Specifications for Filing Form 8596, Information Return for Federal Contracts, Electronically

Rev. Proc. 2010-38

Use this revenue procedure to prepare Tax Year 2010 and prior year information returns for submission to Internal Revenue Service (IRS) electronically using the Filing Information Returns Electronically (FIRE) System.

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Part A. General

Sec. 1. Purpose

    .01 Section 6050M of the Internal Revenue Code, which was added by section 1522 of the Tax Reform Act of 1986 (Public Law 99-514) and amended by section 1015(f) of the Technical and Miscellaneous Revenue Act of 1988 (Public Law 100-647), requires Federal Executive Agencies to file an information return with the Internal Revenue Service (IRS) reporting the name, address and Taxpayer Identification Number (TIN) of each person and/or corporation with whom the agency enters into a contract, together with any other information required by Treasury regulations. Such reporting is required when the contract amount equals or exceeds $25,000.00 including any amendments to the original contract.

    .02 The purpose of this revenue procedure is to provide the specifications for filing Form 8596, Information Return for Federal Contracts, and Form 8596-A, Quarterly Transmittal of Information Returns for Federal Contracts, with IRS electronically through the Filing Information Returns Electronically (FIRE) System.

    .03 This revenue procedure applies to Federal Executive Agencies, United States Postal Service and the Postal Rate Commission with respect to reporting their contracts and contract amendments where the net value of the contract exceeds $25,000.00 Federal Executive Agencies generally must report contracts in excess of $25,000.00 to the Federal Procurement Data Center (FPDC) and therefore are permitted to make an election to have the FPDC file with the Internal Revenue Service on their behalf. If the election is made by the Federal Executive Agency, it must be made by the head of the Agency (or his or her delegate). The agency must not file directly with IRS. See Part A, Section 5. Please read this Revenue Procedure carefully.

    .04 This Revenue Procedure supersedes Rev. Proc. 2008-49, reprinted as Publication 1516 (Rev. 2010-X), Specifications for Filing Forms 8596, Information Returns for Federal Contracts, Electronically. Use this Revenue Procedure for filing Forms 8596 electronically for the quarter beginning January 2011.

Sec. 2. Nature of Changes

In this publication, all pertinent changes for Tax Year *2010* are emphasized by the use of *italics*. Portions of text that require special attention are in boldface text. Filers are always encouraged to read the publication in its entirety.

    .01 Change in contact name from IRS/ECC-MTB to IRS/IRB (Information Returns Branch), Information Reporting Program to Information Returns Branch and added Mail Stop 4360 to mailing address.

    .02 Payer "A" Record, expanded Type of Return field from a one position to a two position field. Previously the field position was 27, now it is field positions 26-27.

    .03 Technical security standards added to Part B, Sec. 6.06 for the FIRE System.

Sec. 3. Where to File and How to Contact the IRS, Information Returns Branch

    .01 All information returns filed electronically are processed at IRS/IRB. Files containing information returns and requests for IRS electronic filing information should be sent to the following address:

Internal Revenue Service
Information Returns Branch

.02 Telephone inquiries for the Information Reporting Program Customer Service Section may be made between 8:30 a.m. and 4:30 p.m. Eastern time, Monday through Friday.

.03 The telephone numbers for electronic submissions inquiries are:

Information Reporting Program Customer Service Section

TOLL-FREE 1-866-455-7438 or outside the U.S. 1-304-263-8700

304-579-4827 - TDD
(Telecommunication Device for the Deaf)

Toll-free – 877-477-0572 - Fax Machine
Outside the U.S. use 304-579-4105

Electronic Filing – FIRE system
http://fire.irs.gov

TO OBTAIN FORMS:
1-800-TAX-FORM (1-800-829-3676)

www.irs.gov - **IRS website access to forms**

Sec. 4. Form 4419, Application for Filing Information Returns Electronically (FIRE)

.01 Transmitters are required to submit Form 4419, Application for Filing Information Returns Electronically, to request authorization to file information returns with IRS/IRB. A single Form 4419 should be filed no matter how many types of returns the transmitter will be submitting electronically. For example, if a transmitter plans to file Forms 8596, one Form 4419 should be submitted. If, at a later date, another type of form (Forms 1097, 1098, 1099, 3921, 3922, 5498 and W-2G) is to be filed, the transmitter does not need to submit a new Form 4419.

Note: EXCEPTIONS – An additional Form 4419 is required for filing each of the following types of returns: Form 1042-S, Foreign Person's U.S. Source Income Subject to Withholding, Form 8027, Employer's Annual Information Return of Tip Income and Allocated Tips and Forms 8955-SSA, Annual Registration Statement Identifying Separated Participants with Deferred Vested Benefits. See the back of Form 4419 for detailed instructions.

.02 Electronically filed returns may not be submitted to IRS/IRB until the application has been approved. Please read the instructions on the back of Form 4419 carefully. Forms may be obtained by calling **1-800-TAX-FORM (1-800-829-3676)**. The form is also available on the IRS website at **www.irs.gov**. This form may be photocopied.

.03 Upon approval, a five-character alpha/numeric Transmitter Control Code (TCC) will be assigned and included in an approval letter. The TCC **must** be coded in the Transmitter "T" Record. IRS/IRB uses the TCC to identify payers/transmitters and to track their files through the processing system.

.04 Form 4419 may be submitted anytime during the year; however, it **must** be submitted to IRS/IRB at least 30 days before the due date of the return(s) for current year processing. This will allow IRS/IRB the minimum amount of time necessary to process and respond to applications.

.05 Once a transmitter is approved to file electronically, it is not necessary to reapply **unless**:

(a) The payer has discontinued filing electronically for two consecutive years. The payer's TCC may have been reassigned by IRS/IRB. Payers who are aware that their TCC will no longer be used are requested to notify IRS/IRB so these numbers may be reassigned.

(b) The payer's files were transmitted in the past by a service bureau using the service bureau's TCC, but now the payer has computer equipment compatible with that of IRS/IRB and wishes to prepare his or her own files. The payer must request a TCC by filing Form 4419.

.06 If **any** of the information (name, TIN or address) on Form 4419 changes, please notify IRS/IRB in writing so the IRS/IRB database can be updated. The transmitter should include the TCC in all correspondence.

.07 Approval to file does not imply endorsement by IRS/IRB of any computer software or of the quality of tax preparation services provided by a service bureau or software vendor.

Sec. 5. Filing Requirements

.01 The requirements for Federal Contracts are governed by section 6011(e)(2)(A) and section 6050M of the Internal Revenue Code and Regulation section 1.6050M-1. The term Federal Executive Agency means: (1) any Executive Agency (as defined in Section 105 of title 5, United States Code) other than the Government Accountability Office; (2) any military department as defined in section 102 of such title; and (3) the United States Postal Service and the Postal Rate Commission. A Federal Executive Agency that files 250 or more reportable contracts during a one year period, must file Form 8596 on an electronic file for each quarter of that one year period.

.02 The information returns required by this section with respect to contracts of a Federal Executive Agency entered into on or after January 1, 1989, must be filed on a quarterly basis for the calendar quarters ending on the last day of March, June, September, and December, on or before the last day of the month following that quarter for which the returns are being made.

.03 The information returns required by this section may be made in one submission or in multiple submissions.

.04 If a Federal Executive Agency has reasonable expectations to enter into fewer than 250 reportable contracts during a one year period, the agency may file paper Forms 8596 and 8596-A to: Department of the Treasury, Internal Revenue Service Center, Kansas City, MO 64999-2222.

.05 **Election to have the Director of the Federal Procurement Data Center file returns on behalf of an agency.** Except for the U.S. Postal Service and the Postal Rate Commission, a Federal Executive Agency may elect to have the Director of the Federal Procurement Data Center (FPDC) file the required returns with IRS on behalf of the agency. The agency must comply with the requirements of the Federal Procurement Data System (FPDS) in submitting the information and must not file with the Internal Revenue Service.

.06 In order to make this election, the head of a Federal Executive Agency (or his or her delegate) shall attach a signed statement to its submission to the FPDC for that quarter stating the following:

(a) The Director of the FPDC (or his or her delegate) is authorized to submit the required returns on behalf of the agency for contracts for that quarter in accordance with an election under 26 CFR, section 1.6050M-1(d)(5).

(b) Under the penalties of perjury, the official has examined the information submitted by the agency to the FPDC for use in making returns to be submitted to the IRS and the official certifies that information to be, to the best of his or her knowledge and belief, an accurate compilation of agency records maintained in the normal course of business for the purpose of making true, correct, and complete returns as required by section 6050M.

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.07 An agency that elects to have the FPDC file its returns must not submit those same returns to the IRS.

.08 If a contract is increased by more than $25,000.00 under one action, the action should be treated as a new contract and reported to IRS for the calendar quarter in which the increase occurs. This could occur through the exercise of an option contained in a basic or initial contract or under any other rule of contract law, expressed or implied, when the amount of money or other property obligated under the contract is increased by $25,000.00

.09 Special rules to filing requirements are as follows:

(a) If a subcontract is entered into by the Small Business Administration (SBA) under a prime contract between SBA and a procuring Federal agency pursuant to section 8(a) of the Small Business Act, the procuring agency, not the SBA, will be required to file Forms 8596 and 8596-A.

(b) A Federal Supply Schedule Contract or an Automated Data Processing Schedule Contract entered into by the General Services Administration (GSA), or a scheduled contract entered into by the Department of Veterans Affairs (VA) on behalf of one or more Federal Executive Agencies, is not to be reported by the GSA or VA at the time of execution. When a Federal Executive Agency, including the GSA or the VA, places an order under a schedule contract, the Federal Executive Agency must file Forms 8596 and 8596-A.

.10 Exceptions: The following are not required to be reported under section 6050M:

(a) Any contract action of $25,000.00 or less;

(b) Any contract which provides that all amounts payable under the contract by a Federal Executive Agency will be paid on or before the 120th day following the date of the contract action and for which it is reasonable to expect that all amounts will be so paid;

(c) A license granted by a Federal Executive Agency;

(d) An obligation of a contractor (other than a Federal Executive Agency) to a subcontractor;

(e) Debt instruments of the U.S. Government or a Federal agency, such as Treasury Notes, Treasury Bonds, Treasury Bills, U.S. Savings Bonds, or similar instruments;

(f) An obligation of a Federal Executive Agency to lend money, lease property to someone, or sell property;

(g) A blanket purchase agreement. However, when an order is placed under a blanket purchase agreement, a contract then exists and Forms 8596 and 8596-A must be filed;

(h) Any contract with a contractor who, in making the agreement, is acting in his or her capacity as an employee of a Federal Executive Agency (e.g., any contract of employment under which the employee is paid wages subject to Federal income tax withholding);

(i) Any contract between a Federal Executive Agency and another Federal Governmental unit or any subsidiary agency;

(j) Any contract with a foreign government or agency or any subsidiary agency;

(k) Any contract with a state or local government or agency or any subsidiary agency;

(l) Any contract with a person who is not required to have a Taxpayer Identification Number (TIN), such as a nonresident alien, foreign corporation or foreign partnership, any of which does not have income effectively connected with the conduct of a trade or business in the United States and does not have an office or place of business as a fiscal or paying agent in the United States;

(m) Certain confidential or classified contracts that meet the requirements of section 6050M(e);

(n) Any contract that provides that all payments made after the 120th day after the date of the contract action will be made by someone other than a Federal Executive Agency or an agent of such an agency. For example, a contract under which the contractor will collect amounts owed to a Federal Executive Agency for the agency's debtor and will remit to the Federal Executive Agency the money collected less an amount for the contractor's consideration under the contract;

(o) Contracts entered into using nonappropriated funds.

.11 All paper Forms 8596 and 8596-A for both original and corrected returns should be filed with the IRS Kansas City Service Center, Kansas City, MO 64999-2222. Forms 8596 and 8596-A may be obtained by calling 1-800-TAX-FORM (1-800-829-3676).

Sec. 6. Filing of Information Returns For Federal Contracts

.01 Paper information returns must be sent to the IRS Kansas City Service Center using Form 8596 and Form 8596-A. **Returns filed on paper forms must not be sent to the IRS/IRB.**

.02 If a Federal Executive Agency elects to have the FPDC make returns on its behalf, the FPDC shall mail or fax a copy of that agency's signed statement, making the election, to IRS/IRB for that agency for that quarter. (See Part A, Sec. 3.)

.03 **The transmitter must not report the same information on paper forms that is reported electronically.** If parts of the returns are reported on paper and part electronically, the transmitter must be sure that duplicate information is not included on both. This does not mean that corrected documents should not be filed. If a return has been prepared and submitted improperly, a corrected return must be filed as soon as possible. See Part A, Sec. 8 for requirements and instructions on filing corrected returns.

.04 Agencies are required to retain a copy of the information returns filed with IRS for at least three years or have the ability to reconstruct the data.

Sec. 7. Filing Dates

.01 The information returns required by this section must be filed on a quarterly basis for the calendar quarters as follows:

QUARTER	DUE DATE
January, February, March	April 30
April, May, June	July 31
July, August, September	October 31
October, November, December	January 31

.02 The director of the FPDC (or his or her delegate) shall submit the required return quarterly to IRS on or before the earlier date of:

(a) 45 days following the date that the contract information is required to be submitted to the FPDC, or

(b) 90 days following the end of the calendar quarter for which the election is made, except that, if the calendar quarter ends September 30, 105 days following the end of that quarter.

.03 If any due date falls on a Saturday, Sunday or legal holiday, the filing deadline is extended to the next day that is not a Saturday, Sunday, or legal holiday.

Sec. 8. How to File Corrected Returns

- A **correction** is an information return submitted by the transmitter to correct an information return that was previously submitted to and processed by IRS/IRB, but contained erroneous information.

- **DO NOT SEND YOUR ENTIRE FILE AGAIN**. Only send the information returns in need of correction.

- Information returns omitted from the original file **must not** be coded as corrections. Submit them under a separate Payer "A" Record as original returns.

- Before creating your correction file, review the following guidelines chart carefully.

   .01 When corrections are necessary, they must be filed in the next filing quarter. If the entire file submitted electronically was in error, the IRS/IRB should be contacted immediately. (See Part A, Sec. 3 for the address.)

   .02 Corrections should be filed **as soon as possible**. All fields must be completed with the correct information, not just the data fields needing correction. Submit corrections only for the returns filed in error, not the entire file. Furnish corrected statements to recipients as soon as possible.

Note: Do NOT resubmit your entire file as corrections. This will result in duplicate filing and erroneous notices may be sent to payees. Submit only those returns which need to be corrected.

   .03 There are numerous types of errors, and in some cases, more than one transaction may be required to correct the initial error. If the original return was filed as an aggregate, the filers must consider this in filing corrected returns.

   .04 Corrected returns may be included on the same file as original returns; however, separate "A" Records are required. If filers discover that certain information returns were omitted on their original file, they must not code these documents as corrections. The file must be coded and submitted as originals.

   .05 Review the chart that follows. Errors normally fall under one of the two categories listed. Next to each type of error is a list of instructions on how to file the corrected return.

Guidelines for Filing Corrected Returns Electronically

Error Made on the Original Return	How To File the Corrected Return
One transaction is required to make the following corrections properly. (See Note.)	

ERROR TYPE 1

1. Original return was filed with one or more of the following errors:

(a) Incorrect dollar amount in the Payee "B" Record

(b) Incorrect payee address

CORRECTION

A. Prepare a new file. The first record on the file will be the Transmitter "T" Record.

B. Make a separate "A" Record for each payer being reported. The information in the "A" Record will be **exactly** the same as it was in the original submission.

C. The Payee "B" Records must show the correct record information as well as a Corrected Return Indicator Code of "G" in Field Position 6.

D. Corrected returns submitted to IRS/IRB using "G" coded "B" Records may be on the same file as those returns submitted without the "G" coded "B" Records; however, **separate "A" Records are required.**

E. Prepare a separate "C" Record for each payer being reported.

F. The last record on the file will be the End of Transmission "F" Record.

File layout one step corrections

Transmitter "T" Record	Payer "A" Record	"G" coded Payee "B" Record	"G" coded Payee "B" Record	End of Payer "C" Record	End of Transmission "F" Record

Guidelines for Filing Corrected Returns Electronically

Error Made on the Original Return	How To File the Corrected Return
Two (2) separate transactions are required to make the following corrections properly. Follow the directions for both Transactions 1 and 2. DO NOT use the two step correction process to correct money amounts.	
__ERROR TYPE 2__ **1**. Original return was filed with one or more of the following errors: **(a)** No payee TIN (SSN, EIN, ITIN) **(b)** Incorrect payee TIN **(c)** Incorrect payee name	__CORRECTION__ **Transaction 1: Identify incorrect returns** **A.** Prepare a new file. The first record on the file will be the Transmitter "T" Record. **B.** Make a separate "A" Record for each type of return and each payer being reported. The information in the "A" Record will be **exactly** the same as it was in the original submission. **(See Note 3.)** **C.** The Payee "B" Records must contain **exactly the same** information as submitted previously, **except**, insert a Corrected Return Indicator Code of "G" in field position 6 of the "B" Records, and enter "0" (zeros) in all payment amounts. **(See Note 3.)** **D.** Corrected returns using "G" coded "B" Records may be on the same file as those returns submitted with a "C" code; **however, separate "A" Records are required.** **E.** Prepare a separate "C" Record for each type of return and each payer being reported. **F.** Continue with Transaction 2 to complete the correction. **CORRECTION** **Transaction 2:** Report the correct information. **A.** Make a separate "A" Record for each type of return and each payer being reported. **B.** The Payee "B" Records must show the correct information as well as a Corrected Return Indicator Code of "C" in field position 6. Corrected returns submitted to IRS/IRB using "C" coded "B" Records may be on the same file as those returns submitted with "G" codes; **however, separate "A" Records are required.** **C.** Prepare a separate "C" Record for each type of return and each payer being reported. **D.** The last record on the file will be the End of Transmission "F" Record

File layout **two** step corrections

Transmitter "T" Record	Payer "A" Record	"G" coded Payee "B" Record	"G" coded Payee "B" Record	End of Payer "C" Record	Payer "A" Record

"C" coded Payee "B" Record	"C" coded Payee "B" Record	End of Payer "C" Record	End of Transmission "F" Record

Note : If a filer is correcting the name and/or TIN in addition to any errors listed in item 2 of the chart, two transactions will be required. If a filer is reporting "G" coded, "C" coded, and/or "Non-coded" (original) returns on the same file, each category must be reported under separate "A" Records.

Sec. 9. Taxpayer Identification Numbers

.01 Contractors are required to furnish Taxpayer Identification Numbers (TINs) to the agency under section 6109 of the Internal Revenue Code.

.02 The contractor's TIN and name combination is used to associate information returns reported to IRS with corresponding information on tax returns. It is imperative that **correct** social security number (SSN) or employer identification number (EIN) for contractors be provided to IRS. **Do not enter hyphens or alpha characters**. Entering all zeros, ones, twos, etc., will have the effect of an incorrect TIN.

.03 IRS validates the SSN by using the Name Control of the surname of the individual who has been assigned this number. For this reason, the surname should be provided in the Payee Name Line and/or the Name Control in positions 7-10 of the Payee "B" Record. It is imperative to provide correct information for IRS to validate the SSN. IRS validates an EIN by using the name control of the business to which the EIN has been assigned. If an EIN is reported for a contractor, the correct business name should be provided in the First Payee Name Line and/or Name Control in positions 7-10 of the Payee "B" Record.

.04 For sole proprietors, the owner's name (not the doing business as (DBA) name) must appear in the Payee Name Line. The TIN for a sole proprietor may be either an EIN or SSN.

.05 The TIN to be furnished to IRS depends primarily upon the manner in which the account is maintained or set up on the agency's record. The payer and payee names and TINs should be consistent with the names and numbers used on other tax returns. The TIN must be that of the contractor. If the contract is recorded in more than one name, the transmitter must furnish the TIN and name of one of the contractors. The TIN provided must be associated with the name of the contractor provided in the First Payee Name Line of the Payee "B" Record.

Sec. 10. State Abbreviations

.01 The following state and U.S. territory abbreviations are to be used when developing the state code portion of address fields.

State	Code	State	Code	State	Code
Alabama	AL	Kentucky	KY	No. Mariana Islands	MP
Alaska	AK	Louisiana	LA	Ohio	OH
American Samoa	AS	Maine	ME	Oklahoma	OK
Arizona	AZ	Marshall Islands	MH	Oregon	OR
Arkansas	AR	Maryland	MD	Pennsylvania	PA
California	CA	Massachusetts	MA	Puerto Rico	PR
Colorado	CO	Michigan	MI	Rhode Island	RI
Connecticut	CT	Minnesota	MN	South Carolina	SC
Delaware	DE	Mississippi	MS	South Dakota	SD
District of Columbia	DC	Missouri	MO	Tennessee	TN
Federated States of Micronesia	FM	Montana	MT	Texas	TX
Florida	FL	Nebraska	NE	Utah	UT
Georgia	GA	Nevada	NV	Vermont	VT
Guam	GU	New Hampshire	NH	Virginia	VA
Hawaii	HI	New Jersey	NJ	(U.S.) Virgin Islands	VI
Idaho	ID	New Mexico	NM	Washington	WA
Illinois	IL	New York	NY	West Virginia	WV
Indiana	IN	North Carolina	NC	Wisconsin	WI
Iowa	IA	North Dakota	ND	Wyoming	WY
Kansas	KS				

     .02 Filers must adhere to the city, state, and ZIP Code format for U.S. addresses in the "B" Record. This also includes American Samoa, Federated States of Micronesia, Guam, Marshall Islands, Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands.

     .03 For foreign country addresses, filers may use a 51 position free format which should include city, province or state, postal code, and name of country in this order. This is allowable only if a "1" (one) appears in the Foreign Country Indicator, Field Position 247 of the "B" Record.

     .04 When reporting APO/FPO addresses use the following format:

EXAMPLE:

Payee Name	PVT Willard J. Doe
Mailing Address	Company F, PSC Box 100
	167 Infantry REGT
Payee City	APO (or FPO)
Payee State	AE, AA, or AP*
Payee ZIP Code	098010100

*AE is the designation for ZIP codes beginning with 090-098, AA for ZIP 340, and AP for ZIP codes 962-966.

Part B. Electronic Filing Specifications

Sec. 1. General

    .01 Electronic filing of Form 8596 returns, originals, corrections, and replacements is offered as an alternative to paper filing. There is no minimum of number of forms filing requirement; therefore, any number of forms may be filed electronically. Payers who are under the filing threshold requirement are encouraged to file electronically.

    .02 All electronic filing of information returns are received at IRS/IRB via the FIRE (Filing Information Returns Electronically) System. To connect to the FIRE System, point your browser to http://fire.irs.gov. The system is designed to support the electronic filing of information returns only.

    .03 The electronic filing of information returns is not affiliated with any other IRS electronic filing programs. Filers must obtain separate approval to participate in each of them. Only inquiries concerning electronic filing of information returns should be directed to IRS/IRB.

    .04 Files submitted to IRS/IRB electronically must be in standard ASCII code. Do not send paper forms with the same information as electronically submitted files. This would create duplicate reporting resulting in penalty notices.

    .05 If a Federal Executive Agency elects to have the FPDC make returns on its behalf, the FPDC shall mail or fax a copy of that agency's signed statement, making the election, to IRS/IRB (see Part A, Sec. 3.)

    .06 See Part C, Record Format Specifications and Record Layouts.

Sec. 2. Electronic Filing Approval Procedure

    .01 Filers must obtain a Transmitter Control Code (TCC) prior to submitting files electronically. Filers who currently have a TCC may use their assigned TCC for electronic filing. Refer to Part A, Sec. 4, for information on how to obtain a TCC.

    .02 Once a TCC is obtained, electronic filers create their own User ID, password and Personal Identification Number (PIN) and do not need prior or special approval. See Part B, Sec. 4, for more information on the PIN.

    .03 If a filer is submitting files for more than one TCC, it is not necessary to create a separate logon and password for each TCC.

    .04 For all passwords, it is the user's responsibility to remember the password and not allow the password to be compromised. Passwords are user created at first logon and must be 8 alpha/numerics containing at least 1 uppercase, 1 lowercase, and 1 numeric. However, filers who forget their password or PIN can call **toll-free 1–866-455-7438** for assistance. The FIRE System will require users to change their passwords periodically. Users can change their passwords at any time from the Main Menu. Prior passwords cannot be used.

Sec. 3. Electronic Submissions

    .01 Electronically filed information may be submitted to IRS/IRB 24 hours a day, 7 days a week. Technical assistance will be available Monday through Friday between 8:30 a.m. and 4:30 p.m. Eastern time by calling **toll-free at 1-866-455-7438.**

    .02 The FIRE System will be down from the last week of December through the first week of January. This allows IRS/IRB to update its system to reflect current year changes. In addition, the FIRE System may be down every Wednesday from 3:00 a.m. to 5:00 a.m. ET for maintenance.

    .03 Your file size cannot exceed 2.5 million records. If you are sending files larger than 10,000 records electronically, data compression is encouraged. WinZip and PKZip are the only acceptable compression packages. IRS/IRB cannot accept self-extracting zip files or compressed files containing multiple files. The time required

to transmit information returns electronically will vary depending upon the type of connection to the Internet and if data compression is used. **The time required to transmit a file can be reduced by as much as 95 percent by using compression.**

        .04 Transmitters may create files using self assigned filename(s). Files submitted electronically will be assigned a new unique file name by the FIRE System. The filename assigned by the FIRE System will consist of submission type (ORIG [original], CORR [correction], and REPL [replacement]), the filer's TCC and a four-digit number sequence. The sequence number will be incremented for every file sent. For example, if it is your first original file for the calendar year and your TCC is 44444, the IRS assigned filename would be ORIG.44444.0001. **Record the filename.** This information will be needed by IRS/IRB to identify the file, if assistance is required.

        .05 If a timely submitted file is bad, the filer will have up to 60 days from the day the file was transmitted to submit an acceptable replacement file. If an acceptable replacement file is not received within 60 days, then the payer could be subject to late filing penalties. This only applies to files originally submitted electronically.

        .06 The following definitions have been provided to help distinguish between a correction and a replacement:

- A **correction** is an information return submitted by the transmitter to correct an information return that was previously submitted to and successfully processed by IRS/IRB, but contained erroneous information. **(See Note.)**

Note: **Corrections should only be made to records that have been submitted incorrectly, not the entire file**.

- A **replacement** is an information return file sent by the filer because the CHECK FILE STATUS option on the FIRE System indicated the original file was bad. After the necessary changes have been made, the file must be transmitted through the FIRE System. (**See Note.**)

Note: Filers should never transmit anything to IRS/IRB as a "Replacement" file unless the CHECK FILE STATUS option on the FIRE System indicates a previous file is bad.

Sec. 4. PIN Requirements

        .01 The user will be prompted to create a PIN consisting of 10 numeric characters when establishing their initial User ID and password.

        .02 The PIN is required each time an ORIGINAL, CORRECTION, or REPLACEMENT file is sent electronically and is permission to release the file. An authorized agent may enter their PIN, however, the payer is responsible for the accuracy of the returns. The payer will be liable for penalties for failure to comply with filing requirements. If you forget your PIN, please call **toll-free at 1-866-455-7438** for assistance.

        .03 If the file is good, it is released for mainline processing after 10 calendar days from receipt. Contact us **toll-free at 1-866-455-7438** within this 10-day period if there is a reason the file should not be released for further processing. If the file is unacceptable, follow normal replacement procedures.

Sec. 5. Electronic Filing Specifications

        .01 The FIRE System is designed exclusively for the filing of Forms 1042-S, 1097, 1098, 1099, 3921, 3922, 5498, 8027, 8596, and W-2G.

        .02 A transmitter must have a TCC (see Part A, Sec. 4) before a file can be transmitted.

.03 After 1-2 business days, the results of the electronic transmission will be e-mailed to you providing you supply an accurate e-mail address on the "Verify Your Filing Information" screen. If you are using e-mail filtering software, configure your software to accept e-mail from fire@irs.gov and irs.e-helpmail@irs.gov. If after receiving the e-mail it indicates that your file is bad, you must log into the FIRE system and select CHECK FILE STATUS area to determine what the errors are in your file.

Sec. 6. Connecting to the FIRE System

      .01 Before connecting, have your TCC and TIN available.
      .02 Filers should turn off pop-up blocking software before transmitting their files.
      .03 Your browser must support the security standards listed below.
      .04 Your browser must be set to receive "cookies." Cookies are used to preserve your User ID status.
      .05 Point your browser to http://fire.irs.gov to connect to the FIRE System.
      .06 *FIRE Internet Security Technical Standards are:*

HTTP 1.1 Specification (http://www.w3.org/Protocols/rfc2616/rfc2616.txt)

SSL 3.0 or TLS 1.0. SSL and TLS are implemented using SHA and RSA 1024 bits during the asymmetric handshake.
SSL 3.0 Specifications (http://wp/netscape.com/eng/ssl3)
TLS 1.0 Specifications (http://www.ief.org/rfc/rfc2246.txt)

The filer can use one of the following encryption algorithms, listed in order of priority, using SSL or TLS:
AES 256-bit (FIPS-197)
AES 128-bit (FIPS-197)
TDES 168-bit (FIPS-46-3)

First time connection to the FIRE System (If you have logged on previously, skip to Subsequent
                                     Connections to the FIRE System.)

        Click *"Create New Account"*.
        Fill out the registration form and click *"Submit"*.
        Create your *User ID* (most users' logon with their first and last name).
        Create and verify your *password* (the password is user assigned and must be 8
        alpha/numerics, containing at least 1 uppercase, 1 lowercase, and 1 numeric). FIRE will
        require you to change the password periodically.
        Click *"Create"*.
        If you receive the message **"Account Created"**, click *"OK"*.
        Create and verify your 10-digit self-assigned PIN (Personal Identification Number).
        Click *"Submit"*.
        If you receive the message **"Your PIN has been successfully created!"**, click *"OK"*.
        Read the bulletin(s) and/or **"Click here to continue".**

Subsequent connections to the FIRE System

        Click *"Log On"*.
        Enter your *User ID* .
        Enter your *password* (the password is user assigned and is case sensitive).
        Read the bulletin(s) and/or **"Click here to continue".**

Uploading your file to the FIRE System

At Menu Options:
Click *"Send Information Returns"*
Enter your *TCC:*
Enter your *TIN:*
Click *"Submit"*.

The system will then display the company name, address, city, state, ZIP code, telephone number, contact, and e-mail address. This information will be used to e-mail transmitters regarding their transmission. Update as appropriate and/or Click *"Accept"*.

Note: Please ensure that the e-mail address is accurate so that the correct person receives the e-mail and it does not return to us undeliverable. If you are using SPAM filtering software, please configure it to allow an e-mail from <u>fire@irs.gov</u> and <u>irs.e-helpmail@irs.gov</u>.
Click one of the following:
Original File
Correction File
Replacement File (Click on the file to be replaced.)

- **Electronic Replacement** (file was originally transmitted on this system)
Click the file to be replaced.

Enter your 10-digit PIN.
Click *"Submit"*.
Click *"Browse"* to locate the file and open it.
Click *"Upload"*.

When the upload is complete, the screen will display the total bytes received and tell you the name of the file you just uploaded. Print this page and keep it for your records.

If you have more files to upload for that TCC:
Click *"File Another?";* otherwise*,*
Click *"Main Menu"*.

It is your responsibility to check the acceptability of your file; therefore, be sure to check back into the system in 1-2 business days using the CHECK FILE STATUS option.

Checking your FILE STATUS

If the correct e-mail address was provided on the "Verify Your Filing Information" screen when the file was sent, an e-mail will be sent regarding your FILE STATUS. If the results in the e-mail indicate "Good, not Released" and you agree with the "Count of Payees", then you are finished with this file. If you have any other results, please follow the instructions below.

At the Main Menu:
Click *"Check File Status"*.
Enter your *TCC:*

Enter your *TIN:*
Click *"Search"*.

If "Results" indicate:

> ***"Good, Not Released"*** and you agree with the "Count of Payees", you are finished with this file. The file will automatically be released after 10 calendar days unless you contact us within this timeframe.

> ***"Good, Released"*** – File has been released to our mainline processing.
> ***"Bad"*** - Click on filename to view error message(s*). Correct the errors and timely resubmit the file as a "replacement".

> ***"Not yet processed"*** - File has been received, but we do not have results available yet. Please check back in a few days.

Click on the desired file for a detailed report of your transmission.
When you are finished, click on ***Main Menu.***
*Click **"Log Out"***
Close your Web Browser.

Sec. 7. Common Problems and Questions Associated with Electronic Filing

IRS/IRB encourages filers to verify the format and content of each type of record to ensure the accuracy of the data. This may eliminate the need for IRS/IRB to request replacement files. This may be important for those payers who have either had their files prepared by a service bureau or who have purchased software packages.

Filers who engage a service bureau to transmit their files on their behalf should be careful not to report duplicate data, which may generate penalty notices.

This section lists some of the problems most frequently encountered with electronic files submitted to IRS/IRB. These problems may result in IRS/IRB requesting replacement files.

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1. Transmitter does not check the FIRE System to determine file acceptability.

The results of your file transfer are posted to the FIRE System within two business days. If the correct e-mail address was provided on the "Verify Your Filing Information" screen when the file was sent, an e-mail will be sent regarding your FILE STATUS. If the results in the e-mail indicate "Good, not Released" and you agree with the "Count of Payees", then you are finished with this file. If you have any other results, please follow the instructions in the Check File Status option. If the file contains errors, you can get an online listing of the errors. Date received and number of payee records are also displayed. If the file is good, but you do not want the file processed, you must contact IRS/IRB within 10 calendar days from the transmission of your file.

---

2. SPAM filters are not set to receive e-mail from fire@irs.gov and irs.e-helpmail@irs.gov.
If you want to receive e-mails concerning your files, processing results, reminders and notices, set your SPAM filter to receive e-mail from fire@irs.gov and irs.e-helpmail@irs.gov.

3. Incorrect e-mail address provided.

When the "Verify Your Filing Information" screen is displayed, make sure your correct e-mail address is listed. If not, please update with the correct e-mail address.

4. Incorrect file is not replaced timely.

If your file is bad, correct the file and timely resubmit as a replacement.

5. Transmitter compresses several files into one.

Only compress one file at a time. For example, if you have 10 uncompressed files to send, compress each file separately and send 10 separate compressed files.

6. Transmitter sends a file and CHECK FILE STATUS indicates that the file is good, but the transmitter wants to send a replacement or correction file to replace the original/correction/replacement file.

Once a file has been transmitted, you cannot send a replacement file unless CHECK FILE STATUS indicates the file is bad (1-2 business days after file was transmitted). If you do not want us to process the file, you must first contact us **toll-free at 1-866-455-7438** to see if this is a possibility.

7. Transmitter sends an original file that is good, and then sends a correction file for the entire file even though there are only a few changes.

The correction file, containing the proper coding, should only contain the records needing correction, not the entire file.

8. File is formatted as EBCDIC.

All files submitted electronically must be in standard ASCII code.

9. Transmitter has one TCC number, but is filing for multiple companies, which EIN should be used submitting the file?

When sending the file electronically, you will need to enter the EIN of the company assigned to the TCC. When you upload the file, it will contain the TINs for the other companies that you are filing for. This is the information that will be passed forward.

10. Transmitter sent the wrong file, what should be done?

Call us as soon as possible **toll-free at 1-866-455-7438.** We may be able to stop the file before it has been processed. **Please do not send a replacement for a file that is marked as a good file.**

Part C. Record Format Specifications and Record Layouts

Sec. 1. General

.01 The specifications contained in this part of the Revenue Procedure defines the required formation and contents of the records to be included in the electronic files.

.02 A provision is made in the "B" Records for entries which are optional. If the field is not used, enter blanks to maintain a fixed record length of 750 positions. Each field description explains the intended use of specific field positions.

Sec. 2. Transmitter "T" Record - General Field Descriptions

.01 The Transmitter "T" Record identifies the entity transmitting the electronic file and contains information which is critical if it is necessary for IRS/IRB to contact the filer.

.02 The Transmitter "T" Record is the first record on each file and is followed by a Payer "A" Record. A file format diagram is located at the end of Part C. A replacement file will be requested by IRS/IRB if the "T" Record is not present.

.03 For all fields marked **"Required"**, the transmitter must provide the information described under Description and Remarks. For those fields not marked **"Required"**, a transmitter must allow for the field, but may be instructed to enter blanks or zeros in the indicated field positions and for the indicated length.

.04 All records must be a fixed length of 750 positions.

.05 All alpha characters entered in the "T" Record must be upper-case, except e-mail addresses which may be case sensitive. **Do not** use punctuation in the name and address fields.

Record Name: Transmitter "T" Record			
Field Position	Field Title	Length	Description and Remarks
1	Record Type	1	**Required**. Enter "T".
2-5	Payment Year	4	**Required.** Enter the 4-digit year in which the contract is signed.
6	Type of Return	1	**Required**. Enter "G".
7-15	Transmitter's TIN	9	**Required**. Must be the valid nine-digit number TIN assigned by IRS to the Federal Executive Agency. Do not enter hyphens or alpha characters. Entering all zeros, ones, twos, etc., will have the effect of an incorrect TIN.
16-20	Transmitter Control Code	5	**Required.** Enter the five-character alpha/numeric Transmitter Control Code (TCC) assigned by IRS/IRB. A TCC must be obtained to file data within this program.
21-29	Blank	9	Enter blanks.
30-69	Transmitter Name	40	**Required.** Enter the name of the transmitter in the manner in which it is used in normal business. If someone other than the Federal Agency is transmitting data, enter the name of the transmitter. The name of the transmitter **must** be consistent through the entire file. Left-justify and fill unused positions with blanks.

	Record Name: Transmitter "T" Record		
Field Position	**Field Title**	**Length**	**Description and Remarks**
70-109	Transmitter Name (Continuation)	40	Enter any additional information that may be part of the name. Left-justify information and fill unused positions with blanks.

Note: All the information "Required" in Field Positions 110 thru 280 MUST contain the address information where correspondence relating to problems can be sent.

110-149	Agency Name	40	**Required.** Enter the name of the agency to be associated with the address where correspondence should be sent.
150-189	Agency Name (Continuation)	40	Enter any additional information that may be part of the name of the company where correspondence should be sent.
190-229	Agency Mailing Address	40	**Required.** Enter the mailing address where correspondence should be sent.
230-269	Agency City	40	**Required.** Enter the city, town, or post office where correspondence should be sent.
270-271	Agency State	2	**Required.** Enter the valid U.S. Postal Service state abbreviation for states. Refer to the chart of valid state codes in Part A, Sec. 10.
272-280	Agency ZIP Code	9	**Required.** Enter the valid nine-digit ZIP Code assigned by the U.S. Postal Service. If only the first five digits are known, left-justify information and fill unused positions with blanks.
281-303	Blank	23	Enter blanks.
304-343	Contact Name	40	**Required.** Enter the name of the person to be contacted if IRS/IRB encounters problems with the file.
344-358	Contact Phone Number & Extension	15	**Required.** Enter the telephone number of the person to contact regarding electronic files. Omit extension hyphens. If no extension is available, left-justify information and fill unused positions with blanks. For example, the IRS/IRB Customer Service Section telephone number of 866-455-7438 with an extension of 52345 would be 866455743852345.
359-408	Contact E-mail Address	50	**Required if available.** Enter the e-mail address of the person to contact regarding electronic files. Left-justify information. If no e-mail address is available, enter blanks.
409-499	Blank	91	Enter blanks.
500-507	Record Sequence Number	8	**Required.** Enter the number of the record as it appears within your file. The record sequence number for the "T" record will always be "1" (one), since it is the first record on your file and you can have only one "T" record in a file. Each record, thereafter, must be incremented by one in ascending numerical sequence, i.e., 2, 3, 4, etc. Right-justify numbers with leading zeros in the field. For example, the "T" record sequence number would appear as "00000001" in the field, the first "A" record would be "00000002", the first "B" record, "00000003", the second "B" record, "00000004" and so on until you reach the

Record Name: Transmitter "T" Record			
Field Position	**Field Title**	**Length**	**Description and Remarks**
			final record of the file, the "F" record.
508-748	Blank	241	Enter blanks.
749-750	Blank	2	Enter blanks, or carriage return/line feed (CR/LF) characters.

Sec. 3 Transmitter "T" Record - Record Layout

Record Type	Payment Year	Type of Return	Transmitter's TIN	Transmitter Control Code	Blank
1	2-5	6	7-15	16-20	21-29

Transmitter Name	Transmitter Name (Contd.)	Agency Name	Agency Name (Contd.)	Agency Mailing Address
30-69	70-109	110-149	150-189	190-229

Agency City	Agency State	Agency ZIP Code	Blank	Contact Name	Contact Phone Number & Extension	Contact E-mail Address
230-269	270-271	272-280	281-303	304-343	344-358	359-408

Blank	Record Sequence Number	Blank	Blank or CR/LF
409-499	500-507	508-748	749-750

Sec. 4. Payer "A" Record - General Field Descriptions

.01 The Payer "A" Record identifies the agency that made the payments and provides parameters for the succeeding Payee "B" Records. IRS computer programs rely on the absolute relationship between the parameters and data fields in the "A" Record and the data fields in the "B" Record to which they apply.

.02 All records must be a fixed length of 750 positions.

.03 An "A" Record may be blocked with "B" Records; however, the initial record on a file must be a Transmitter "T" Record followed by a Payer "A" Record. IRS/IRB will accept an "A" Record after a "C" Record.

.04   The number of "A" Records appearing on the file will depend on the number of agencies being reported. A separate "A" Record is required for each agency followed by the Payee "B" Records

for the agency. Each set of "B" Records is followed by a summary "C" Record. If more than one agency is being reported on a file, an "A" Record may follow a "C" Record (i.e., The "A", "B", and "C" Records for one agency may be followed by "A", "B", and "C" Records for the next agency, etc.).

  .05 All alpha characters entered in the "A" Record must be uppercase.

  .06 Do not begin any record at the end of a block and continue the same record into the next block.

  .07 For all fields marked **"Required"**, the transmitter must provide the information described under Description and Remarks. For those fields not marked **"Required"**, a transmitter must allow for the field, but may be instructed to enter blanks or zeros in the indicated file position(s) and for the indicated length.

Record Name: Payer "A" Record			
Field Position	**Field Title**	**Length**	**Description and Remarks**
1	Record Type	1	**Required.** Enter "A".
2-5	Payment Year	4	**Required**. Enter the 4-digit year in which the contract is signed.
6-11	Blank	6	Enter blanks.
12-20	Payer's Taxpayer Identification Number (TIN)	9	**Required.** Must be the **valid** nine-digit Taxpayer Identification Number assigned to the Federal Executive Agency. **Do not enter blanks, hyphens, or alpha characters.** All zeros, ones, twos, etc., will have the effect of an incorrect TIN.
21-24	Payer Name Control	4	Generally, the Name Control is the first four characters of the payer's name. The word "the" should be disregarded when it is the first word of the name, unless the name contains only two words. This field should be left blank if the name control is not determinable.
25	*Blank*	*1*	*Enter blank.*
26-27	*Type of Return*	*2*	***Required*. *Enter "G"*. *Left-justify, blank fill.***
28	Amount Indicator	1	**Required.** Enter "8".
29-51	Blank	23	Enter blanks.
52	Foreign Entity Indicator	1	Enter a "1" (one) if the payer is a foreign entity and income is paid by the foreign entity to a U.S. resident. If the payer is not a foreign entity, enter a blank.
53-92	First Payer Name Line	40	**Required**. Enter the name of the Federal Agency whose TIN appears in positions 12-20 of the "A" Record. The name of the agency must be entered in the manner in which it is used in normal business. Any extraneous information must be deleted. Left-justify information, and fill unused positions with blanks.
93-132	Second Payer Name Line	40	**Required**. Enter the name and title of the person to whom requests for an offset against any unpaid tax liability of the contractor can be sent. If necessary, please abbreviate.
133	Blank	1	Enter blank.

	Record Name: Payer "A" Record		
Field Position	**Field Title**	**Length**	**Description and Remarks**
134-173	Payer Shipping Address	40	**Required**. Enter the address of the person to whom requests for an offset against any unpaid tax liability of the contract can be sent. The street address should include number, street, apartment or suite number (or P.O. Box if mail is not delivered to a street address). Left-justify and fill with blanks.

For U.S. addresses, the payer city, state, and ZIP Code must be reported as 40, 2, and 9 position fields, respectively. **Filers must adhere to the correct format for the payer city, state, and ZIP Code.**

For foreign addresses, filers may use the payer city, state, and ZIP Code as a continuous 51 position field. Enter information in the following order: city, province or state, postal code, and the name of the country. When reporting a foreign address, the Foreign Entity Indicator in position 52 must contain a "1" (one).

174-213	Payer City	40	**Required**. Enter the city of the person to whom requests for an offset against any unpaid tax liability of the contractor can be sent. Left-justify and fill with blanks.
214-215	Payer State	2	**Required**. Enter the valid U.S. Postal Service state abbreviations for states. Refer to the chart of valid state abbreviations in Part A, Sec. 10.
216-224	Payer ZIP Code	9	**Required**. Enter the valid nine-digit ZIP Code assigned by the U.S. Postal Service. If only the first five digits are known, left-justify information and fill the unused positions with blanks.
225-239	Payer's Phone Number & Extension	15	Enter the payer's telephone number and extension.
240-499	Blank	260	Enter blanks.
500-507	Record Sequence Number	8	**Required.** Enter the number of the record as it appears within your file. The record sequence number for the "T" record will always be "1" (one), since it is the first record on your file and you can have only one "T" record in a file. Each record, thereafter, must be incremented by one in ascending numerical sequence, i.e., 2, 3, 4, etc. Right-justify numbers with leading zeros in the field. For example, the "T" record sequence number would appear as "00000001" in the field, the first "A" record would be "00000002", the first "B" record, "00000003", the second "B" record, "00000004" and so on until you reach the final record of the file, the "F" record.
508-748	Blank	241	Enter blanks.
749-750	Blank	2	Enter blanks or carriage return/line feed (CR/LF) characters.

5. Payer "A" Record - Record Layout

Record Type	Payment Year	Blank	Payer's TIN	Payer Name Control	Blank
1	2-5	6-11	12-20	21-24	25

Type of Return	Amount Indicator	Blank	Foreign Entity Indicator	First Payer Name Line
26-27	28	29-51	52	53-92

Second Payer Name Line	Blank	Payer Shipping Address	Payer City	Payer State	Payer ZIP Code	Payer's Phone & Extension
93-132	133	134-173	174-213	214-215	216-224	225-239

Blank	Record Sequence Number	Blank	Blank or CR/LF
240-499	500-507	508-748	749-750

Sec. 6. Payee "B" Record - General Field Descriptions

.01   The Payee "B" Record contains payment information from the individual contracts.
When filing information documents electronically, the format for the Payee "B" Records will remain constant.

.02   All records must be a fixed length of 750 positions.

.03   The following specifications include a field in the payee records called "Name Control" in which the first four characters of the payee's surname are to be entered by the filer.

(a)   If filers are unable to determine the first four characters of the surname, the Name Control Field may be left blank. Compliance with the following will facilitate IRS computer programs in identifying the correct name control:

(1)   The surname of the payee whose TIN is shown in the "B" Record should always appear first. If, however, the records have been developed using the first name first, the filer must leave a blank space between the first and last names.

(2)   In the case of multiple payees, only the surname of the payee whose TIN (SSN, EIN or ITIN) is shown in the "B" Record must be present in the First Payee Name Line. Surnames of any other payees may be entered in the Second Payee Name Line.

.04 For all fields marked **"Required"**, the transmitter must provide the information described under Description and Remarks. For those fields not marked **"Required"**, the transmitter must allow for the

field, but may be instructed to enter blanks or zeros in the indicated field position(s) and for the indicated length.

    .05 All alpha characters entered in the "B" Record must be uppercase.

    .06 Decimal points (.) cannot be used to indicate dollars and cents.

    .07 IRS strongly encourages filers to review data for accuracy before submission to facilitate the collection of delinquent federal tax liabilities from contractors. Filers should be especially careful that names, TINs, and income amounts are correct.

Record Name: Payee "B" Record			
Field Position	**Field Title**	**Length**	**Description and Remarks**
1	Record Type	1	**Required**. Enter "B."
2-5	Payment Year	4	**Required**. Enter the 4-digit year in which the contract is signed.
6	Corrected Return Indicator (**See Note.**)	1	**Required for corrections only.** Indicates a corrected return.

<table>
<tr><td colspan="2"></td><td>Code</td><td>Definition</td></tr>
<tr><td colspan="2"></td><td>G</td><td>If this is a one-transaction correction or the first of a two-transaction correction.</td></tr>
<tr><td colspan="2"></td><td>C</td><td>If this is the second transaction of a two transaction correction.</td></tr>
<tr><td colspan="2"></td><td>Blank</td><td>If this is not a return being submitted to correct information already processed by IRS.</td></tr>
</table>

Note: C, G, and non-coded records must be reported using separate Payer "A" Records. Refer to Part A, Sec. 8, for specific instructions on how to file corrected returns.

7-10	Name Control	4	If determinable, enter the first four (4) characters of the surname of the person whose TIN is being reported in positions 12-20 of the "B" Record; otherwise, enter blanks. This usually is the contractor. Surnames of less than four (4) characters should be left-justified, filling the unused positions with blanks. Special characters and imbedded blanks should be removed. In the case of a business, other than a sole proprietorship, use the first four significant characters of the business name. Disregard the word "the" when it is the first word of the name, unless there are only two words in the name. A dash (-) and an ampersand (&) are the only acceptable special characters. Surname prefixes are considered part of the surname, e.g., for Van Elm, the name control would be VANE.

Note: **Imbedded blanks, extraneous words, titles, and special characters (i.e., Mr., Mrs., Dr., period [.], apostrophe ['])** should be removed from the Payee Name Lines. This information may be dropped during subsequent processing at IRS/IRB. A dash (-) and an ampersand (&) are the only acceptable special characters.

Record Name: Payee "B" Record			
Field Position	**Field Title**	**Length**	**Description and Remarks**

The following examples may be helpful to filers in developing the Name Control:

Name
Individuals:

Name Control

Jane **Brow**n	BROW
John A. **Lee**	LEE*
James P. **En**, Sr	EN*
John **O'Nei**l	ONEI
Mary **Van B**uren	VANB
Juan **De Je**sus	DEJE
Gloria A. **El-R**oy	EL-R
Mr. John **Smit**h	SMIT
Joe **McCa**rthy	MCCA
Pedro **Torr**es-Lopes	TORR
Maria **Lope**z Moreno**	LOPE
Binh To **La**	LA*
Nhat Thi **Pham**	PHAM
Mark **D'All**esandro	DALL

Corporations:

The **Firs**t National Bank	FIRS
The Hideaway	THEH
A & B Cafe	A&BC
11TH Street Inc.	11TH

Sole Proprietor:

Mark **Heml**ock DBA The Sunshine Club	HEML

Partnership:

Robert **Aspe**n and Bess Willow	ASPE
Harold **Fir**, Bruce Elm, and Joyce Spruce et al Ptr	FIR*

Estate:

Frank **Whit**e Estate	WHIT
Estate of Sheila **Blue**	BLUE

Trusts and Fiduciaries:

Daisy Corporation Employee	DAIS

Field Position	Field Title	Length	Description and Remarks
Benefit Trust			
Trust FBO The **Cher**ryblossom Society			CHER
Exempt Organizations:			
Laborer's Union, AFL-CIO			LABO
St. **Be**rnard's Methodist Church Bldg. Fund			STBE

*Name Controls of less than four (4) significant characters must be left-justified and blank-filled.

**For Hispanic names, when two last names are shown for an individual, derive the name control from the first last name.

Field Position	Field Title	Length	Description and Remarks
12-20	Contractor's Taxpayer Identification Number (TIN)	9	**Required**. Enter the nine-digit Taxpayer Identification Number of the contractor (SSN, ITIN, or EIN). If an identification number has been applied for but not received, **enter blanks**. **Do not enter hyphens or alpha characters.** All zeros, ones, twos, etc., will have the effect of an incorrect TIN. If the TIN is not available, enter blanks.
21-29	Common Parent's Taxpayer Identification Number (TIN)	9	**Required.** If applicable, enter the valid nine-digit number assigned to the contractor's common parent; otherwise, **enter blanks**. **Do not enter hyphens or alpha characters.** All zeros, ones, twos, etc., will have the effect of an incorrect TIN.
30-54	Blank	25	Enter blanks.
55-138	Zero	84	**Required**. Enter zeros.
139-150	Total Amount Obligated Under Contract	12	**Required.** The amount reported in this field represents Total Amount Obligated Under the Contract. The Under Contract amount must be entered in **U.S. dollars and cents**. Dollar signs, commas, decimal points, or negative payments are not acceptable. Amount obligated must be right-justified and unused positions must be zero filled.
151-198	Zero	48	**Required.** Enter zeros.
199-246	Blank	48	Enter blanks.
247	Foreign Country Indicator	1	**If the address of the payee is in a foreign country, enter a "1" (one) in this field**; otherwise, **enter blank**. When filers use this indicator, they may use a free format for the payee city, state, and ZIP Code. Address information must not appear in the First or Second Payee Name Lines.
248-287	First Payee Name Line	40	**Required.** Enter the name of the contractor (preferably surname first) whose Taxpayer Identification Number (TIN) was provided in positions 12-20 of the "B" Record. Left-justify and fill unused positions with blanks. If more space is

		Record Name: Payee "B" Record (Continued)	
Field Position	**Field Title**	**Length**	**Description and Remarks**
			required for the name, utilize the Second Payee Name Line Field. If there are multiple payees, only the name of the payee whose TIN has been provided should be entered in this field. The names of the other payees may be entered in the Second Payee Name Line Field. If reporting information for a sole proprietor, the individual's name **must always** be present on the First Payee Name Line. The use of the business name is optional in the Second Payee Name Line Field.
288-327	Second Payee Name Line	40	If there are multiple payees, (e.g., partners or joint owners), use this field for those names not associated with the TIN provided in positions 12-20 of the "B" Record or if not enough space was provided in the First Payee Name Line, continue the name in this field (**See Notes**). **Do not enter address information.** It is important that filers provide as much payee information to IRS/IRB as possible to identify the payee associated with the TIN. Left-justify and fill unused positions with blanks.

Note: End First Payee Name Line with a full word. Do not split words. Begin Second Payee Name Line with the next sequential word.

Note: If applicable, enter the business name of the sole proprietor in this field.

328-367	Blank	40	Enter blanks.
368-407	Payee Mailing Address	40	**Required**. Enter the mailing address of the contractor. The street address should include number, street, apartment or suite number (or P.O. Box if mail is not delivered to street address). Left-justify information and fill unused positions with blanks. This field **must not** contain any data other than the payee's mailing address.
			For U.S. addresses, the payee city, state, and ZIP Code must be reported as 40, 2, and 9 position fields, respectively. **Filers must adhere to the correct format for the payee city, state, and ZIP Code.**
			For foreign addresses, filers may use the payee city, state, and ZIP Code as a continuous 51 position field. Enter information in the following order: city, province or state, postal code, and the name of the country. When reporting a foreign address, the Foreign Country Indicator in position 247 must contain a "1" (one).
408-447	Blank	40	Enter blanks.
448-487	Payee City	40	**Required.** Enter the city, town, or post office. Left-justify information and fill the unused positions with blanks. Enter APO or FPO if applicable. Do not enter state and ZIP Code information in this field.
488-489	Payee State	2	**Required**. Enter the valid U.S. Postal Service state abbreviations for states or the appropriate postal identifier (AA, AE, or AP) described in Part A, Sec. 10.

			Record Name: Payee "B" Record (Continued)
Field Position	**Field Title**	**Length**	**Description and Remarks**
490-498	Payee ZIP Code	9	**Required.** Enter the valid nine-digit ZIP Code assigned by the U.S. Postal Service. If only the first five digits are known, left-justify information and fill the unused positions with blanks. For foreign countries, alpha characters are acceptable as long as the filer has entered a "1" (one) in the Foreign Country Indicator, located in position 247 of the "B" Record.
499	Blank	1	Enter blank.
500-507	Record Sequence Number	8	**Required.** Enter the number of the record as it appears within your file. The record sequence number for the "T" record will always be "1" (one), since it is the first record on your file and you can have only one "T" record in a file. Each record, thereafter, must be incremented by one in ascending numerical sequence, i.e., 2, 3, 4, etc. Right-justify numbers with leading zeros in the field. For example, the "T" record sequence number would appear as "00000001" in the field, the first "A" record would be "00000002", the first "B" record, "00000003", the second "B" record, "00000004" and so on until you reach the final record of the file, the "F" record.
508-544	Blank	37	Enter blanks.
545	Filing Quarter	1	**Required.** Enter quarter; i.e., 1, 2, 3, or 4. See the chart below to determine the appropriate quarter. **Quarter** 1.....January, February, March 2.....April, May, June 3.....July, August, September 4.....October, November, December
546-553	Blank	8	Enter blanks.
554-568	Contract Number	15	**Required** (**if available**). Enter the contract number assigned by the Federal Executive Agency. Left-justify and fill the unused positions with blanks.
569	Blank	1	Enter blank.
570-573	Contract Modification Number	4	**Required** (**if available**). Enter the number assigned to the contract or order to designate a modification or termination. If this field is not utilized, enter blanks.
574	Blank	1	Enter blank.
575-589	Contract Office Order Number	15	**Required** (**if available**). Enter the number assigned by the contracting office. Left-justify and fill the unused positions with blanks.
590	Blank	1	Enter blank.
591-594	Reporting Agency Code	4	**Required.** Enter the four-digit agency and sub-agency code.

Field Position	Field Title	Length	Description and Remarks
			Record Name: Payee "B" Record (Continued)
595	Blank	1	Enter blank.
596-600	Contract Office Number	5	**Required** (**if available**). Enter the number assigned by the Federal Executive Agency that identifies the purchasing or contracting office.
601	Blank	1	Enter blank.
602-609	Date of Contract Action	8	**Required.** Enter the date of the action. Use YYYYMMDD (e.g., 20080214).
610	Blank	1	Enter blank.
611-618	Contract Completion Date	8	**Required.** Enter the expected date of completion of contract such as the contract delivery date under the contract schedule. Use YYYYMMDD. If completion date is not available, enter blanks.
619-658	Name of Common Parent	40	**Required** (**if applicable**). If the contractor is a member of an affiliated group of corporations that files its income tax returns on a consolidated basis, enter the name of the common parent of the affiliated group. The name entered should match the EIN in positions 21-29. If this field is not utilized, enter blanks.
659-748	Blank	90	Enter blanks.
749-750	Blank	2	Enter blanks or carriage return line feed (CR/LF) characters.

Sec. 7. Payee "B" Record - Record Layout

Record Type	Payment Year	Corrected Return Indicator	Name Control	Type of TIN	Contractor's Taxpayer Identification Number (TIN)
1	2-5	6	7 -10	11	12-20

Common Parent's Taxpayer Identification Number (TIN)	Blank	Zero	Total Amount Obligated Under Contract	Zero	Blank	Foreign Country Indicator
21-29	30-54	55-138	139-150	151-198	199-246	247

First Payee Name Line	Second Payee Name Line	Blank	Payee Mailing Address	Blank	Payee City	Payee State	Payee ZIP Code
248-287	288-327	328-367	368-407	408-447	448-487	488-489	490-498

Blank	Record Sequence Number	Blank	Filing Quarter	Blank	Contract Number	Blank	Contract Modification Number
499	500-507	508-544	545	546-553	554-568	569	570-573

Blank	Contract Office Order Number	Blank	Reporting Agency Code	Blank	Contract Office Number	Blank
574	575-589	590	591-594	595	596-600	601

Date of Contract Action	Blank	Contract Completion Date	Name of Common Parent	Blank	Blank or CR/LF
602-609	610	611-618	619-658	659-748	749-750

Sec. 8. End of Payer "C" Record - General Field Descriptions and Record Layout

.01 The End of Payer "C" Record is a fixed record length of 750 positions.

.02 The control total field is 18 positions in length.

.03 The End of Payer "C" Record is a summary record for a given payer.

.04   The "C" Record will contain the total number of payees and total of the payment amounts of a given payer. The "C" Record must be written after the last Payee "B" Record for a given payer. For each "A" Record and group of "B" Records on the file, there must be a corresponding "C" Record.

.05 Payers/Transmitters should verify the accuracy of the totals since data with missing or incorrect "C" Records will require a replacement.

Record Name: End of Payer "C" Record			
Field Position	**Field Title**	**Length**	**Description and Remarks**
1	Record Type	1	**Required.** Enter "C".
2-9	Number of Payees	8	**Required.** Enter the total number of "B" Records covered by the preceding "A" Record. Right-justify information and fill unused positions with zeros.
10-15	Blank	6	Enter blanks.
16-141	Zero	126	Enter zeros
142-159	Control Total	18	**Required.** Enter the total amount paid to contractors for all contracts present in the preceding Payee "B" Records**.** The Control Total must be entered in **U.S. dollars and cents**. Dollar signs, commas, decimal points, or negative payments are not acceptable. Total must be right-justified and unused positions must be zero filled.
160-231	Zero	72	Enter zeros.
232-499	Blank	268	Enter blanks.
500-507	Record Sequence Number	8	**Required.** Enter the number of the record as it appears within your file. The record sequence number for the "T" record will always be "1" (one), since it is the first record on your file and you can have only one "T" record in a file. Each record, thereafter, must be incremented by one in ascending numerical sequence, i.e., 2, 3, 4, etc. Right-justify numbers with leading zeros in the field. For example, the "T" record sequence number would appear as "00000001" in the field, the first "A" record would be "00000002", the first "B" record, "00000003", the second "B" record, "00000004" and so on until you reach the final record of the file, the "F" record.
508-748	Blank	241	Enter Blanks.
749-750	Blank	2	Enter blanks, or carriage return/line feed (CR/LF) characters.

End of Payer "C" Record - Record Layout

Record Type	Number of Payees	Blank	Zero	Control Total	Zero
1	2-9	10-15	16-141	142-159	160-231

Blank	Record Sequence Number	Blank	Blank or CR/LF
232-499	500-507	508-748	749-750

Sec. 9. End of Transmission "F" Record - General Field Descriptions and Record Layout

.01 The end of transmission "F" record is a fixed record length of 750 positions.

.02 The "F" Record is a summary of the number of payers in the entire file.

.03 This record should be written after the last "C" Record of the entire file.

	Record Name: End of Transmission "F" Record		
Field Position	**Field Title**	**Length**	**Description and Remarks**
1	Record Type	1	**Required**. Enter "F."
2-9	Number of "A" Records	8	Enter the total number of Payer "A" Records in the entire file (right-justify and zero fill) or enter all zeros.
10-30	Zero	21	Enter zeros.
31-499	Blank	469	Enter blanks.
500-507	Record Sequence Number	8	**Required.** Enter the number of the record as it appears within your file. The record sequence number for the "T" record will always be "1" (one), since it is the first record on your file and you can have only one "T" record in a file. Each record, thereafter, must be incremented by one in ascending numerical sequence, i.e., 2, 3, 4, etc. Right-justify numbers with leading zeros in the field. For example, the "T" record sequence number would appear as "00000001" in the field, the first "A" record would be "00000002", the first "B" record, "00000003", the second "B" record, "00000004" and so on until you reach the final record of the file, the "F" record.
508-748	Blank	241	Enter blanks.
749-750	Blank	2	Enter blanks or carriage return/line feed (CR/LF) characters.

End of Transmission "F" Record - Record Layout

Record Type	Number of "A" Records	Zero	Blank	Record Sequence Number	Blank	Blank or CR/LF
1	2-9	10-30	31-499	500-507	508-748	749-750

Sec. 10. File Record Layout

File Format

Each record must be 750 positions.

T Record
Identifies the Transmitter the electronic file.

A Record
Identifies the Payer (the institution or person making payments), the type of document being reported, and other misc. info.

B Record

Identifies the Payee, the specific payment amounts and info pertinent to that form.

C Record
Summary of B records for the payees and money amounts by payer and type of return

F Record
End of Transmission