

REQUIREMENTS FOR MAGNETIC MEDIA FILING

OF THE

CURRENCY TRANSACTION REPORT

(FinCEN FORM 104)

AND

DESIGNATION OF EXEMPT PERSON

(FinCEN FORM 110)

January 2006

These Specifications for Magnetic Media Filing of Currency Transaction Reports (FinCEN Form 104) and Designation of Exempt Person (FinCEN Form 110) were developed under the sponsorship of the following organizations:

Department of the Treasury

Deputy Assistant Secretary for Enforcement

Internal Revenue Service

*Director, Internal Management Systems Division
Enterprise Computing Center (ECC) - Detroit*

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Purpose

The purpose of this specification is to provide the requirements and conditions for filing Currency Transaction Report (CTR) Form 104 and Designation of Exempt Person (DEP) FinCEN Form 110 on magnetic media. These specifications apply to the program for the filing of CTRs submitted on cartridge, or diskette.

The magnetic media forwarded to the Detroit Computing Center (DCC) will be considered as a substitute for the Form 104 paper document and FinCEN Form 110, provided the transaction is accepted by the DCC system. Receipt and acknowledgment of magnetic media is further discussed in a later section.

Approval to participate in the magnetic media reporting program is contingent upon the filer following these steps:

- **Review specifications**
- **File application to participate**
- **Satisfy acceptance testing procedures**
- **Receive formal DCC approval**
- **File reports no more than every two weeks**
- **Monitor quality**

Continued participation in the Magnetic Media Program is contingent upon maintenance of quality standards and timely reporting.

Application for Magnetic Media Reporting

For the purpose of this specification, the FILER is the organization responsible for filing the CTR. Filers are required to complete an Application for Magnetic Media Reporting (Form DCC-4419, copy in attachments). Requests for additional information or forms related to magnetic media processing should be addressed to the CTR Magnetic Media Coordinator at the DCC.

The application should be filed with DCC as soon as possible after the decision is made to file magnetically. DCC will notify the applicant, in writing, of authorization to file. Magnetic media returns may not be filed with DCC until the applicant has received formal approval.

Filing of Magnetic Media Reports

General:

DCC will advise magnetic filers when they may begin to file using magnetic media. Until this notification has been issued, magnetic media will not be accepted.

If the magnetic filing system encounters problems which appear will remain unresolved for a potentially lengthy period, the filer will be advised to stop magnetic filing until the problem has been resolved.

Do not file a paper CTR (Form 104) or DEP (FinCEN Form 110) for currency transactions which are reported by magnetic media or for customers which have been exempted by magnetic media.

If entire files are unreadable due to format errors, etc., **we will contact the transmitter by telephone** to send a replacement for the file. Invalid transactions on a file, however, should be corrected and resubmitted as part of the file for the next full reporting period. A filer whose error rates are at a high level on a continuing basis may risk being discontinued as a magnetic media filer.

Filers are required to retain a copy of the CTR and /or DEP data or have the ability to reconstruct the data filed magnetically for a period of five years. In addition, **the magnetic filer must retain the acknowledgment** from DCC to facilitate inquiries for the same period as well as any 'working' papers which may be necessary for centralized keying of transactions. Aggregation is to be handled no differently using

magnetic media filing than it would be if filing paper CTRs.

Transmittal Process:

The magnetic media files are to be sent to DCC. Form(s) DCC-4804 and DCC-4802 (for multiple filers), Transmittal for Magnetic Media Reporting of Currency Transactions must accompany magnetic submissions.

(See attachments) **DO NOT MAIL THE MEDIA AND THE TRANSMITTAL SEPARATELY.** A facsimile of Form 4804 and/or Form 4802, which includes all information requested on the actual form may be used. Substitute forms should follow the format of the transmittal form.

The affidavit on DCC-4804 should be signed by the filer; however, an agent may sign the affidavit on behalf of the filer if all of the following conditions are met:

The agent has been designated the authority to sign the affidavit under an agency agreement (either oral, written, or implied) that is valid under any state law.

The agent signs the affidavit and adds the caption 'For: (Name of Filer)'.

See Form 4800 (CTR Magnetic Media Reporting Instructions) in the attachments for detailed instructions. Although a duly authorized agent signs the affidavit, the filer is held responsible for the accuracy of the Form 4804.

All submitted magnetic media files, must include the following:

A signed Form 4804 or facsimile.

The magnetic media with an external identifying label.

A statement on the outside of the shipping container that states **Attn: Tape Library**, 'Deliver unopened: CTR Magnetic Media; __of__ '. If there is only one container, mark the outside as 1 of 1. For multiple

containers, include the sequence (e.g., 1 of 3, 2 of 3, etc.).

DCC will not pay for or accept 'Collect on Delivery' or 'Charged to IRS,' shipments of CTRs on magnetic media that an individual or organization is legally required to report.

Data Sequencing and Validation

Criteria:

The following data controls must be adhered to or the CTR magnetic media will be rejected. The data records must be in the following sequence:

- **Transmitter (1A)**
First record on the file - must be only one.
- **Financial Organization (Parent) (2A)**
One of this record type for each parent financial institution (FI) on the file. This record type immediately precedes all records relating to the parent FI.
- **Financial Organization (Branch) (2B)**
One of this record type for each branch reporting within the parent FI. This record type precedes all transaction records for the branch.
- **Currency Transaction (3A)**
One of this record type for each currency transaction being reported for a branch. The Customer Account record will follow the 3A record if needed.
- **Customer Account (3E)**
One of this record type for each customer account affected by this currency transaction.
- **Transactor Part I, Section B (4A)**
One of this record type for each person conducting this transaction. These records are not required if one of the Part I, Section B Reason Incomplete codes has an appropriate entry. However it is the responsibility of the financial institution to provide as much information as possible.
- **Owner Part I, Section A (5A)**
One of this record type for each person or organization on whose behalf the transaction is conducted.

- **Owner DBA, Part I, Section A (5A)**
This record is a continuation of the 5A record to allow the Doing Business As (DBA) name if available.
- **Branch Summary (9A)**
One record for each branch of an FI being reported. It is the last record for the branch.
- **Financial Institution Summary (9B)**
One record for each FI reported. It is the last record for the FI and follows the 9A record for the last branch reported.
- **Designation of Exempt Person (9E)**
One of this record type for each exempt person being reported by a FI. The FI information will relate to the Parent FI 2A record. This record is not required but is used to file DEP, FinCEN Form 110 magnetically.
- **Designation of Exempt Person Continuation (9F)**
If you have a 9E record you must have a 9F continuation record.
- **Designation of Exempt Person Continuation (9G)**
If you have an Affiliate bank, you must have a 9G continuation record.
- **File Summary (9Z)**
Last record on the file - must be only one.

Records that fail to meet these requirements will be coded as correspondence errors and returned to the filer for correction.

Acceptance Procedures:

Filers will be sent an application form, a Declaration Statement and a copy of the Specifications for Magnetic Media Reporting. When ready to file, the Filer will be asked to provide a test file to DCC.

The testing process will be as follows:

- **The test data should consist of a set of sample returns, containing data normally supplied by the filer.** The test file should contain between 50 and 100 documents.
- **Upon receipt of the filer's test file DCC** will test, review and provide feedback to the filer within ten working days.
- **If 95% of the filer's test documents are error-free and the file is correctly formatted,** an acceptance letter will be issued.
- **When a test file is not acceptable, DCC** will identify the errors and discuss the necessary corrections with the filer. When the errors are corrected, the filer should send a new set of test data to DCC. The filer is responsible for correcting their software to eliminate errors. If, after three attempts, the filer's test file continues to be unacceptable, the filer must develop an acceptable plan for correcting deficiencies before any further tests.
- **Accepted filers will be notified and issued** a Transmitter Control Code (TCC). The filer must contact DCC to establish a schedule for transmitting live magnetic returns.
- **When the same service bureau system is** used by several filers, only one test file of magnetic returns is required to cover the acceptance of all participating filers.

Filing Dates

Magnetic media is filed on a biweekly basis (i.e., January 1, 2003 - January 14, 2003). Magnetic media must be prepared and submitted to DCC for processing as soon as possible after the reporting period ends. A fixed reporting cycle will be established for each filer.

In order to allow the filer sufficient time to accumulate all data, create the magnetic media file,

and forward the file to DCC, Treasury has determined that all transactions filed on magnetic media will be considered filed timely if received by the Service **no more than 25 calendar days after the date of the transaction.**

Receipt and Acknowledgment of Magnetic Media Files

Each CTR will be acknowledged to the transmitter as soon as possible after receipt. The transmitter should immediately match the acknowledgments to the original file transmitted.

If the filer does not receive an acknowledgment file, the CTRs **are not considered filed and MUST be resubmitted.** This could be a result of unreadable data, which cannot be processed.

Any CTR, which contains errors, will be flagged and error codes indicating the reason for the error(s) will be returned via acknowledgment record. These error situations should be corrected and the records sent back to DCC as correction records and not as amendments. The acknowledgment record will include only error codes and the minimum information needed to identify individual CTRs.

The logical record length of each acknowledgment record will be 57 characters, blocked 5700. It will contain up to the first ten error codes. See the Acknowledgment Record Formats section.

DCC acknowledges receipt by inserting a document control number in the DCN field of the CTR 3R Record and the DCN field of the Designation of Exempt Person 9R Record. **The DCN number must be included** when resubmitting corrections for those records flagged because of errors.

If you receive acknowledgment of transactions which you did not file or you do not receive acknowledgment for transactions that you did file, please notify the CTR Magnetic Media Coordinator as soon as possible. The Help Desk Phone Number at DCC is (313) 234-2000.

The records on the acknowledgment file will also serve as correspondence to the filer, with the error codes of each record indicating the error(s), which initiated the correspondence.

Filing Amended Reports

If a magnetically filed CTR must be amended, you must file a complete replacement CTR. **All fields must be completed with the correct information, NOT JUST THE DATA FIELDS NEEDING CORRECTION.** If the original CTR was magnetically filed, then any amendments must also be magnetically filed. **Amendments to magnetically filed CTRs must include the DCN from the acknowledgment record, along with the amendment code indicator.**

Magnetic Media Contacts

Direct all requests for Magnetic Media related publications, information, or extensions to the following address:

**Internal Revenue Service
P.O. Box 32063
Detroit, MI 48232-0063
BSA Support Group I, 4th Floor
CTR Magnetic Media
Voice Number (313) 234-2011
Fax Number (313) 234-1614**

General Specifications

Cartridge Specifications

These specifications define the file characteristics acceptable for magnetic media reporting. These characteristics must be adhered to unless specifically authorized by the DCC in writing.

All records should be fixed in length to the size specified for each record type. The standard file characteristics are nine track, EBCDIC, odd parity, 6250 BPI and **standard labels**. The standard data set name to be used on cartridges is **ITFMP. CI047. C4789**. All deviations from the above must be approved in writing by DCC.

An external label must appear on each cartridge submitted for processing. The following information should appear on the label:

- **The transmitters name**
- **Date of preparation**
- **A cartridge number assigned by the preparer, which must match the cartridge number on the internal label (6 alpha numeric characters).**
- **Number of cartridges in file.**
- **Cartridge sequence number (i.e., 01 of 08)**

Note: To allow better control and enhance processing of your files, uniquely numbered cartridge numbers must be transmitted when using multiple cartridges.

The above information will assist DCC in processing and returning cartridges correctly. Cartridges will normally be returned within 30 days of receipt, however they may not be returned in the same shipping containers received. The cartridge record defined in these specifications should have a block size of 14,960 characters.

For the purposes of these specifications the following conventions must be used for internal labels:

- **Header Label**

Standard headers provided they begin with 1HDR, HDR1, VOL1, VOL2, UHL1, or 'b LABEL'. Consist of a maximum of 80 positions.

- **Trailer Label**

Standard trailer labels may be used provided that they begin with 1EOR,1EOF, EOR1, EOF1, EOVI, or EOVI2. Consist of a maximum of 80 positions.

Diskette Specifications:

These specifications define the file characteristics acceptable for diskette media reporting. These characteristics must be adhered to unless specifically authorized by DCC in writing.

All records should be fixed in length to the size specified for each record type.

The standard file characteristic is a 3.5 inch diskette double sided/double density or double sided/high density. The standard data set name to be used is CTR104. All deviations from the above must be approved in writing by DCC.

All diskettes must be generated using MS-DOS on an IBM compatible personal computer in ASCII mode. All alphabetic characters must be in the upper case only.

An external label must appear on each diskette submitted for processing. The following information should appear on the label:

- **The transmitters name**
- **Coverage beginning and ending dates**
- **Date of preparation**
- **Number of diskettes in file**
- **Diskette sequence number (i.e., 01 of 03)**

The above information will assist DCC in processing and returning diskettes. Diskettes will normally be returned within 30 days of receipt, however they may not be returned in the same shipping containers.

The diskette records defined in these specifications should be unblocked 220 character records. The industry standard record delimiter for diskette data records is the two byte combination of A0D0A@ hexadecimal characters (carriage return, line feed).

Overview of File

All original, replacement, amendment, and late report filings can be submitted on magnetic media. The DCN assigned to the error record must be included. The DCN must also be included for

amendments, along with the amendment indicator code.

All dates are to be in the format of century, year, month, day with month and day both being right justified and zero filled. (CCYYMMDD)

Money amounts are 10 positions for detail and 12 positions for summaries and should be right justified and zero filled. Enter dollar amounts only. All cents should be rounded up to the next higher dollar amount (i.e., \$10,000.01 should be reported as \$10,001).

The transaction sequence number, which is generated by the transmitter, will be used in the acknowledgment records sent back to the transmitter. This will be a five digit field starting with one and incremented by one for each succeeding currency transaction report. **It is to be right justified and zero filled.**

All name, address, and city fields are to be **left justified and space filled**.

All 'Filler' fields should be space filled. **Do not use low values** as a substitute for spaces.

Blank fields must be space filled.

Account numbers must NOT contain leading zeroes unless they are part of the actual account number. All entries must be **left justified and space filled**.

All name and address fields relating to CTR data must follow the Name Editing Conventions specified in the attachments.

Do not include lower case characters.

Record Types (Input)

Transmitter (1A) Summary Record - Required

The first record on each file is the transmitter record, which contains information identifying the transmitter (person or organization handling the data accumulation and formatting). There will be only one Transmitter Record on each file. Include the following data elements in this record:

Field Pos.	Field Name	Length	Description and Remarks
1 - 2	Record Type	2	Required. Enter '1A'.
3 - 37	Transmitter Name	35	Required. Enter the name of individual or organization who is transmitting the transactions on this file.
38 - 72	Transmitter Address	35	Required. Enter the street address of the transmitter.
73 - 99	Transmitter City	27	Required. Enter the city of the transmitter.
100 - 101	Transmitter State	2	Required. Enter the transmitter state in abbreviated form. Use the country and state standard abbreviations in the attachments.
102- 110	Transmitter Zip Code	9	Required. Enter the transmitter zip code.
111 - 113	Transmitter Area Code	3	Required. Enter the transmitter area code.
114 - 120	Transmitter Telephone	7	Required. Enter the transmitter telephone number
121 - 155	Transmitter Contact	35	Required. Enter the name of an official contact for the transmitter.
156 - 164	Transmitter EIN	9	Required. Must be the valid 9 digit number assigned to the transmitter by IRS. Do not enter hyphens, slashes, ALPHA characters, all 9's, or all zeroes.
165 - 172	Coverage Beginning Date	8	Required. This will be the date of the earliest original transaction on the file. It is a numeric 8 digit field in century ,year, month, day format (ccyymmdd).
173 - 180	Coverage Ending Date	8	Required. This will be the date of the latest original transaction on the file. It is a numeric 8 digit field in century,

			year, month, day format (ccyymmdd).
181 - 188	Transmitter Control Code	8	Required. This is the code assigned by the IRS. This code is also entered on Form 4804.
189-196	Signature Date	8	Required. This is the date of approval of the documents. It is a numeric 8 digit field in century, year, month, day format (transmittal signature date/ file creation date).
197 - 210	Filler	14	
211 - 220	User Field	10	

Parent Organization Financial Institution (2A) Record - Required

This record identifies information on FI Headquarters. The number of FI (Parent) records depends on the number of different FIs included on the file. Include the following data elements in this record:

Field Pos.	Field Name	Length	Description and Remarks
1 - 2	Record Type	2	Required. Enter '2A'.
3	Federal Regulator or BSA Examiner	1	Required. Enter the federal regulator or BSA examiner, using the following codes: 1 Comptroller of the Currency (OCC) 2 Federal Deposit Insurance Corp. (FDIC) 3 Federal Reserve System (FRS) 4 Office of Thrift Supervision (OTS) 5 National Credit Union Assoc. (NCUA) 6 Securities and Exchange Comm. (SEC) 7 Internal Revenue Service (IRS) 8 U.S. Postal Service (UPS) 9 Commodities Future Trading Commission (CFTC) 0 State Regulator
4 - 38	Institution Name	35	Required. Enter the financial institution headquarters full legal name.
39 - 73	Institution Address	35	Required. Enter the address of the financial institution headquarters. Do not abbreviate.
74 -100	Institution City	27	Required. Enter the city of the financial institutions headquarters.
101-102	Institution State	2	Required. Enter the 2 character state code from the standard state code abbreviations in the attachment.
103-111	Institution Zip Code	9	Required. Enter the zip code for the financial institution headquarters.
112-120	Institution EIN/SSN	9	Required. Enter the financial institution's EIN. If the financial institution does not have an EIN, enter the SSN of the institutions principal owner.
121-129	Institution Routing (MICR) Number	9	Required. If a depository institution, enter the routing (Magnetic Ink Character Recognition (MICR)) number for the financial institution headquarters.
130-137	Transmitter Control Code (Financial Institutions)	8	Required. This is the code assigned by DCC for the Financial Institution. This code is also entered on Form 4804.
138-210	Filler	73	
211-220	User Field	10	

Financial Institution Branch Summary (2B) Record - Required

This record identifies information on the FI branch where the transactions were completed. The number of FI (branch) records is dependent on the number of branches the FI is reporting on the magnetic media file. Include the following data elements in these records:

Field Pos.	Field Name	Length	Description and Remarks
1 - 2	Record Type	2	Required. Enter '2B'.
3 - 9	Branch Code	7	Required. Enter the branch number for the submitting branch. Right justify and zero fill.
10	Federal Regulator or BSA Examiner Code	1	Required. Enter the federal regulator or BSA examiner, using the following codes: <ul style="list-style-type: none"> 1 Comptroller of the Currency (OCC) 2 Federal Deposit Insurance Corporation (FDIC) 3 Federal Reserve System (FRS) 4 Office of Thrift Supervision (OTS) 5 National Credit Union Association (NCUA) 6 Securities and Exchange Commission (SEC) 7 Internal Revenue Service (IRS) 8 U.S. Postal Service (USPS) 9 Commodities Future Trading Commission (CFTC) 0 State Regulator
11 -45	Institution Name	35	Required. Enter the full legal name of branch where transaction took place.
46- 80	Institution Address	35	Required. Enter address of the branch.
81- 107	Institution City	27	Required. Enter name of city where the branch is located.
108-109	Institution State	2	Required. Enter state code where the branch is located.
110-118	Institution Zip Code	9	Required. Enter the zip code for the branch.
119-127	Institution EIN/SSN	9	Required. Enter the EIN or SSN for the branch.
128-136	Institution Routing Number	9	Required. Enter the Routing number for branch. 8 digit numbers are acceptable but should be left justified with a space in the ninth position.
137-156	Approving Official's Title	20	Required. Enter the title of the approving official. Left justify and space fill.
157-191	Approving Official's Name	35	Required. Enter the name of the approving official. Left justify and space fill.
192	Resolution Code	1	Required. Enter the code to show where correspondence relating to these transactions is to be sent. 1 for financial institution branch, 2 for parent financial institution, 3 for transmitter.
193-210	Filler	18	
211-220	User Field	10	

Currency Transaction Summary (3A) Record - Required

These records identify and describe the actual currency transaction. Indicators within this record identify the necessity for the following records.

- X Customer Account Records, if customer accounts are affected.
- X Owner (Part I, Section A) Records, (Person (s) on whose behalf transaction is conducted).
- X Transactor (Part I, Section B) Records, if number of Transactors is greater than zero, (Individual(s) conducting transaction, if other than Part I Section A) .

There can be any number of this record type, one for each transaction. Include the following data elements in these records:

Field Pos.	Field Name	Length	Description and Remarks																
1 - 2	Record Type	2	Required. Enter '3A'.																
3 - 9	Branch Code	7	Required. Enter the branch number for the submitting branch, right justify and zero fill.																
10 - 14	Transaction Sequence No.	5	Required. Enter a sequential number starting with 00001 and increment by 1 for each '3A' record on file.																
15 - 21	Type of Transaction Codes	7	Required. Enter the appropriate code(s) to identify the following type of transaction(s): <table style="margin-left: 40px; border: none;"> <thead> <tr> <th style="text-align: left;">Code</th> <th style="text-align: left;">Meaning</th> </tr> </thead> <tbody> <tr> <td>15</td> <td>1 Foreign Currency</td> </tr> <tr> <td>16</td> <td>2 Wire Transfer(s)</td> </tr> <tr> <td>17</td> <td>3 Negotiable Instrument(s) Purchased</td> </tr> <tr> <td>18</td> <td>4 Negotiable Instrument(s) Cashed</td> </tr> <tr> <td>19</td> <td>5 Currency Exchange(s)</td> </tr> <tr> <td>20</td> <td>6 Deposits/Withdrawals Enter the Account number(s) in 3E record(s).</td> </tr> <tr> <td>21</td> <td>7 Other, If a transaction is not identified above provide a description in 'Other Transaction'.</td> </tr> </tbody> </table>	Code	Meaning	15	1 Foreign Currency	16	2 Wire Transfer(s)	17	3 Negotiable Instrument(s) Purchased	18	4 Negotiable Instrument(s) Cashed	19	5 Currency Exchange(s)	20	6 Deposits/Withdrawals Enter the Account number(s) in 3E record(s).	21	7 Other, If a transaction is not identified above provide a description in 'Other Transaction'.
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21	7 Other, If a transaction is not identified above provide a description in 'Other Transaction'.																		
22 - 45	Other Transaction Description.	24	Enter the description of the transaction when type of transaction is 7.																
46 - 47	Foreign Currency Country Code	2	If foreign currency is involved , enter the two character standard country code from attachment. If multiple foreign currencies are involved, identify the country for which the largest amount is exchanged.																
48 - 57	Transaction Amount Cash-In	10	Required. Total amount of cash-in currency involved in this transaction. If a transaction involves both checks and currency, such as a deposit transaction, enter only the currency amount. Enter only dollar amounts, no cents, always round cents up to next higher dollar. Do not truncate. Right justify and zero fill.																

Currency Transaction Summary (3A) Record - (continued)

Field Pos.	Field Name	Length	Description and Remarks
58 -67	Transaction Amount Cash-Out	10	Required. Total amount of cash-out currency involved in this transaction. If a transaction involves both checks and currency, such as a deposit transaction, enter only the currency dollar amounts, no cents, always round cents up to next higher dollar. Do not truncate. Right justify and zero fill.
68-75	Transaction Date	8	Required. Date of this transaction. Numeric eight digit field in the format century, year, month, and day .
76-78	Number of Customer Account Records	3	Required. Enter a value within the range 000 thru 999 which will identify the number of Customer Account (3E) Records associated with this transaction.
79-81	Number of Transactors (Part I, B)	3	Required. Enter a numeric value (000 thru 999) which represents the number of Transactor (4A) Records associated with this transaction.
82-84	Number of Owners (Part I, A)	3	Required. Enter a numeric value (001 thru 999) which represents the number of Owner (5A) Records associated with this transaction.
85	Part I, B Reason Incomplete Armored Car	1	Enter 'A' if this transaction is by an armored car service.
86	Part I, B Reason Incomplete Mail Deposit or Shipment	1	Enter 'B' if this transaction is by mail deposit/shipment.
87	Part I, B Reason Incomplete Night Deposit or ATM Transaction	1	Enter 'C' if this transaction is a night deposit or ATM transaction.
88	Part I, B Reason Incomplete Multiple Transaction	1	Enter 'D' if this transaction is a multiple transaction. Example: If there are multiple transactions that are only reportable after aggregating.
89	Part I, B Reason Incomplete Conducted on Own Behalf	1	Enter 'E' if this transaction was conducted on own behalf.
90	Amendment Indicator	1	Enter 'A' if this transaction is an amendment to a previous transaction. A DCN must be entered in positions 173-186.
91	Multiple Persons	1	Enter 'B' if this transaction is being conducted by more than one person or on behalf of more than one person.
92	Multiple Transactions	1	Enter 'C' if there is knowledge that there are multiple transactions.

Currency Transaction Summary (3A) Record - (continued)

Field Pos.	Field Name	Length	Description and Remarks
93-127	Preparer Name	35	Required. Enter the name of individual designated by the FI to prepare this report. Left justify and space fill. Follow name editing conventions in attachments.
128-162	Contact Person	35	Required. Enter the name of an individual to contact concerning questions about this CTR.
163-165	Contact Person's Area Code	3	Required. Enter the area code of the contact person.
166-172	Contact Person's Telephone Number	7	Required. Enter the phone number of the contact person.
173-186	Document Control Number	14	Required. This field contains all zeroes on initial submissions, but must contain the DCN (which is provided by the IRS on the acknowledgment record) for each correction or amendment record being submitted.
187-188	IRS Use	2	For use by DCC only.
189	Backfile Indicator	1	Enter 'B' if this transaction is being backfiled. Back file: If you were directed by the Compliance Review Group to back file documents, not originally filed as required by BSA Regulations, please use this indicator. DO NOT use this indicator for any other reason. Questions on backfiling should be directed to the Compliance Review Group at (313) 234-1613.
190	Correspondence Indicator	1	Enter 'C' , if this transaction is a correction or replacement and the information is unattainable. This code will replace forwarding a letter telling us the missing information is unavailable. The errors will not be resent.
191-200	Foreign Cash In	10	Complete this Item only if foreign currency is involved. Enter the total amount of foreign cash received, if you are reporting a cash-in transaction over \$10,000 in Item 26. <u>Do not</u> convert to U.S. dollars and <u>do not</u> indicate the currency symbol. Round decimals to the next higher amount. Do not truncate. Right justify, zero fill.
201-210	Foreign Cash Out	10	Complete this Item only if foreign currency is involved. Enter the total amount of foreign cash disbursed, if you are reporting a cash-in transaction over \$10,000 in Item 27. <u>Do not</u> convert to U.S. dollars and <u>do not</u> indicate the currency symbol. Round decimals to the next higher amount. Do not truncate. Right justify, zero fill.
211-220	Filler	10	

Customer Account Summary (3E) Record

This record is required if any customer accounts are affected by this transaction. If a deposit or withdrawal is made from a savings, checking, share, or other account enter the appropriate account number. There should be one entry for each account affected. A maximum of six (6) occurrences is allowed per record. Enter the count of the number of accounts for each record in the Number of Customer Accounts. Include the following data elements for this record:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter '3E'.
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch. Right justified and zero filled.
10-14	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated Currency Transaction (3A) Record.
15	Number of Customer Accounts	1	Required. Enter the count of customer accounts reported on this record.
16-159	Customer Account Information (occurs 6 times)	24	Required. Enter the number of the customer account(s) affected by this transaction. Left justify and space fill. 'Account Number' can occur a maximum of 6 times per 3E Record. Each occurrence will consist of 24 characters, left justify and space fill. If less than 6 occurrences space fill.
160-210	Filler	49	
211-220	User Field	10	

Transactor Summary (4A) Record, Part I, Section B

Transactor Summary (4A) Record, This record is required unless there is an entry of “A” thru “E” in the reason incomplete code in Part 1B. The number of transactors (Part 1, B) on the 3A record must match the count of the number of 4A records. If there is an entry of “A” thru “E” in the reason incomplete code in Part 1B, this record is optional, and either full or partial information is acceptable. This record must contain information relating to the person who conducted the transaction. Each person involved in a transaction must be positively identified. Include the following data elements in these records:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter ‘4A’.
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch.
10-14	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated Currency Transaction (3A) Record.
15-49	Name	35	Required. Enter name of individual conducting the transaction, last name/first name/middle initial. Left justified and space filled. Follow the Name Editing Conventions shown in the attachments.

50-84	Address	35	Required. Enter the street address of the individual who conducted this transaction. Left justified and space filled.
85-111	City	27	Required. Enter the city of individual who conducted this transaction. Left justified and space filled.
112-113	State	2	Required. From the attachment, select the appropriate two digit state code.
114-122	Zip Code	9	Required. Enter zip code of individual conducting transaction.
123-124	Country	2	Required. From the attachment, select country code.
125-133	SSN	9	Required. Enter the SSN of individual conducting transaction.
134	Method of Identification	1	<p>Required. Enter the appropriate code for the method by which the individual’s identity was verified.</p> <ul style="list-style-type: none"> A Drivers’ License/State Id B Passport C Alien Registration D Other Identification E Disabled/elderly who do not have the required Id F Foreign Entity with no ID L Law Enforcement M Amish Customer no ID <p>Note: Codes “E”, “F”, “L” and “M” (customer with no ID), No entry required for positions 135-136, Id Issued by, and positions 137-158, Id Number.</p>

Transactor Summary (4A) Record, Part I, Section B (continued)

135-136	ID Issued by State/Country	2	Required. Enter from the Country and State Code Attachment the appropriate code to designate country or state where identification was issued.
137-158	ID Number	22	Required. Enter the number from the identification. (If "L" in Method of ID enter the badge number if available).
159-166	Date of Birth	8	Required. Enter the date of birth of the individual conducting this transaction. It will consist of a eight digit numeric field in the century, year, month, day format (CCYYMMDD).
167-210	Filler	44	
211-220	User Field	10	

Owner Summary (5A) Record, Part I, Section A - Required

This record is **required** to identify the individual(s) or organization(s) on whose behalf transaction(s) transaction was conducted. If the transaction was completed for more than one individual or organization there should be a record for each individual/organization. Include the following data elements for these records:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter '5A'.
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch. Right justify and zero fill.
10-14	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated Currency Transaction (3A) Record.
15	DBA Record Indicator	1	Required. Enter '1', If there is a DBA (5A) Continuation Record.
16-50	Org. or Individ. Name	35	Required. Enter the name of the person/organization on whose behalf the transaction is conducted. Individual names are in the format last name/first name/middle initial. Follow name editing conventions and standard abbreviations shown in the attachments.
51-85	Org. or Individ. Address	35	Required. Enter the street address of the owner.
86-112	Org. or Individ. City	27	Required. Enter the city of the owner.
113-114	Org. or Individ. State	2	Required. Enter the 2 character code identifying the state.
115-123	Org. or Individ. Zip Code	9	Required. Enter the Zip Code.
124-125	Org. or Individ. Country	2	Required. From the attachment, select the 2 character code identifying the country.
126-134	EIN/SSN	9	Required. Enter the owners EIN or SSN.
135-169	Occ., Prof., Bus.	35	Required. Enter the occupation, profession, or business of the individual for whom the transaction was conducted. (i.e., Attorney, Securities Broker, Auto Dealer).
170	Method of Identification	1	<p>Required for all individuals conducting a reportable transaction for themselves. Enter the appropriate code for identification provided.</p> <ul style="list-style-type: none"> A Drivers' License/State Id B Passport C Alien Registration D Other Identification E Disabled/elderly who do not have the required Id F Foreign Entity with no ID G Government Agency (no ID on CTR) L Law Enforcement M Amish Customer no ID <p>Note: Codes "E", "F", "G", "L" and "M" with no ID, No entry required for positions 171-172, Id Issued by, and positions 173-196, Id Number.</p>

Owner Summary (5A) Record (continued)

Field Pos.	Field Name	Length	Description and Remarks
171-172	ID Issued by	2	Required. Enter from the attachment the appropriate code to designate the state/country where the identification was issued.
173-196	ID Number	24	Required. Enter the number from the identification.
197-204	Date of Birth	8	Required, if Individual. Enter the date of birth of the individual for whom the transaction was conducted. It will consist of a eight digit numeric field in century, year, month, day format (CCYYMMDD).
205-210	Filler	6	
211-220	User Field	10	

DBA RECORD (second 5A record)

If the FI has knowledge of a separate Doing Business As (DBA) name, two 5A records will be filed for the owner instead of one 5A record. Enter a '1' in the DBA Record Indicator on the first 5A record. The two 5A records described above will be treated as **one** 5A record. Therefore the error code-numbering scheme for the acknowledgement record which reflects the **occurrence** number of the 5A records will treat these two 5A records as one **occurrence**. Similarly, any counts of the number of '5A' records will **not** include the DBA records. The second 5A record will include the following data elements:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter '5A'.
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch.
10-14	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated Currency Transaction 3A Record.
15	DBA Indicator	1	Required. Enter '9'.
16-50	DBA Name	35	Required. Enter if knowledge of a separate 'doing business as' name. Follow the name editing conventions and standard abbreviations as shown in the attachments.
51-210	Filler	160	
211-220	User Field	10	

Branch Summary (9A) Record - Required

There should be one of these records on the file for each FI branch which is being reported. This record contains counts of the number of each type record associated with the branch. Include the following data elements in these records:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter '9A'.
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch. Right justified and zero filled.
10-19	CTR Count	10	Required. Enter the number of CTRs (3A) records for the branch.
20-29	Customer Account Record Count	10	Required. Enter the number of customer account (3E) records for the branch.
30-39	Transactor Record Count	10	Required. Enter the number of transactor (4A) records for the branch.
40-49	Owner Record Count	10	Required. Enter the number of owner (5A) records for the branch.
50-61	CTR Total Amount Reported (Cash In)	12	Required. Enter the sum of the dollar amount of currency transactions (cash-in) for the branch.
62-73	CTR Total Amount Reported (Cash Out)	12	Required. Enter the sum of the total dollar amount of currency (cash-out) for the branch.
74-210	Filler	137	
211-220	User Field	10	

Financial Institution Parent Summary (9B) Record - Required

There should be one of these records for each FI reported. This record is to follow the last reported FI (Branch) '9A' Summary Record for the FI. This record contains counts of the number of each type record associated with the FIs. Include the following data elements for these records:

<u>Field Pos.</u>	<u>Field Name</u>	<u>Length</u>	<u>Description and Remarks</u>
1-2	Record Type	2	Required. Enter '9B'.
3-9	Branch Record Count	7	Required. Enter count of Branch Records for the FI.
10-19	CTR Count	10	Required. Enter count of CTR (3A) records for the FI.
20-29	Customer Account Record Count	10	Required. Enter count of customer account (3E) records for the FI.
30- 39	Transactor Record Count	10	Required. Enter count of conductor (4A) records for the FI.
40- 49	Owner Record Count	10	Required. Enter count of owner (5A) records for the FI.
50-61	Total CTR Amount Cash In	12	Required. Enter the sum of the dollar amounts of currency cash-in for the FI.
62-73	Total CTR Amount Cash Out	12	Required. Enter the sum of the dollar amounts of currency cash-out for the FI.
74-210	Filler	137	
211-220	User Field	10	

Designation of Exempt Person (9E) Record

This record is required by any bank that wishes to designate a customer as an exempt person for purposes of CTR reporting. In addition banks must use this record for the biennial renewal of exempt person designation of eligible non-listed businesses and payroll customers. This record is also used to revoke the designation of a customer as an exempt person.

<u>Field Pos</u>	<u>Field Name</u>	<u>Length</u>	<u>Description and Remarks</u>
1-2	Record Type	2	Required. Enter "9E."
3-7	Transaction Sequence Number	5	Required. Enter a sequential number, increment by 1 for each "9E" record on file.
8	Type of Transaction	1	Required. Enter "A" if Initial Designation "B" if Biennial Renewal "C" if Exemption Amended "D" if Exemption Revoked. (note: for "C" and "D" a DCN must be present in positions 174-187).
9	Document Indicator	1	Required. Enter "2" to indicate DEP Form 110.
10-44	Business or Sole Proprietor Name	35	Required. Enter the Full legal name of the business being exempted, or the complete last name/first name of the sole proprietor being exempt.
45 - 79	DBA Name	35	Required. Enter if knowledge of a separate "doing business as" name.
80 -114	Exempt Person Street Address	35	Required. Enter the street address of exempt person.
115-141	Exempt Person City	27	Required. Enter the city of exempt person.
142-143	Exempt Person State	2	Required. Enter the state of exempt person.
144-152	Exempt Person Zip Code	9	Required. Enter the zip code of exempt person.
153-154	Exempt Person Country Code	2	Enter the country code of the exempt person
155-163	TIN of Exempt Person	9	Required. Enter the Taxpayer Identification of the exempt person.
164	Exemption Basis Indicator	1	Required. Enter the appropriate code for the basis of the exemption. "A" Bank "B" Government Agency/Authority "C" Listed Company "D" Listed Company Subsidiary "E" Eligible Non-listed Business "F" Payroll Customer

165-172	Effective Date of Exemption	8	Required. Enter the date the exemption is effective. It will consist of an eight digit numeric field in century, year, month, day format (CCYYMMDD).
173	Exemption Change Indicator	1	Required. If Eligible Non-listed Business or Payroll Customer only. Enter "A" if there has been a change in control of the exempt person. If no change has occurred enter "B".
174-187	Document Control Number	14	Required. This field contains all zeroes on initial submissions, but must contain the DCN (which is provided by the IRS on the acknowledgment record) for each updated record.
188	Replacement Indicator	1	Enter 'R' if this transaction is a replacement or correction to a previous transaction. A DCN must be entered in positions 174-187.
189-210	Filler	22	
211-220	User Field	10	

Designation of Exempt Person (9F) Continuation Record

This record is required to identify the Bank contact and approval information. **You must have a 9F for every 9E record.** The following data records are required for this record.

<u>Field Pos.</u>	<u>Field Name</u>	<u>Length</u>	<u>Description and Remarks</u>
1-2	Record Type	2	Required. Enter “9F”.
3-7	Transaction Seq. No.	5	Required. Enter the transaction sequence number form the associated “9E” record.
8-27	Approving official Title	20	Required. Enter the title of the Approving Official for initial approval or biennial renewal.
28-62	Approving official Name	35	Required. Enter the name of the approving Official for initial approval or biennial renewal.
63-70	Date of Approval	8	Required. Enter the Date the Exemption was approved.
71-105	Name of Contact Person	35	Required. Enter the complete name of the person within the depository institution to be contacted for questions regarding this exemption.
106-115	Contact Phone Number	10	Required. Enter the Phone number of the Contact Person including area code.
116-150	Name of Approving Official for Biennial Updates Only	35	Required. Enter the Name of the Approving Official for Biennial Updates only.
151-210	Filler	60	
211-220	User Field	10	

Designation of Exempt Person (9G) Continuation Record

This record is required to enter the Affiliated bank information. You may have up to 99 occurrences of this record. The following data records are required for this record.

<u>Field Pos.</u>	<u>Field Name</u>	<u>Length</u>	<u>Description and Remarks</u>
1-2	Record Type	2	Required. Enter “ 9G. ”
3-7	Transaction Seq. No.	5	Required. Enter the transaction sequence number form the associated “ 9E ” record.
8	Additional Affiliated Banks	1	Required. ‘Y’ in this field acknowledges there are additional Affiliated Banks.
9-43	Affiliate Bank Name	35	Required. Enter the financial institution headquarters full legal name.
44-78	Affiliate Bank Address	35	Required. Enter the address of the financial institution headquarters. Do not abbreviate.
79-105	Affiliate Bank City	27	Required. Enter the city of the financial Affiliate Banks headquarters.
106-107	Affiliate Bank State	2	Required. Enter the 2 character state code from the standard state code abbreviations in the attachment.
108-116	Affiliate Bank Zip Code	9	Required. Enter the zip code for the Affiliate Bank headquarters.
117-125	Affiliate Bank EIN/SSN	9	Required. Enter the financial Affiliate Bank’s EIN. If the Affiliate Bank does not have an EIN, enter the SSN of the Affiliate Banks principal owner.
126	Affiliate Bank Federal Regulator	1	Required. Enter the federal regulator using the following codes: A Comptroller of the Currency (OCC) B Federal Deposit Insurance Corp. (FDIC) C Federal Reserve System (FRS) D Office of Thrift Supervision (OTS) E National Credit Union Assoc. (NCUA) F Internal Revenue Service (IRS)
127-209	Filler	83	
210-220	User Field	11	

File Summary (9Z) Record - Required

There should only be one of these records on the file and it must be the very last record on the file. This record contains counts of the number of the various record types that are on the file. These records should contain the following:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter '9Z'.
3-12	Parent Institution Record Count	10	Required. Enter count of parent institution records
13-22	Branch Transaction Record Cnt	10	Required. Enter count of branch institution records.
23-32	CTR Count	10	Required. Enter count of CTRs
33-42	Customer Account Record Count	10	Required. Enter count of customer account records.
43-52	Transactor Record Count	10	Required. Enter count of transactor records.
53-62	Owner Record Count	10	Required. Enter count of owner records.
63-74	Total CTR Amount Cash In	12	Required. Enter the sum of the dollar amounts of currency cash-in for the FI.
75-86	Total CTR Amount Cash Out	12	Required. Enter the sum of the dollar amounts of currency cash-out for the FI.
87-98	Total Exempt Record Count	12	Required. Enter count of Designation of Exempt Person Records (9E).
99-110	Total Affiliate Bank Record Count	12	Required. Enter count of Affiliate Bank Records (9G).
111-210	Filler	100	
211-220	User Field	10	

Acknowledgment Record Formats

Transmitter (1A) Output Record

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Transmitter 1A record
3-10	Coverage Beginning Date	8	From 1A Record Positions 165-172
11-18	Coverage Ending Date	8	From 1A Record Positions 173-180
19-26	Transmitter Control Code (TCC)	8	From 1A Record Positions 181-188
27-56	Error Codes 1 thru 10	3 each	Assigned by DCC for Errors.
57	Filler	1	Space filled.

Financial Institution (2A) Output Record

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Institution Branch 2A Record
3-10	Institution TCC	8	From 2A Record Positions 130-137
11-40	Error Codes	3 each	Assigned by DCC for Errors
41-57	Filler	17	Space filled

Branch Financial Institution (2B) Output Record

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Institution Branch 2B Record 2B
3-9	Branch Code	7	From 2B Record Positions 3-9
10-39	Error Codes	3 each	Assigned by DCC for Errors
40-57	Filler	18	Space filled

Acknowledgment Record Formats (continued)

CTR Information (3R) Output Record

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	CTR 3R record
3-7	Transaction Seq. No.	5	From 3A record positions 10 -14.
8-21	Document Control Number	14	Assigned by DCC. A unique identifying number. First two digits are century, last two digits are a identifying number.
22-31	User Field	10	From 3A record positions 211-220
32-55	Error Codes	3 each	Assigned by DCC. Contains up to 8 error codes.
56	Return correspondence Indicator	1	'C' in this field acknowledges receipt of a replacement record where the FI does not have the required missing information. The errors will not be flagged again. The "C" will be returned when the correspondence indicator from the 3A record is coded.
57	Filler	1	

Designation of Exempt Person (9R) Output Record

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Designation of Exempt Person 9R Record
3-7	Transaction Seq. No.	5	From 9E record positions 3-7
8-21	Document Control Number	14	Assigned by DCC. A unique identifying number.
22-31	User Field	10	From 9E record positions 211-220.
32-55	Error Codes	3 each	Assigned by DCC. Contains up to 8 error codes.
56-57	Filler	2	

Trailer Record for Transmitter (9Z) Output Record

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Trailer 9Z Record
3-12	Number of FIs in File	10	Generated by DCC
13-22	Number of CTRs in File	10	Generated by DCC
23-32	Number of Designation of Exempt Persons in File	10	Generated by DCC
33-57	Filler	25	Space filled

Validation Error Codes

File Error Codes

<u>Error Code</u>	<u>Error Source</u>	<u>Error Code</u>	<u>Error Source</u>
F01	Non-numeric record counts reported on 1A summary record.	F18	No File Summary (9Z) Record on file.
F02	Number or records reported does not match the computer count for the 2A record or 2A record is not the second record on the file.	F19	Branch summary amounts do not equal total of transaction amounts.
F03	Number of records reported does not match the computer count for the 2B record or 2B record is not the third record on the file.	F20	File summary amounts do not equal total of transaction amounts
F04	Number of records reported does not match the computer count for the 3A record, or 3A is not the fourth record on the file or the 3A record has no corresponding 5A record.	F21	No FI Summary (9B) Record on file
F08	Number of records reported does not match the computer count 3E records.	F22	FI summary amounts do not equal total of transaction amounts.
F09	Number of records reported does not match computer count for 4A records.	F23	Number of records reported does not match computer count for 9E records
F10	Number of records reported does not match computer count for 5A records.		
F16	No Transmitter (1A) Record on file.		
F17	No Branch Summary (9A) Record on file or a 9A record is found with no prior 3A record.		

Transmitter (1A) Rec. Error Codes:**Financial Institution (2A & 2B) Record Error Codes**

<u>Error Code</u>	<u>Error Source</u>	<u>Error Code</u>	<u>Error Source</u>
T01	Transmitter Name is blank.	001	FI Name is blank or contains leading spaces.
T02	Transmitter Address is blank.	002	FI Address is blank.
T03	Transmitter City is blank.	003	FI City is blank.
T04	Transmitter State is blank.	004	FI State is blank.
T05	Transmitter Zip-Code is blank.	007	FI Zip-Code is blank, zeroes, not numeric, or invalid.
T06	Transmitter Area Code and/or Telephone Number is blank.	008	FI Federal Regulator or BSA examiner code is blank or invalid.
T07	Transmitter Contact Name is blank.	010	Name of Approving Official is blank.
T08	Transmitter EIN is blank or invalid.	011	Title of Approving Official is blank.
T09	Coverage beginning date is blank or invalid.	012	FI EIN/SSN is missing, all zeros, all 9's, invalid or non numeric .
T10	Coverage ending date is blank or invalid.	013	FI Routing Number is not numeric, blank, or zeroes.
T11	Coverage ending date is more than 25 days from coverage beginning date. (Information only)	014	FI Resolution Code is invalid or missing.
T12	Transmitter Control Code is blank or invalid.		

Currency Transaction (3A) Record Error Codes

number of Transactor Records present.

<u>Error Code</u>	<u>Error Source</u>	<u>Error Code</u>	<u>Error Source</u>
015	FI TCC is blank or invalid.		
021	Type of transaction is blank or contains codes other than 1 thru 7.		
022	Cash In or Cash out is missing or non-numeric numeric.	034	Number of owners is not numeric.
023	Amounts greater than 20 million will generate this error code as information. Please verify the cash in or cash out amount.	035	Number of owners value does not equal the number of Owner Records present.
024	Date of transaction is invalid. a. Date not numeric. b. Month not a valid code 01-12. c. Day no a valid code 01-31 d. Date not less than current date.	036	Number of Customer Account Records is not numeric.
025	Contact name is missing.	037	Number of customer accounts value does not equal the number of Customer Account Records present.
026	Contact phone number is missing.	038	Invalid Document Control Number Returned. (CTR not updated)
028	Preparer Name is missing.	039	Missing Account Number for Transaction types of Deposit or Withdraw.
029	Preparer Title is missing.	040	Reason Part I Section B incomplete is spaces but no Transactor Record is presented.
030	Number of transactors is not numeric.		
031	Number of transactors is numeric and no Transactor Records are present.		
032	Number of transactors is numeric but the value does not equal the		

Customer Account (3E) Record Error Codes

<u>Error Code</u>	<u>Error Source</u>
083	Number of customer accounts not
084	Number of customer accounts does not match number of accounts listed.

NOTE: For multiple 3E records, other than the first occurrence, the error code(s) generated will reflect the occurrence number in the high order digit of the error code(s) (i.e. error 283 indicates the second 3E record has an error 083).

Transactor (4A) Record Error Codes

<u>Error Code</u>	<u>Error Source</u>
091	Transactor Name is invalid. numeric.
092	Transactor Number and street is blank.
093	Transactor City is blank.
094	Transactor State is blank.
095	Transactor Country is US, CA or MX but state is not a standard abbreviation.
096	Transactor Country is not a valid country abbreviation.
097	Transactor Zip-Code is blank, zeroes, or invalid and the Country is US.
098	Transactor SSN is spaces, zeros or non-numeric.
100	Transactor Method of identification is not a valid code.
101	Transactor Method of identification issued by is not a valid code.
102	Transactor Address is missing.
103	Transactor Date of birth is missing or invalid.
104	Transactor SSN is not valid according to our files.

**Transactor (4A) Record Error Codes
(continued)**

105 Transactor SSN does not match our file a valid SSN for the name shown.

NOTE: For multiple 4A records, other than the first occurrence, the error code(s) generated will reflect the occurrence number in the high order digit of the error code(s) (i.e. error 291 indicates the second 4A record has an error 091).

Error Codes 104 and 105 are warning messages only. The following message is printed on our paper correspondence for Error Codes 104, 105, 128 & 129:

“The following error reflects a possible mismatch between the name reported and the corresponding SSN/EIN. We would greatly appreciate any assistance you can provide to verify that the name and number are correct”.

Owner (5A) Record Error Codes

<u>Error Code</u>	<u>Error Source</u>
111	Owner Name is invalid. a. Blank, b. not in proper format, c. contains no slashes for individual.
112	Owner Number and street is blank.
113	Owner City is blank.
114	Owner State is blank.
115	Owner Country is US, CA or MX but state is not a standard abbreviation.
116	Owner Country is not a valid country abbreviation.
117	Owner Zip-Code is blank, zeroes, or invalid and Country code is US.
119	Owner Identifying number Record is invalid. Identifying number is zeros, all 9's, invalid or non-numeric.
120	Owner Business occupation or profession is missing.
122	Owner Address contains punctuation.
125	Owner Alien Id information is missing when EIN/SSN is blank.

Owner (5A) Record Error Codes (continued)

Designation of Exempt Person (9E, 9F and 9G) Record Error Codes

Error Code	Error Source	Error Code	Error Source
126	Owner Date of birth is missing or invalid.	901	Type of Transaction is blank or contains codes other than A or B.
128	Owner SSN/EIN is not valid according to our files.	902	Exemption Status contains codes
129	Owner SSN/EIN does not match our file as a valid SSN/EIN for the name shown.	903	Business or Sole Proprietor Name is blank or contains leading spaces.
130	Owner 'DBA' name is missing.	904	Exempt Person address is blank
131	Owner "DBA" record is present without an associated owner "5A" record.	905	Exempt Person state is blank
		906	Exempt Person zip code is blank, zeroes, not numeric or invalid and Exempt Person Country Code is blank or invalid
		907	Exempt Person TIN is missing, invalid or not numeric.
		908	Exemption Basis is blank or contains codes other than A,B,C,D,E, or F.
		909	Effective date of the exemption is A. Date not numeric B. Month not 01-12. C. Day not a valid code 01-31.
		910	Has there been a change in control of the exempt person. Exemption Basis is not E or F and A or B is in field. Or contains codes other than A or B.

Note : For multiple 5A records, other than the first occurrence, the error code(s) will reflect the occurrence number in the high order digit of the error code(s) (i.e. error 211 indicates the second 5A record has an error 111).

Error code 128 and 129 are warning messages only.

Designation of Exempt Person (9E, 9F and 9G) Record Error Codes (continued)

Designation of Exempt Person (9E, 9F and 9G) Record Error Codes (continued)

Error Code	Error Source
911	9F record is missing. Must have a 9F record for every 9E record.
912	Approving official name blank.
913	Date of Approval (signature) is blank or invalid. A. Date not numeric B. Month not 01-12. C. Day not a valid code 01-31. D. Date is not less than current date.
914	Contact phone is blank or does not contain 10 numeric characters (3 digit area code and 7 digit number)
915	Biennial Renewal is entered and name of approving official for biennial update is missing.
916	Approving official for biennial updates is entered but biennial renewal is not entered.
917	Invalid Document Control Number Returned. (CTR not updated)
918	Contact Name is blank
928	Exempt Person TIN is not valid according to our files.
929	Exempt Person TIN does not match our file as a valid SSN/TIN for the name shown.

Error Code	Error Source
930	Affiliate bank name is blank or contains leading spaces.
931	Affiliated bank's address is blank.
932	Affiliated bank's state is blank.
933	Affiliated bank's zip code is blank, zeroes, not numeric or invalid, and the Affiliated bank's country code is blank or invalid.
934	Affiliated bank's TIN is missing, invalid or not numeric.
935	Affiliated bank's Federal Regulator is blank or contains codes other than A, B, C, D, E or F.

Error code 928 and 929 are warning messages only.

STANDARD STATE/COUNTRY CODES

May 2007

1. Country, state, and territory codes are taken from the Federal Information Processing Standard (FIPS) 10-4 code list, the United States Postal Service (USPS) state/territory codes, and previous FinCEN lists.

2. Entries for U.S. Territories and the states/territories of Canada and Mexico should be completed in both the "state" and "country" fields. Leave the "state" field blank for all other countries.

U.S. States		Unknown	XX
Alabama	AL	Utah	UT
Alaska	AK	Vermont	VT
APO/FPO (ZIP 090xx - 098xx)	AE	Virginia	VA
APO/FPO (ZIP 340xx)	AA	Washington	WA
APO/FPO (ZIP 962xx - 966xx)	AP	West Virginia	WV
Arizona	AZ	Wisconsin	WI
Arkansas	AR	Wyoming	WY
California	CA		
Colorado	CO	U.S. Territories	
Connecticut	CT	American Samoa	AQ
Delaware	DE	Guam (USPS)	GU
District of Columbia	DC	Marshall Islands	RM
Florida	FL	Micronesia, Federated States	FM
Georgia	GA	Northern Mariana Islands	CQ
Hawaii	HI	Palau (USPS)	PW
Idaho	ID	Puerto Rico (USPS)	PR
Illinois	IL	U.S. Virgin Islands (USPS)	VI
Indiana	IN		
Iowa	IA	Canada States/Territories	
Kansas	KS	Alberta	AB
Kentucky	KY	British Columbia	BC
Louisiana	LA	Manitoba	MB
Maine	ME	New Brunswick	NB
Maryland	MD	New Foundland and Labrador	NL
Massachusetts	MA	Northwest Territory	NT
Michigan	MI	Nova Scotia	NS
Minnesota	MN	Nunavut	NU
Mississippi	MS	Ontario	ON
Missouri	MO	Prince Edward Island	PE
Montana	MT	Quebec	QC
Nebraska	NE	Saskatchewan	SK
Nevada	NV	Yukon Territory	YT
New Hampshire	NH		
New Jersey	NJ	Mexico States/Territories	
New Mexico	NM	Aguascalientes	AG
New York	NY	Baja, California (Territory North)	BA
North Carolina	NC	Baja, California (Territory South)	BJ
North Dakota	ND	Campeche	CE
Ohio	OH	Chiapas	CI
Oklahoma	OK	Chihuahua	CH
Oregon	OR	Coahuila de Zaragoza	CU
Pennsylvania	PA	Colima	CL
Rhode Island	RI	Destrito Federal	DF
South Carolina	SC	Durango	DO
South Dakota	SD		
Tennessee	TN		
Texas	TX		

STANDARD STATE/COUNTRY CODES

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Egypt	EG	Isle of Man	IM
El Salvador	ES	Israel	IS
England	UK	Italy	IT
Equatorial Guinea	EK	Ivory Coast (Cote d'Ivoire)	IV
Eritrea	ER	Jamaica	JM
Estonia	EN	Jan Mayen	JN
Ethiopia	ET	Japan	JA
Europa Island	EU	Jersey	JE
European Union	EE	Jordan	JO
Falkland Islands (Islas Malvinas)	FK	Juan De Nova Island	JU
Faroe Island	FO	Kazakhstan	KZ
Fiji	FJ	Kenya	KE
Finland	FI	Kiribati	KR
France	FR	Korea, North	KN
French Guiana	FG	Korea, South	KS
French Polynesia	FP	Kuwait	KU
French Southern & Antarctic	FS	Kyrgyzstan	KG
Gabon	GB	Laos	LA
Gambia	GA	Latvia	LG
Gaza Strip	GZ	Lebanon	LE
Georgia	GG	Lesotho	LT
Germany	GM	Liberia	LI
Ghana	GH	Libya	LY
Gibraltar	GI	Liechtenstein	LS
Glorioso Islands	GO	Lithuania	LH
Golan Heights	SY	Luxembourg	LU
Great Britain	UK	Macao	MC
Greece	GR	Macedonia	MK
Greenland	GL	Madagascar	MA
Grenada	GJ	Malawi	MI
Guadeloupe	GP	Malaysia	MY
Guatemala	GT	Maldives	MV
Guernsey	GK	Mali	ML
Guinea	GV	Malta	MT
Guinea-Bissau	PU	Marshall Islands	RM
Guyana	GY	Martinique	MB
Haiti	HA	Mauritania	MR
Heard & McDonald Islands	HM	Mauritius	MP
Holy See (Vatican City)	VT	Mayotte	MF
Honduras	HO	Mexico	MX
Hong Kong	HK	Moldova	MD
Hungary	HU	Monaco	MN
Iceland	IC	Mongolia	MG
India	IN	Montenegro	MJ
Indonesia	ID	Montserrat	MH
Iran	IR	Morocco	MO
Iraq	IZ	Mozambique	MZ
Ireland	EI	Namibia	WA

STANDARD STATE/COUNTRY CODES

May 2007

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2. Entries for U.S. Territories and the states/territories of Canada and Mexico should be completed in both the "state" and "country" fields. Leave the "state" field blank for all other countries.

Nauru	NR	Somalia	SO
Navassa Island	BQ	South Africa	SF
Nepal	NP	S. Georgia & S. Sandwich Islands	SX
Netherlands	NL	Spain	SP
Netherlands (Antilles)	NT	Spratley Islands	PG
New Caledonia	NC	Sri Lanka (Ceylon)	CE
New Zealand	NZ	Sudan	SU
Nicaragua	NU	Suriname	NS
Niger	NG	Svalbard	SV
Nigeria	NI	Swaziland	WZ
Niue	NE	Sweden	SW
Norfolk Island	NF	Switzerland	SZ
Norway	NO	Syria	SY
Oman (Muscat)	MU	Taiwan	TW
Pakistan	PK	Tajikistan	TI
Panama	PM	Tanzania	TZ
Papua-New Guinea	PP	Thailand	TH
Paracel Islands	PF	Togo	TO
Paraguay	PA	Tokelau Islands	TL
Peru	PE	Tonga	TN
Philippines	RP	Trinidad & Tobago	TD
Pitcairn Island	PC	Tromelin Island	TE
Poland	PL	Tunisia	TS
Portugal	PO	Turkey	TU
Qatar	QA	Turkmenistan	TX
Reunion	RE	Turks & Caicos Islands	TK
Romania	RO	Tuvalu	TV
Russia	RS	Uganda	UG
Rwanda	RW	Ukraine	UP
Saint Helena	SH	United Arab Emirates	AE
Saint Kitts & Nevis	SC	United Kingdom	UK
Saint Lucia	ST	United States of America	US
Saint Pierre & Miquelon	SB	Uruguay	UY
Saint Vincent & Grenadines	VC	Uzbekistan	UZ
Samoa	WS	Vanuatu	NH
San Marino	SM	Vatican City	VT
Sao Tome & Principe	TP	Venezuela	VE
Saudi Arabia	SA	Vietnam	VM
Scotland	UK	Virgin Islands (British)	VI
Senegal	SG	Wales	UK
Serbia	RB	Wallis & Futuna	WF
Seychelles	SE	West Bank	WE
Sierre Leone	SL	Western Sahara	WI
Singapore	SN	Yemen	YM
Slovakia	LO	Zambia	ZA
Slovenia	SI	Zimbabwe	ZI
Solomon Island	BP	Unknown	XX
		Various (more than one)	XV

Attachments - Zip Code Validation Table

The following table is used to validate all ZIP Code fields. The table consists of the first three digits of the valid ZIP Code range by state. Therefore, if a ZIP Code falls within the given range for the state indicated, it is considered valid. Otherwise, an error code will be issued. Consult the U.S. Postal Service Zip Code Directory to resolve any conflicts between state and ZIP Codes.

<u>State</u> <u>Abbr.</u>	<u>State</u>	<u>Valid Range</u>	<u>State</u> <u>Abbr.</u>	<u>State</u>	<u>Valid Range</u>
AL	Alabama	350-369	NM	New Mexico	870-884
AK	Alaska	995-999	NY	New York	005
AS	American Samoa	967			063
AZ	Arizona	850-865			090-149
AR	Arkansas	716-729	NC	North Carolina	269-289
		755	ND	North Dakota	580-588
CA	California	900-966	MP	N. Mariana Islands	969
CO	Colorado	800-816	OH	Ohio	430-459
CT	Connecticut	060-069	OK	Oklahoma	730-749
DE	Delaware	197-199	OR	Oregon	970-979
DC	District of Columbia	200-205	PW	Palau Island	969
FM	FS of Micronesia	969	PA	Pennsylvania	150-196
FL	Florida	320-349	PR	Puerto Rico	006-009
GA	Georgia	300-319	RI	Rhode Island	028-029
		398-399	SC	South Carolina	290-299
GU	Guam	969	SD	South Dakota	570-577
HI	Hawaii	967-968	TN	Tennessee	370-385
ID	Idaho	832-838	TX	Texas	750-799
IL	Illinois	600-629			885
IN	Indiana	460-479	UT	Utah	840-847
IA	Iowa	500-528	VT	Vermont	050-059
KS	Kansas	660-679	VA	Virginia	201
KY	Kentucky	400-427			220-246
LA	Louisiana	700-714	VI	Virgin Islands	008
ME	Maine	039-049	WA	Washington	980-994
MH	Marshall Islands	969	WI	Wisconsin	530-549
MD	Maryland	206-219	WV	West Virginia	247-268
MA	Massachusetts	010-027	WY	Wyoming	820-831
		055			
MI	Michigan	480-499		Military Post Offices	
MN	Minnesota	550-567			
MS	Mississippi	386-397	AA	Armed Forces Americas	340
MO	Missouri	630-658		(Except Canada)	
MT	Montana	590-599	AE	Armed Forces Africa,	090-098
NE	Nebraska	680-693		Canada, Europe,	
NV	Nevada	889-898		Middle East	
NH	New Hampshire	030-039	AP	Armed Forces Pacific	962-966
NJ	New Jersey	070-089			

Standard Abbreviations

<u>Word</u>	<u>Abbreviation</u>	<u>Word</u>	<u>Abbreviation</u>
Accounting	ACCTG	Incorporated	INC
Accounts	ACCTS	Industry(ies)	INDUST
Administration	ADMIN	Information	INFO
Air Force Base	AFB	Institute, Institution	INST
Apartment	APT	Insurance	INS
American	AMER	International	INT
Associates	ASSOC	Lane	LN
Association	ASSN	Limited	LTD
Avenue	AVE	Management	MGMT
Bank	BK	Manufacturers	MFTRS
Banking	BKG	Manufacturing	MFG
Branch	BR	Market	MKT
Broadway	BWY	Municipal	MUN
Building	BLDG	Mutual	MUTL
Casualty	CASLTY	National	NAT
Center	CTR	Northeast	NE
Certificate	CERT	Northern, North	NO
Certificate of Deposit	D	Northwest	NW
Circle	CRL	Organization	ORG
Commerce	CMRC	Park	PK
Commission	COMM	Place	PL
Company	CO	Plaza	PLZ
Comptroller	COMPT	Post Office	PO
Consolidated	CONS	Railroad	RR
Construction	CONST	Realty	RLTY
Corporation	CORP	Road	RD
Cooperative	COOP	Room	RM
County	CNTY	Route	RT
Court	CT	Savings	SAV
Credit Union	CU	Savings and Loan	SL
Department	DEPT	Security	SEC
Deposit	DEP	Service	SERV
Distributor, Distributing,	DISTB	Southeast	SE
District	DIST	Southern, South	SO
Division	DIV	Southwest	SW
Driv	DR	Street	ST
East, Eastern	E	Suite	STE
Electrical	ELEC	Transportation	TRANS
Exchange	XCHG	Trust	TR
Federal	FED	University	UNIV
Federal Credit Union	FCU	US Air Force	USAF
Finance	FIN	US Army	USA
Financial	FINCL	US Coast Guard	USCG
First National Bank	FNB	US Marine Corps	USMC
Foreign	FORGN	US Navy	USN
General	GEN	Village	VLGE
Government	GOVT	Western, West	W
Group	GRP		
Headquarters	HDQTRS		
Highway	HWY		
Hospital	HOSP		

Note: All abbreviations listed may be changed from singular to plural, and vice versa, by the addition or deletion of the letter 's'.

Name Editing Instructions

- A. Delete any titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, or Trustee. Do not delete suffixes which distinguish family members such as Jr., Sr., III or IV. Suffixes should be edited to follow the middle initial (e.g. Doe\ John\L Jr).
- B. Delete all punctuation (e.g., 'JR.' would be submitted as 'JR').
- C. Do not use the following words in fields:
- THE
 - SEE ABOVE
 - SAME AS ABOVE
 - SAME
 - COMPUTER GENERATED
 - SIGNATURE CARD
 - NONE
 - NON CUSTOMER
 - CUSTOMER
 - T/A
 - VARIOUS
 - OTHER
 - N/A
 - UNKNOWN
- D. Spanish surnames. Care must be taken in formatting Spanish surnames as the names are usually written in the order of first name, father's last name, and then mother's last name, i.e., Juan Vega Santiago. The father's last name, Vega would be used as the last name; however, both last names should be retained. Example:
Vega/Santiago/Juan.
- E. Place a slash ('/') before each name (including suffixes) except the first surname (e.g., White/Elizabeth/A) but not between compound names such as 'Van Gogh'.
- F. If only the surname of an individual is present, then place a slash after it (e.g., Jones/).
- G. If a non-individual is listed, do not enter slashes between names. Delete the word, 'The' whenever it appears. Drop the subdivision name (e.g., 'The First National Bank of Chicago-Manchester Branch' will be 'FNB of Chicago-Manchester').

Definition of Terms

Aggregation Aggregation occurs when all cash in (received) and all cash out (disbursed) in one business day must be added together SEPARATELY to determine if the total cash in or out exceeds the \$10,000 reporting requirement. When aggregating, cash in monies are never added to or subtracted from cash out monies to determine the reportable dollar amounts. For a more thorough definition and proper reporting please contact the Compliance Review Group at (313) 234-1613.

Amended Report A report which corrects a report previously filed and accepted by the Service.

b Denotes a blank position.

Corrected Report A report which corrects a report previously filed but rejected by the Service because of validity or consistency errors.

CTR Currency Transaction Report (Form104).

Currency For CTR purposes, currency is the coin and paper money of the United States or any country, which is circulated and customarily used and accepted as money.

DBA Doing Business As

DCC The Detroit Computing Center

DEP Designation of Exempt Person

Drawer Individual or organization who initiates a check or wire transfer.

EIN Employer Identification Number

FI Financial Institution

File For purposes of this procedure, a file consists of all magnetic media records submitted by a transmitter.

Negotiable All checks and drafts (including **Instruments** business, personal, bank, cashier's and third-party), money orders, and promissory notes. For purposes on the CTR, all traveler's checks shall also be considered negotiable instruments whether or not they are in bearer form.

Owner A person or organization on whose behalf the transaction is conducted.

Organization For CTR purposes, an organization is a person other than an individual.

Payee Person(s) or organization(s) to whom the check or wire transfer of funds is made payable.

Person For CTR purposes, a person is an individual, corporation, partnership, trust or estate, joint stock company, association, syndicate, joint venture or other incorporated organization or group.

Resolution Code Code which signifies who is to receive the correspondence relating to transaction

SSN Social Security Number

Transaction in Currency For CTR purposes, the **physical** transfer of currency from one person to another. This does not include a transfer of funds by means of bank check, bank draft, wire transfer or other written order that does not involve the physical transfer of currency.

Transactor A person(s) who conducts a transaction. (FinCEN Form 110)

Transmitter Person(s) or organization(s) who prepares the magnetic tape files.

Common Questions and Answers

1. **On aggregations, what branch do we use for the 2B record?**

Ans. Your paper document criteria should be applied in this case. Some banks are using their main office or a pseudo branch for aggregations. Others are selecting the first transaction in the aggregation or the largest amount in the aggregation. Use the same criteria that is used in the paper document system.

2. **If an error is identified in the Parent 2A or Branch 2B records, will the IRS still validate subsequent Parent and Branch records?**

Ans. Yes, if there are other parent records we will continue validation. However, each branch within the erroneous parent group will contain the parent error. This entire group must be corrected and resubmitted.

3. **If we must begin each file with a Transaction Sequence Number starting with 00001 for each 3A record, how are we to match the acknowledgment records with the right submission and sequence?**

Ans. In the Transmitter Record 1A, the coverage beginning or ending dates should be considered with the sequence numbers so that each submission is unique. This record will be returned to you on the acknowledgment file for this purpose.

4. **During the acceptance test, are you planning to return an acknowledgment file?**

Ans. Yes, we will acknowledge your test file but do not require that it be corrected and resubmitted if it contains errors. We do recommend that you use it to test your internal error programs.

5. **Could you give us guidance on the appropriate person(s) to be designated on the Application Form DCC-4419, and the Declaration (Agreement) Form?**

Ans. First, let's take the Declaration Statement. The person who signs this form should be in a position to insure that the Financial Institution is complying with the agreement. Some institutions delegate this to an Officer of the bank, such as the Compliance Officer or the Security Officer. Others have equated this to the same approving official who signs the paper 104. In any case, it should represent an official of the bank who insures that the bank is in compliance with terms of the agreement.

Second, the Form DCC-4419 indicates two levels of persons to contact. Block 2 requests a person to contact should we need ADP processing information concerning the tapes submitted. This should be an individual of the bank who has knowledge of the tape requirements or who could obtain the needed information easily. For example, once a reporting cycle has been established, we may need to follow-up with this individual if we do not receive a tape from your institution as scheduled. Block 8 of the Form DCC-4419 should be an individual who has knowledge of the application to file magnetically. Some banks are designating the Data Processing Officer or the Operations Officer as the bank official delegated to sign the Form DCC-4419, others have indicated that the same individual who signed the Declaration Statement will also sign the Form DCC-4419. The physical location of your data processing department will probably be the deciding factor here.

Common Questions and Answers (cont)

6. **On the Appendix of the Declaration Statement, you request the address of the offices and branches that will not participate in the Project. We plan to start with only a few branches of our total 300. Does this mean we have to supply hundreds of individual offices and branches?**

Ans. In those cases where it is more convenient to list those branches that will be participating rather than NOT participating, please do so. For example, if you plan to start with five (5) of your 300 branches, indicate the five that will be participating and state that the other 295 branches will not participate at this time. Some banks have enclosed a telephone/address listing of all their branches and annotated the branches that will be participating.

7. **Suppose I apply to file magnetically and for some reason wish to drop out of the program, can I do so?**

Ans. Yes. We want to be able to address the financial community's concerns. Therefore, if you decide to drop out, you must notify the Magnetic Filing Coordinator in writing of the date you wish to resume paper filing, giving the reasons for dropping out. Once this written notice is sent you can immediately resume paper filing.

9. **Are there any software companies offering magnetic filing software?**

Ans. Yes. We have identified several companies who have expressed an interest in the process. We will provide their names, telephone numbers and their current status in the filing process if you contact the Magnetic Filing Coordinator.

10. **What can I do if my institution takes exception to certain phrases in the Declaration Statement which prevents us from participating?**

Ans. If the agreement contains phrases or statements which prevent your institution from filing, line through the phrase and submit the proposed changes to the CTR Magnetic Media Coordinator for consideration.

11. **Is the Standard Country and State Abbreviations mandatory?**

Ans. Yes. This table is mandatory.

12. **In the general tape specifications, is the record format fixed or variable length?**

Ans. The record format and block size are fixed length.