotas and Assessment of Annual Needs

DEA proposes to adjust the established 2026 APQ for certain schedule I and II controlled substances and the AAN for certain list I chemicals to be manufactured in the United States in 2026 to provide for the estimated medical, scientific, research, and industrial needs of the United States, for lawful export requirements, and for the establishment and maintenance of reserve stocks. These quotas do not include imports of controlled substances for use in industrial processes.

[1] 91 FR 287.

Factors for Determining the Proposed Adjustments

In determining the proposed adjustments, the Administrator has taken into account the factors in 21 CFR 1303.13 (adjustment of APQ for controlled substances) and 21 CFR 1315.13 (adjustment of the AAN for ephedrine, pseudoephedrine, and phenylpropanolamine). The Administrator is authorized to increase or reduce the APQ and the AAN at any time.[2]

DEA determined whether to propose an adjustment of the APQ for 2026 by considering the factors found at 21 CFR 1303.13(b):

(1) Changes in the demand for that class, changes in the national rate of net disposal of the class, changes in the rate of net disposal of the class by registrants holding individual manufacturing quotas for that class, and changes in the extent of any diversion in the class;

(2) Whether any increased demand for that class, the national and/or individual rates of net disposal of that class are temporary, short term, or long term;

(3) Whether any increased demand for that class can be met through existing inventories, increased individual manufacturing quotas, or increased importation, without increasing the aggregate production quota, taking into account production delays and the probability that other individual manufacturing quotas may be suspended pursuant to [21 CFR] 1303.24(b);

(4) Whether any decreased demand for that class will result in excessive inventory accumulation by all persons registered to handle that class (including manufacturers, distributors, practitioners, importers, and exporters), notwithstanding the possibility that individual manufacturing quotas may be suspended pursuant to [21 CFR] 1303.24(b) or abandoned pursuant to [21 CFR] 1303.27;

(5) Other factors affecting medical, scientific, research, and industrial needs in the United States and lawful export requirements, as the Administrator finds relevant, including changes in the currently accepted medical use in treatment with the class or the substances which are manufactured from it, the economic and physical availability of raw materials for use in manufacturing and for inventory purposes, yield and stability problems, potential disruptions to production (including possible labor strikes), and recent unforeseen emergencies such as floods and fires.

DEA also considered updated information obtained from 2025 year-end inventories, 2025 disposition data submitted by quota applicants, changes in estimates of the medical needs of the United States, export requirements, and other information made available to DEA after the initial APQ and AAN had been established. Additional factors the Administrator considered in calculating the APQ, but not the AAN, include product development requirements of both bulk and finished dosage form manufacturers.

After considering the changes in the extent of diversion of all controlled substances, as required by 21 CFR 1303.13(b)(1), DEA has determined that any changes from the initial calculations for all substances other than fentanyl are slight and not significantly different from the estimates of diversion that DEA applied to the initial APQ valuations.

DEA determined whether to propose an adjustment of the AAN for 2026 by considering the factors found at 21 CFR 1315.13(b) and summarized below:

(1) Changes in the demand for that chemical, changes in the national rate of net disposal of the chemical, and changes in the rate of net disposal of the chemical by registrants holding individual manufacturing or import quotas for that chemical;

(2) Whether any increased demand for that chemical, the national and/or changes in individual rates of net disposal of that chemical are temporary, short term, or long term;

(3) Whether any increased demand for that chemical can be met through existing inventories, increased individual manufacturing quotas, or increased importation, without increasing the assessment of annual needs, taking into account production delays and the probability that other individual manufacturing quotas may be suspended pursuant to [21 CFR] 1315.24(b);

(4) Whether any decreased demand for that chemical will result in excessive inventory accumulation by all persons registered to handle that chemical (including manufacturers, distributors, importers, and exporters), notwithstanding the possibility that individual manufacturing quotas may be suspended pursuant to [21 CFR] 1315.24(b) or abandoned pursuant to [21 CFR] 1315.27;

(5) Other factors affecting medical, scientific, research, industrial, and importation needs in the United States, lawful export requirements, and reserve stocks, as the Administrator finds relevant, including changes in the currently accepted medical use in treatment with the chemical or the substances that are manufactured from it, the economic and physical availability of raw materials for use in manufacturing and for inventory purposes, yield and stability problems, potential disruptions to production (including possible labor strikes), and recent unforeseen emergencies such as floods and fires.

In evaluating whether there is a need for adjustment of the 2026 AAN for list I chemicals, DEA used the calculation methodology previously described in the 2010 and 2011 AAN.[3] DEA considered the total net disposals of the list I chemicals for the current and preceding two years, actual and estimated inventories, projected demand, industrial use, and export requirements from data provided by DEA registered manufacturers and importers on the relevant quota application forms.[4]

Additional Considerations Applicable to Covered Controlled Substances

When setting APQ, the Administrator must estimate the amount of diversion of any substance that is considered a ''covered controlled substance.'' [5] The covered controlled substances are fentanyl, oxycodone, hydrocodone, oxymorphone, and hydromorphone.[6] DEA is required to ''make appropriate quota reductions, as determined by the [Administrator], from the quota the [Administrator] would have otherwise established had such diversion not been considered.'' [7] When estimating diversion, the Administrator ''shall consider information'' that he, in consultation with the Secretary of Health and Human Services (HHS), ''determines reliable on rates of overdose deaths and abuse and overall public health impact related to the covered controlled substance in the United States;'' and ''may take into consideration'' whatever other sources of information he determines reliable.[8]

DEA solicited information from the Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDC), and the states in March and April 2026 on trends in the legitimate domestic use of select schedule I and II controlled substances and on trends in overdose death and overprescribing data that could be considered in estimating diversion of the covered controlled substances. DEA received information from the FDA in July 2026, the CDC in May 2026, and received Prescription Data Monitoring Program (PDMP) data from the states from April through June 2026. DEA considered this information in revising the APQs and developing the estimates of diversion for the five covered controlled substances for this proposed adjustment.

DEA also aggregated data for each covered controlled substance from Drug Theft and Loss Reports to determine the estimates of diversion. DEA gathered data involving employee theft, break-ins, armed robberies, and material lost in transit. DEA calculated the metric weight in grams of each active

[2] 21 CFR 1303.13(a), 1315.13(a).

[3] 74 FR 60294 (Nov. 20, 2009); 75 FR 79407 (Dec. 20, 2010).

[4] *Id.*

[5] 21 U.S.C. 826(i)(1)(A).

[6] 21 U.S.C. 826(i)(1).

[7] All functions vested in the Attorney General by the CSA have been delegated to the Administrator of DEA. 28 CFR 0.100(b); 21 U.S.C. 826(i)(1)(C).

[8] 21 U.S.C. 826(i)(1)(B).

pharmaceutical ingredient (API) of the controlled substances being diverted as identified in these reports. In calculating the estimates of diversion, DEA utilized the same methodology as published in the Proposed Aggregate Production Quotas for Schedule I and II Controlled Substances and Assessment of Annual Needs for the List I Chemicals Ephedrine, Pseudoephedrine, and Phenylpropanolamine for 2026.[9] Below, DEA provides an updated chart showing estimations of diversion for each of the covered controlled substances.

DIVERSION ESTIMATES FOR 2026 (g)

Fentanyl	196
Hydrocodone	140,766
Hydromorphone	1,051
Oxycodone	330,028
Oxymorphone	98

Proposed Adjustments for the 2026 Aggregate Production Quotas

DEA is proposing an increase to the APQ for schedule I substance betamethadol to support the manufacture of analytical standards for use in analytical testing in laboratories. Additionally, DEA is proposing an increase to the APQ for schedule I substances 3,4-methylenedioxy-N-methylcathinone, psilocybin, and psilocyn based on increased manufacturer interest in dosage form development for clinical trials in response to Executive Order 14401, which established a policy of accelerating innovative research models and appropriate drug approvals of new psychedelic-based treatments for serious mental illnesses that persist after standard therapy.[10]

DEA is proposing an increase to the APQ for schedule II substances d,l-amphetamine and d-amphetamine (for sale). DEA reviewed the data provided by FDA on the domestic medical use of d,l-amphetamine and d-amphetamine. FDA predicted the domestic medical need for d,l-amphetamine and d-amphetamine will increase by 23.6 percent and 23.7 percent respectively when compared to their 2025 observed domestic medical need. DEA also reviewed the global sales data from Multi Internal Data Analysis System (MIDAS). Extrapolation of the global sales of d,l-amphetamine and d-amphetamine predicts an increase of 4.36 percent and 4.07 percent respectively from 2025. While sufficient quota was granted to meet legitimate global sales, it may be insufficient to allow for adequate reserve stocks to start the next calendar year.

DEA also received additional quota requests for product development activities by bulk and dosage form manufacturers of d,l-amphetamine and d-amphetamine (for sale) to synthesize engineering and validation batches to support the filing of new drug applications for FDA review. Year-to-date amounts approved for product development by bulk and dosage manufacturers have increased 173 percent for d,l-amphetamine and 32 percent for d-amphetamine (for sale) when compared to 2025, respectively. After considering all the data from FDA, DEA, and manufacturers regarding product development needs, DEA has determined that it is necessary to propose an increase to the 2026 d,l-amphetamine and d-amphetamine (for sale) APQs for the maintenance of reserve stocks and increased product development needs.

DEA is proposing an increase to the APQ for schedule II substance hydromorphone due to an increase in domestic medical need and exports. DEA reviewed the most recent domestic usage data from IQVIA, as well as data provided by the FDA on the domestic medical use of hydromorphone. FDA predicted the domestic medical need for hydromorphone in 2026 will increase by 20.9 percent compared to the 2025 observed medical need. DEA also reviewed export information provided by bulk manufacturers, export data from DEA's internal database, and global sales data from MIDAS. Export data shows that exports will increase 142% when compared to 2025 because one bulk manufacturer is planning to significantly increase their export of API in 2026. In determining the proposed adjusted APQ, DEA made the appropriate quota reductions pursuant to the updated estimate of the amount of diversion of hydromorphone that occurs in the United States, provided above.

DEA is proposing an increase to the APQ for schedule II substance lisdexamfetamine due to rising global demand for drug products containing this substance. DEA reviewed export data from DEA's internal database and global sales data from MIDAS. Extrapolation of the data predicts global consumption will increase by 19.2 percent when compared to 2025. This increase is due to the expanded approval of the brand name product, Vyvanse, in additional countries since 2025. Additionally, U.S. bulk manufacturers and dosage form manufacturers which support generic versions of Vyvanse have already begun exporting lisdexamfetamine API and finished dosage-form products according to the data extracted from DEA's internal databases. Extrapolation utilizing previous years' reported data suggests the export requirements for lisdexamfetamine API and finished dosages will likely continue to increase in 2026 and beyond. An increase in domestic manufacturing of the API and finished dosages is necessary to supply lisdexamfetamine products to both the domestic and foreign markets.

As a result of the increase to the APQ of lisdexamfetamine, DEA must make a corresponding increase to the APQ of d-amphetamine (for conversion) because this substance is used by some manufacturers as part of the synthesis pathway to manufacture lisdexamfetamine products. Without this corresponding increase, manufacturers of lisdexamfetamine API would not be able to utilize the entire amount of the increased lisdexamfetamine APQ.

DEA is proposing an increase to the APQ for schedule II substance methylphenidate (for sale) due to decreased global reserve stocks and the growth of global medical demands. DEA reviewed the methylphenidate export data from DEA's internal database, as well as global sales data from MIDAS. Data shows that 2025 methylphenidate exports from the United States increased 17.3% from 2024. Additionally, extrapolation of the sales data from MIDAS predicts global consumption will increase by 8.01 percent for methylphenidate drug products in 2026 when compared to 2025.

DEA also reviewed global production and consumption data of methylphenidate published in the 2025 Psychotropic Technical Report by the International Narcotics Control Board (INCB).[11] The INCB stated that methylphenidate is the most manufactured and traded substance among the scheduled II stimulants, with 111 countries and territories reporting imports in 2024. The INCB reported the United States as the leading manufacturer and noted increasing exports of methylphenidate from the country to others. Although the total manufacturing of methylphenidate was reported to be at the highest level since INCB began receiving data, the global stocks of methylphenidate decreased by 11 tons, from 91.6 tons in 2023 to 80.6 tons in 2024. After considering all the

[9] 90 FR 54745 (November 28, 2025).

[10] Accelerating Medical Treatments for Serious Mental Illness, Executive Order 14401 (April 18, 2026), 91 FR 21709.

[11] INCB Psychotropics—Technical Report Psychotropic Substances 2025, Statistics for 2024, Assessments of Annual Medical Scientific Requirements for Substances for 2026.

data from FDA, DEA, and INCB, DEA has determined that it is necessary to propose an increase to the 2026 methylphenidate APQ to allow for the adjustment of reserve stocks to support the increase in global medical demand.

DEA is proposing an increase to the remifentanil APQ to support increasing domestic medical use and exports. Remifentanil is a schedule II synthetic opioid analgesic that is primarily administered intravenously to manage pain during and after surgical procedures. DEA reviewed the data provided by FDA, the most recent domestic usage data from IQVIA and export data from DEA's internal database. FDA projected a 27.0 percent increase in domestic medical usage of remifentanil in 2026 compared with 2025 and exports of this API showed an upward trend from 2023 to 2025.

DEA is proposing to decrease the APQ of fentanyl based on adjustments to the national diversion estimates for calendar year 2026. Revisions of the APQs for hydrocodone, oxycodone, hydrophone and oxymorphone, the four other covered controlled substances defined in 21 U.S.C. 826(i)(1)(A), are unnecessary because the updated diversion estimates are less than, or within one gram of, the previously published national diversion estimates for 2026.

On January 20, 2026, DEA published a final rule to amend its regulation pertaining to ''cannabimimetic agents.'' [12] DEA consolidated 13 of 15 existing drug codes and 18 additional substances meeting the definition of cannabimimetic agents under drug code 7000, except for JWH–018 and AM2201, which retained their existing drug codes and APQs to facilitate quota and international reporting requirements. The 18 additional substances that meet the structural and pharmacological definition of cannabimimetic agents are: AM–1220; AM–2233; EAM–2201; JWH–098; JWH–184; JWH–193; JWH–210; MAM–2201; JWH–007; JWH–022; JWH–147; JWH–302; JWH–307; JWH–412; WIN 55,212–2; CP–55,940; CP–47,497 C6 homolog; and CP–47,497 C9 homolog. That final rule did not change the current and continuing schedule I status for substances meeting the definition of cannabimimetic agents. DEA is proposing to establish an APQ value for cannabimimetic agents pursuant to 21 U.S.C. 826 and 21 CFR part 1303.

Subsequent to establishing the 2026 APQ, DEA published in the **Federal Register** separate scheduling orders to place 4-fluoroamphetamine and 3-methoxyphencyclidine in schedule I of the CSA.[13] DEA also published temporary scheduling orders to place bromazolam and 2-fluorodeschloroketamine in schedule I of the CSA until March 16, 2028, and May 22, 2028, respectively, or until a permanent scheduling action of these substances is complete, whichever occurs first.[14] Finally, for administrative purposes, DEA established a specific listing for hexahydrocannabinol in schedule I of the CSA and assigned a unique DEA drug code for this substance.[15] This action allows DEA to establish an APQ and grant individual manufacturing and procurement quotas to DEA-registered manufacturers of hexahydrocannabinol, who had previously been granted individual quotas for such purposes under the drug code for tetrahydrocannabinols.

These substances are subject to schedule I controls under the CSA, and DEA is proposing to assign individual APQ values for each of these substances pursuant to 21 U.S.C. 826 and 21 CFR part 1303.

Medical Marijuana

On April 28, 2026, the Acting Attorney General issued *Schedules of Controlled Substances: Rescheduling of Food and Drug Administration Approved Products Containing Marijuana From Schedule I to Schedule III; Corresponding Change to Permit Requirements* as a final rule which became effective the same day.[16] This final rule places in schedule III and assigns separate drug codes for marijuana in an FDA-approved product or subject to a state medical marijuana license, marijuana extract in an FDA-approved product or subject to a state medical marijuana license, and naturally-derived delta-9-tetrahydrocannabinols in an FDA-approved product or subject to a state medical marijuana license (drug codes 7362, 7353, 7386). FDA approves products under the authority granted by the Federal Food, Drug, and Cosmetic Act. Additional information about FDA-approved products can be found on FDA's website.[17]

The final rule outlines several control measures required to satisfy the United States obligations under the Single Convention on Narcotic Drugs, 1961, as well as the CSA. Two related control measures of the Single Convention require: (1) manufacturers and distributors of drugs listed in Schedule I of the Convention, including marijuana, to be licensed (Articles 29 & 30); and (2) licensed manufacturers of drugs listed in Schedule I of the Convention obtain quotas specifying the amounts of such drugs they may manufacture to prevent excessive production and accumulation beyond that necessary to satisfy legitimate needs. (Articles 21 & 29). DEA is currently in the process of registering the manufacturers and distributors who will be handling the substances that have been moved to schedule III under the CSA as outlined in the final rule. Concurrently, DEA is assessing data sources and methodologies to determine the most reliable and relevant datasets for the estimation of the United States' legitimate need and production requirements for these 3 substances. A separate notice will be published in the **Federal Register** once the proposed APQs for the schedule III substances (drug codes 7362, 7353, 7386) are determined.

As specified in the final rule, ''any form of marijuana other than in an FDA-approved drug product or marijuana subject to a state medical marijuana license remains a schedule I controlled substance.'' [18] Corresponding APQs for schedule I marijuana, marijuana extract, and delta-9-tetrahydrocananbinol (drug codes 7360, 7350, 7370) are reflected in the table below.

Proposed Adjustments for the 2026 Assessment of Annual Needs

As a result of the proposed increase to the d,l-amphetamine, d-amphetamine (for sale) and lisdexamfetamine APQs, the phenylpropanolamine (for conversion) AAN also needs to be correspondingly adjusted because one bulk manufacturer imports phenylpropanolamine as starting material to synthesize d,l-amphetamine, d-amphetamine (for sale) and lisdexamfetamine.

The Administrator, therefore, proposes to adjust the 2026 APQ for the schedule I and II controlled substances 2-fluorodeschloroketamine, 3,4-methylenedioxy-N-methylcathinone, 3-methoxyphencyclidine, betamethadol, bromazolam, cannabimimetic agents, 4-fluoroamphetamine, d,l-amphetamine, d-amphetamine (for conversion), d-amphetamine (for sale), fentanyl, hexahydrocannabinol, hydromorphone,

[12] 91 FR 2297 (January 20, 2026).

[13] 91 FR 1692 (January 15, 2026) and 91 FR 13733 (March 23, 2026).

[14] 91 FR 12504 (March 16, 2026) and 91 FR 30204 (May 22, 2026).

[15] 91 FR 23913 (May 4, 2026).

[16] 91 FR 22714 (April 28, 2026).

[17] *See, e.g.,* FDA Regulation of Cannabis and Cannabis-Derived Products, Including Cannabidiol (CBD), *https://www.fda.gov/news-events/public-health-focus/fda-regulation-cannabis-and-cannabis-derived-products-including-cannabidiol-cbd-approved.*

[18] 91 FR at 22719.

lisdexamfetamine, methylphenidate (for sale), psilocybin, psilocyn, and remifentanil. Additionally, the Administrator proposes to adjust the 2026 AAN for the list I chemical phenylpropanolamine (for conversion).

The proposed adjusted APQ and AAN, as expressed in grams of anhydrous acid or base, are as follows:

Basic class	2026 Established quotas (g)	Proposed revised 2026 quotas (g)
Temporary Controlled Schedule I Substances		
2-Fluorodeschloroketamine	N/A	30.
Bromazolam	N/A	30.
5-Methyl Etodesnitazene	30	no change.
Ethyleneoxynitazene	30	no change.
Methylenedioxynitazene	30	no change.
N,N-Dimethylamino Etonitazene	30	no change.
N-Desethyl Etonitazene	30	no change.
N-Desethyl Protonitazene	30	no change.
N-Pyrrolidino Isotonitazene	30	no change.
Schedule I		
1-[1-(2-Thienyl)cyclohexyl]pyrrolidine	20	no change.
1-(1-Phenylcyclohexyl)pyrrolidine	30	no change.
1-(2-Phenylethyl)-4-phenyl-4-acetoxypiperidine	10	no change.
1-(4-Methoxyphenyl)-N-methylpropan-2-amine (Para-methoxymethamphetamine)	30	no change.
1-(5-Fluoropentyl)-3-(1-naphthoyl) indole (AM2201)	30	no change.
1-(5-Fluoropentyl)-3-(2-iodobenzoyl) indole (AM694)	30	Consolidated into Cannabimimetic Agents.
1-Benzylpiperazine	25	no change.
1-Methyl-4-phenyl-4-propionoxypiperidine	10	no change.
1-[1-(2-Thienyl)cyclohexyl]piperidine	15	no change.
2′-Fluoro 2-fluorofentanyl	30	no change.
2,5-Dimethoxy-4-Ethylamphetamine (DOET)	25	no change.
2,5-Dimethoxy-4-(n)-Propylthiophenethylamine	25	no change.
2,5-Dimethoxyamphetamine	25	no change.
2-(2,5-Dimethoxy-4-(n)-propylphenyl)ethanamine (2C-P)	30	no change.
2-(2,5-Dimethoxy-4-ethylphenyl)ethanamine (2C-E)	30	no change.
2-(2,5-Dimethoxy-4-methylphenyl)ethanamine (2C-D)	30	no change.
2-(2,5-Dimethoxy-4-nitro-phenyl)ethanamine (2C-N)	30	no change.
2-(2,5-Dimethoxyphenyl)ethanamine (2C-H)	100	no change.
2-(4-Bromo-2,5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine (25B-NBOMe; 2C-B-NBOMe; 25B; Cimbi-36)	30	no change.
2-(4-Chloro-2,5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine (25C-NBOMe; 2C-C-NBOMe; 25C; Cimbi-82)	25	no change.
2-(4-Chloro-2,5-dimethoxyphenyl)ethanamine (2C-C)	30	no change.
2-(4-Ethoxybenzyl)-5-Nitro-1-(2-(Piperidin-1-yl)Ethyl)-1H-Benzimidazole (N-Piperidinyl Etonitazene)	30	no change.
2-(4-Iodo-2,5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine (25I-NBOMe; 2C-I-NBOMe; 25I; Cimbi-5)	30	no change.
2-(4-Iodo-2,5-dimethoxyphenyl)ethanamine (2C-I)	30	no change.
2-(Ethylamino)-2-(3-Methoxyphenyl)Cyclohexan-1-One (Methoxetamine)	30	no change.
2-Methyl AP-237	30	no change.
2-[4-(Ethylthio)-2,5-dimethoxyphenyl]ethanamine (2C-T-2)	30	no change.
2-[4-(Isopropylthio)-2,5-dimethoxyphenyl]ethanamine (2C-T-4)	30	no change.
3,4,5-Trimethoxyamphetamine	30	no change.
3,4-Methylenedioxyamphetamine (MDA)	12,000	no change.
3,4-Methylenedioxy-N-ethylamphetamine (MDEA)	40	no change.
3,4-Methylenedioxy-N-methylcathinone (methylone)	30,000	42,500.
3,4-Methylenedioxymethamphetamine (MDMA)	12,000	no change.
3,4-Methylenedioxypyrovalerone (MDPV)	35	no change.
3-FMC; 3-Fluoro-N-methylcathinone	25	no change.
3-Methoxyphencyclidine (1-(1-(3-Methoxyphenyl)cyclohexyl)piperidine)	N/A	30.
3-Methylfentanyl	30	no change.
3-Methylthiofentanyl	30	no change.
3-Methylmethcathinone	30	no change.
4′-Methyl acetyl fentanyl	30	no change.
4′-Methyl-alpha-pyrrolidinohexiophenone (MPHP)	25	no change.
4,4′-Dimethylaminorex	30	no change.
4-Bromo-2,5-dimethoxyamphetamine (DOB)	30	no change.
4-Bromo-2,5-dimethoxyphenethylamine (2-CB)	5,100	no change.
4-Chloro-alpha-pyrrolidinovalerophenone (4-chloro-alpha-PVP)	25	no change.
4-Chloromethcathinone	30	no change.
4-CN-Cumyl-Butinaca	25	no change.
4-Fluoroamphetamine	N/A	30.
4-Fluoroisobutyryl fentanyl	30	no change.
4-FMC; Flephedrone	25	no change.
4-MEC; 4-Methyl-N-ethylcathinone	25	no change.
4-Methoxyamphetamine	150	no change.
4-Methyl-2,5-dimethoxyamphetamine (DOM)	25	no change.
4-Methyl-alpha-ethylaminopentiophenone (4-MEAP)	25	no change.
4-Methyl-alpha-pyrrolidinopropiophenone (4-MePPP)	25	no change.
4-Methyl-N-methylcathinone (mephedrone)	45	no change.
4-Methylaminorex	25	no change.
4F-MDMB-BUTICA	30	no change.
5-(1,1-Dimethylheptyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol	50	Consolidated into Cannabimimetic Agents.
5-(1,1-Dimethyloctyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol (cannabicyclohexanol or CP-47,497 C8-homolog)	40	Consolidated into Cannabimimetic Agents.

Basic class	2026 Established quotas (g)	Proposed revised 2026 quotas (g)
5-Fluoro-PB-22; 5F-PB-22	25	no change.
5-Fluoro-UR144, XLR11 ([1-(5-fluoro-pentyl)-1Hindol-3-yl](2,2,3,3-tetramethylcyclopropyl)methanone	25	no change.
5-Methoxy-3,4-methylenedioxyamphetamine	25	no change.
5-Methoxy-N,N-diisopropyltryptamine	25	no change.
5-Methoxy-N,N-dimethyltryptamine	30,000	no change.
5F-AB-PINACA; (1-Amino-3-methyl-1-oxobutan-2-yl)-1-(5-fluoropentyl)-1H-indazole-3-carboxamide	25	no change.
5F-ADB; 5F-MDMB-PINACA (methyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate)	25	no change.
5F-AMB (methyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3-methylbutanoate)	25	no change.
5F-APINACA; 5F-AKB48 (N-(adamantan-1-yl)-1-(5-fluoropentyl)-1H-indazole-3-carboxamide)	25	no change.
5F-CUMYL-P7AICA; 1-(5-Fluoropentyl)-N-(2-phenylpropan-2-yl)-1H-pyrrolo[2,3-b]pyridine-3carboximide	25	no change.
5F-CUMYL-PINACA	25	no change.
5F-EDMB-PICA	30	no change.
5F-EDMB-PINACA	25	no change.
5F-MDMB-PICA	25	no change.
A-PIHP; 4-methyl-1-phenyl-2-(pyrrolidin-1-yl)pentan-1-one (alpha-PiHP)	30	no change.
AB-CHMINACA	30	no change.
AB-FUBINACA	50	no change.
AB-PINACA	30	no change.
Acetorphine	25	no change.
Acetyl Fentanyl	100	no change.
Acetyl-alpha-methylfentanyl	30	no change.
Acetyldihydrocodeine	30	no change.
Acetylmethadol	25	no change.
Acryl Fentanyl	25	no change.
ADB-4en-PINACA	30	no change.
ADB-BUTINACA	30	no change.
ADB-FUBINACA (N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-(4-fluorobenzyl)-1H-indazole-3-carboxamide)	30	no change.
ADB-PINACA (N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-pentyl-1H-indazole-3-carboxamide)	50	no change.
AH-7921	30	no change.
All other tetrahydrocannabinol	1,166,130	no change.
Allylprodine	25	no change.
alpha-Ethyltryptamine	25	no change.
alpha-Methylfentanyl	30	no change.
alpha-Methylthiofentanyl	30	no change.
alpha-Methyltryptamine (AMT)	25	no change.
alpha-Pyrrolidinobutiophenone (α-PBP)	25	no change.
alpha-pyrrolidinoheptaphenone (PV8)	25	no change.
alpha-pyrrolidinohexabophenone (alpha-PHP)	25	no change.
alpha-Pyrrolidinopentiophenone (α-PVP)	25	no change.
Alphacetylmethadol	25	no change.
Alphameprodine	25	no change.
Alphamethadol	25	no change.
Amineptine	30	no change.
Aminorex	25	no change.
Anileridine	20	no change.
APINCA, AKB48 (N-(1-adamantyl)-1-pentyl-1H-indazole-3-carboxamide)	25	no change.
Benzethidine	25	no change.
Benzylmorphine	30	no change.
beta-Hydroxy-3-methylfentanyl	30	no change.
beta-Hydroxyfentanyl	30	no change.
beta-Hydroxythiofentanyl	30	no change.
beta-Methyl fentanyl	30	no change.
beta-Methylacetyl Fentanyl	30	no change.
beta′-Phenyl fentanyl	30	no change.
Betacetylmethadol	25	no change.
Betameprodine	25	no change.
Betamethadol	4	25.
Betaprodine	25	no change.
Brorphine	30	no change.
Bufotenine	15	no change.
Butonitazene	30	no change.
Butylone	25	no change.
Butyryl fentanyl	30	no change.
Cathinone	40	no change.
Cannabimimetic Agents	N/A	620.
Clonazolam	30	no change.
Clonitazene	25	no change.
Codeine methylbromide	30	no change.
Codeine-N-oxide	192	no change.
Crotonyl Fentanyl	25	no change.
CUMYL-PEGACLONE	30	no change.
Cyclopentyl Fentanyl	30	no change.
Cyclopropyl Fentanyl	20	no change.
Cyprenorphine	25	no change.
delta-9-Tetrahydrocannabinol	1,523,040	no change.
Desomorphine	25	no change.
Dextromoramide	25	no change.
Diapromide	20	no change.
Diclazepam	30	no change.
Diethylthiambutene	20	no change.
Diethyltryptamine	25	no change.

Basic class	2026 Established quotas (g)	Proposed revised 2026 quotas (g)
Difenoxin	9,300	no change.
Dihydromorphine	639,954	no change.
Dimenoxadol	25	no change.
Dimepheptanol	25	no change.
Dimethylthiambutene	20	no change.
Dimethyltryptamine	25,000	no change.
Dioxyaphetyl butyrate	25	no change.
Dipentylone	30	no change.
Dipipanone	25	no change.
Drotebanol	25	no change.
Ethylmethylthiambutene	25	no change.
Ethylone	25	no change.
Ethylphenidate	30	no change.
Etizolam	30	no change.
Etodesnitazene	30	no change.
Etonitazene	25	no change.
Etorphine	30	no change.
Etoxeridine	25	no change.
Eutylone	30	no change.
Fenethylline	30	no change.
Fentanyl carbamate	30	no change.
Fentanyl related substances	600	no change.
Flualprazolam	30	no change.
Flubromazolam	30	no change.
Flunitazene	30	no change.
FUB-144	25	no change.
FUB-AKB48	25	no change.
FUB-AMB, MMB-Fubinaca, AMB-Fubinaca	25	no change.
Furanyl fentanyl	30	no change.
Furethidine	25	no change.
gamma-Hydroxybutyric acid	49,675,266	no change.
Heroin	150	no change.
Hexahydrocannabinol	N/A	30.
Hydromorphinol	40	no change.
Hydroxypethidine	25	no change.
Ibogaine	210	no change.
Isobutyryl Fentanyl	25	no change.
Isotonitazine	25	no change.
JWH-018 and AM678 (1-Pentyl-3-(1-naphthoyl)indole)	35	no change.
JWH-019 (1-Hexyl-3-(1-naphthoyl)indole)	45	Consolidated into Cannabimimetic Agents.
JWH-073 (1-Butyl-3-(1-naphthoyl)indole)	45	Consolidated into Cannabimimetic Agents.
JWH-081 (1-Pentyl-3-[1-(4-methoxynaphthoyl)]indole)	30	Consolidated into Cannabimimetic Agents.
JWH-122 (1-Pentyl-3-(4-methyl-1-naphthoyl)indole)	30	Consolidated into Cannabimimetic Agents.
JWH-200 (1-[2-(4-Morpholinyl)ethyl]-3-(1-naphthoyl)indole)	35	Consolidated into Cannabimimetic Agents.
JWH-203 (1-Pentyl-3-(2-chlorophenylacetyl)indole)	30	Consolidated into Cannabimimetic Agents.
JWH-250 (1-Pentyl-3-(2-methoxyphenylacetyl)indole)	30	Consolidated into Cannabimimetic Agents.
JWH-398 (1-Pentyl-3-(4-chloro-1-naphthoyl)indole)	30	Consolidated into Cannabimimetic Agents.
Ketobemidone	30	no change.
Levomoramide	25	no change.
Levophenyacylmorphan	25	no change.
Lysergic acid diethylamide (LSD)	1,200	no change.
MAB-CHMINACA; ADB-CHMINACA (N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-(cyclohexylmethyl)-1H-indazole-3-carboxamide).	30	no change.
Marijuana	6,675,000	no change.
Marijuana extract	1,000,000	no change.
MDMB-4EN-PINACA	30	no change.
MDMB-CHMICA; MMB-CHMINACA(methyl 2-(1-(cyclohexylmethyl)-1H-indole-3-carboxamido)-3,3-dimethylbutanoate).	30	no change.
MDMB-FUBINACA (methyl 2-(1-(4-fluorobenzyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate)	30	no change.
Mecloqualone	30	no change.
Mescaline	1,200	no change.
Mesocarb	30	no change.
meta-Fluorofuranyl fentanyl	30	no change.
Methaqualone	60	no change.
Methcathinone	25	no change.
Methiopropamine	30	no change.
Methoxyacetyl fentanyl	30	no change.
Methyl 2-(1-(4-fluorobutyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate (4F-MDMB-BINACA)	30	no change.
Methyldesorphine	5	no change.
Methyldihydromorphine	25	no change.
Metodesnitazene	30	no change.
Metonitazene	30	no change.
MMB-CHMICA; (AMB-CHIMCA); Methyl-2-(1-(cyclohexylmethyl)-1H-indole-3-carboxamido)-3-methylbutanoate	25	no change.

Basic class	2026 Established quotas (g)	Proposed revised 2026 quotas (g)
MMB-FUBICA	30	no change.
Morpheridine	25	no change.
Morphine methylbromide	5	no change.
Morphine methylsulfonate	5	no change.
Morphine-N-oxide	150	no change.
MT-45	30	no change.
Myrophine	25	no change.
N,N-Dimethylamphetamine	25	no change.
N-Ethyl-1-phenylcyclohexylamine	25	no change.
N-Ethyl-2-(2-(4-isopropoxybenzyl)-5-nitro-1H- benzimidazol-1-yl)ethan-1-amine; N-Desethyl Isotonitazene	30	no change.
N-Ethyl-3-piperidyl benzilate	10	no change.
N-Ethylamphetamine	24	no change.
N-Ethylhexedrone	25	no change.
N-Ethylpentylone, ephylone	30	no change.
N-Hydroxy-3,4-methylenedioxyamphetamine	24	no change.
N-Methyl-3-piperidyl benzilate	30	no change.
N-Pyrrolidino Etonitazene	30	no change.
N-pyrrolidino metonitazene	30	no change.
N-pyrrolidino protonitazene	30	no change.
Naphyrone	25	no change.
Nicocodeine	25	no change.
Nicomorphine	25	no change.
NM2201: Naphthalen-1-yl 1-(5-fluorpentyl)-1H-indole-3-carboxylate	25	no change.
Noracymethadol	25	no change.
Norlevorphanol	2,550	no change.
Normethadone	25	no change.
Normorphine	40	no change.
Norpipanone	25	no change.
Ocfentanil	25	no change.
ortho-Chlorofentanyl	30	no change.
ortho-Fluoroacryl fentanyl	30	no change.
ortho-Fluorobutyryl fentanyl	30	no change.
ortho-Fluorofentanyl,2-Fluorofentanyl	30	no change.
ortho-Fluoroisobutyryl fentanyl	30	no change.
ortho-Methyl acetylfentanyl	30	no change.
ortho-Methylcyclopropylfentany	30	no change.
ortho-Methyl methoxyacetyl fentanyl	30	no change.
para-Chlorofentanyl	30	no change.
para-Chloroisobutyrl fentanyl	30	no change.
para-Flourobutyryl fentanyl	25	no change.
para-Fluorofentanyl	25	no change.
para-Fluoro furanyl fentanyl	30	no change.
para-Fluoro valeryl fentanyl	30	no change.
para-Methoxybutyrl fentanyl	30	no change.
para-Methylfentanyl	30	no change.
Parahexyl	5	no change.
PB-22; QUPIC	20	no change.
Pentedrone	25	no change.
Pentylone	25	no change.
Phenadoxone	25	no change.
Phenampromide	25	no change.
Phenomorphan	25	no change.
Phenoperidine	25	no change.
Phenyl fentanyl	30	no change.
Pholcodine	5	no change.
Piritramide	25	no change.
Proheptazine	25	no change.
Properidine	25	no change.
Propiram	25	no change.
Protonitazene	30	no change.
Psilocybin	50,000	60,000.
Psilocyn	80,000	93,600.
Racemoramide	25	no change.
SR-18 and RCS-8 (1-Cyclohexylethyl-3-(2-methoxyphenylacetyl)indole)	45	Consolidated into Cannabimimetic Agents.
SR-19 and RCS-4 (1-Pentyl-3-[(4-methoxy)-benzoyl]indole)	30	Consolidated into Cannabimimetic Agents.
Tetrahydrofuranyl fentanyl	15	no change.
Tetrahydrothiofuranyl fentanyl	30	no change.
Thebacon	25	no change.
Thiafentanil	25	no change.
Thiofentanyl	25	no change.
Thiofuranyl fentanyl	30	no change.
THJ-2201 ([1-(5-fluoropentyl)-1H-indazol-3-yl](naphthalen-1-yl)methanone)	30	no change.
Tilidine	25	no change.
Trimeperidine	25	no change.
U-47700	30	no change.
UR-144 (1-pentyl-1H-indol-3-yl)(2,2,3,3-tetramethylcyclopropyl)methanone	25	no change.
Valeryl fentanyl	25	no change.
Zipeprol	30	no change.

Basic class	2026 Established quotas (g)	Proposed revised 2026 quotas (g)
Schedule II		
1-Phenylcyclohexylamine	15	no change.
1-Piperidinocyclohexanecarbonitrile	25	no change.
4-Anilino-N-phenethyl-4-piperidine (ANPP)	937,874	no change.
Alfentanil	5,000	no change.
Alphaprodine	25	no change.
Amobarbital	20,100	no change.
Bezitramide	25	no change.
Carfentanil	20	no change.
Cocaine	60,492	no change.
Codeine (for conversion)	942,452	no change.
Codeine (for sale)	19,262,516	no change.
d-Amphetamine (for conversion)	34,602,790	41,392,071.
d-Amphetamine (for sale)	26,450,000	37,108,041.
d-Methamphetamine (for conversion)	485,020	no change.
d-Methamphetamine (for sale)	47,000	no change.
d,l-Amphetamine	24,234,443	31,654,915.
d,l-Methamphetamine	150	no change.
Dexmethylphenidate (for conversion)	5,374,683	no change.
Dexmethylphenidate (for sale)	6,200,000	no change.
Dextropropoxyphene	35	no change.
Dihydrocodeine	115,227	no change.
Dihydroetorphine	25	no change.
Diphenoxylate (for conversion)	14,100	no change.
Diphenoxylate (for sale)	770,800	no change.
Ecgonine	60,492	no change.
Ethylmorphine	30	no change.
Etorphine hydrochloride	32	no change.
Fentanyl	731,236	731,145.
Glutethimide	25	no change.
Hydrocodone (for conversion)	1,250	no change.
Hydrocodone (for sale)	26,978,077	no change.
Hydromorphone	1,949,378	2,356,798.
Isomethadone	30	no change.
l-Amphetamine	30	no change.
l-Methamphetamine	587,229	no change.
Levo-alphacetylmethadol (LAAM)	25	no change.
Levomethorphan	30	no change.
Levorphanol	20,000	no change.
Lisdexamfetamine	51,290,743	62,832,521.
Meperidine	681,184	no change.
Meperidine Intermediate-A	30	no change.
Meperidine Intermediate-B	30	no change.
Meperidine Intermediate-C	30	no change.
Metazocine	15	no change.
Methadone (for sale)	25,619,700	no change.
Methadone Intermediate	27,673,600	no change.
Methamphetamine	150	no change.
Methylphenidate (for conversion)	19,975,468	no change.
Methylphenidate (for sale)	58,283,000	69,502,651.
Metopon	25	no change.
Moramide-intermediate	25	no change.
Morphine (for conversion)	2,393,200	no change.
Morphine (for sale)	23,000,000	no change.
Nabilone	62,000	no change.
Norfentanyl	25	no change.
Noroxymorphone (for conversion)	24,756,979	no change.
Noroxymorphone (for sale)	2,500	no change.
Oliceridine	25,100	no change.
Opium (powder)	250,000	no change.
Opium (tincture)	530,837	no change.
Oripavine	45,721,950	no change.
Oxycodone (for conversion)	437,827	no change.
Oxycodone (for sale)	50,237,652	no change.
Oxymorphone (for conversion)	31,773,105	no change.
Oxymorphone (for sale)	464,367	no change.
Pentobarbital	40,000,000	no change.
Phenazocine	25	no change.
Phencyclidine	35	no change.
Phenmetrazine	25	no change.
Phenylacetone	100	no change.
Piminodine	25	no change.
Racemethorphan	5	no change.
Racemorphan	5	no change.
Remifentanil	4,000	6,152.
Secobarbital	172,100	no change.
Sufentanil	4,000	no change.
Tapentadol	10,390,226	no change.
Thebaine	57,137,944	no change.

Basic class	2026 Established quotas (g)	Proposed revised 2026 quotas (g)
List I Chemicals		
Ephedrine (for conversion)	41,100	no change.
Ephedrine (for sale)	3,933,336	no change.
Phenylpropanolamine (for conversion)	14,878,320	15,500,000.
Phenylpropanolamine (for sale)	7,990,000	no change.
Pseudoephedrine (for conversion)	1,000	no change.
Pseudoephedrine (for sale)	186,617,466	no change.

The Administrator further proposes that the APQ for all other schedule I and II controlled substances included in 21 CFR 1308.11 and 1308.12 remain at zero. In accordance with 21 CFR 1303.13 and 21 CFR 1315.13, upon consideration of the relevant factors, the Administrator may adjust the 2026 APQ and AAN as needed.

Conclusion

After consideration of any comments or objections, or after a hearing, if one is held, the Administrator will issue and publish in the **Federal Register** a final order establishing any adjustment of the 2026 APQ for each basic class of controlled substances in schedules I and II and AAN for the list I chemicals ephedrine, pseudoephedrine, and phenylpropanolamine.[19]

Signing Authority

This document of the Drug Enforcement Administration was signed on November 20, 2026, by DEA Administrator Terrance C. Cole. That document with the original signature and date is maintained by DEA. For administrative purposes only, and in compliance with requirements of the Office of the Federal Register, the undersigned DEA Federal Register Liaison Officer has been authorized to sign and submit the document in electronic format for publication, as an official document of DEA. This administrative process in no way alters the legal effect of this document upon publication in the **Federal Register**.

Heather Achbach,

Federal Register Liaison Officer, Drug Enforcement Administration.

[FR Doc. 2026–23959 Filed 11–24–26; 8:45 am]

BILLING CODE P

[19] 21 CFR 1303.13(c) and 1315.13(c).

DEPARTMENT OF JUSTICE

[OMB Number 1105–112]

Agency Information Collection Activities; Proposed eCollection eComments Requested; Revision of a Previously Approved Collection Title—Crime Victim's Rights Act Complain Form

AGENCY: Executive Office for United States Attorney, Department of Justice.

ACTION: 30-Day notice.

SUMMARY: The Executive Office for United Staes Attorney, Department of Justice (DOJ), will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995.

DATES: Comments are encouraged and will be accepted for 30 days until December 28, 2026.

FOR FURTHER INFORMATION CONTACT: To request additional information about this information collection request, please contact: Ellen M. FitzGerald, Victim's Rights Ombudsman, EOUSA, 950 Pennsylvania Avenue NW, Washington, DC 20530, *ellen.fitzgerald@usdoj.gov,* 202–252–1015.

SUPPLEMENTARY INFORMATION: The proposed information collection was previously published in the **Federal Register** on date, August 4, 2026, 91 FR 49448, allowing a 60-day comment period. Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address one or more of the following four points:

—Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

—Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

—Enhance the quality, utility, and clarity of the information to be collected; and/or

—Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submission of responses.

Written comments and recommendations for this information collection should be submitted within 30 days of the publication of this notice on the following website *www.reginfo.gov/public/do/PRAMain.* Find this particular information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function and entering either the title of the information collection or the OMB Control Number. This information collection request may be viewed at *www.reginfo.gov.*

If additional information is required, contact: Darwin Arceo, Department Clearance Officer, Enterprise Portfolio Management, Justice Management Division, United States Department of Justice, Two Constitution Square, 145 N Street NE, 4W–218 Washington, DC 20530.

DOJ seeks PRA authorization for this information collection for three (3) years. OMB authorization for an ICR cannot be for more than three (3) years without renewal. The DOJ notes that information collection requirements submitted to the OMB for existing ICRs receive a month-to-month extension while they undergo review.

Overview of This Information Collection

1. *Type of Information Collection:* Revision of a previously approved collection.

2. *Title of the Form/Collection:* Crime Victim's Rights Act Complaint Form.

3. *Agency form number, if any, and the applicable component of the Department of Justice sponsoring the collection:* N/A.