BSA Electronic Filing Requirements For The

Currency Transaction Report (CTR)
(FinCEN Form 104) and
Designation of Exempt Person (DEP)
(FinCEN Form 110)

Revised Date November 2008

DEPARTMENT OF THE TREASURY

These Specifications for Electronic Filing of the Currency Transaction Report (CTR) (FinCEN Form 104) and the Designation of Exempt Person (DEP) (FinCEN Form 110) were developed under the sponsorship of the following:

Financial Crimes Enforcement Network

Internal Revenue Service

Table of Contents

Purpose 1
Electronic Filing 1
File Organization 2
Record Layouts 4
- **Transmitter (1A) Summary Record - Required** 4
- **Parent Organization Financial Institution (2A) Record - Required** 6
- **Financial Institution Branch Summary (2B) Record - Required** ... 8
- **Currency Transaction Summary (3A) Record - Required** 10
- **Customer Account Summary (3E) Record** 15
- **Transactor Summary (4A) Record, Part I, Section B** 16
- **Owner Summary (5A) Record, Part I, Section A - Required** 18
- **DBA Record (Second 5A Record)** 21
- **Branch Summary (9A) Record - Required** 22
- **Financial Institution Parent Summary (9B) Record - Required** ... 23
- **Designation of Exempt Person (9E) Record** 24
- **Designation of Exempt Person (9F) Continuation Record** 27
- **Designation of Exempt Person (9G) Continuation Record** 28
- **File Summary (9Z) Record – Required** 30

Acknowledgment Record Formats 31
- **Acknowledgement Transmitter (1A) Record** 31
- **Acknowledgement Financial Institution (2A) Record** 32
- **Acknowledgement Branch Financial Institution (2B) Record** 33
- **Acknowledgement CTR Information (3R) Record** 34
- **Acknowledgement Designation of Exempt Person (9R) Record** .. 35
- **Acknowledgement Trailer Record for Transmitter (9Z) Record** . 36

Attachment A – Definitions 37
Attachment B - Error Code List 38
Attachment C - FAQs 48
Attachment D – Name Editing Instructions 49

Revision History

Version Number	Date	Reason for Change
1.1	3/12/08	Removed references to 9-track tapes; Code 'G' for Government Issued ID added to Method of ID.
1.2	3/17/08	State and Country and ZIP Code reference central lists on FinCEN.gov.
1.3	7/19/08	Replaces references to magnetic media with references to electronic filing using the BSA E-Filing System. General information has been moved from this document to the General Specifications For Electronic Filing Of Bank Secrecy Act (BSA) Reports (General Specifications). Only specific information regarding this form has been retained in this document. The 5A Owner Record, positions 135-169, is no longer Required, and its associated error code of 120 has been deleted.
1.4	10/31/08	Updates Attachment B – Error Code List, adding those error codes generated only by BSA E-Filing. Clarifies 022 error code description. Adds F34 error code, which is applicable to the CTR.

Purpose

The purpose of this specification is to provide the requirements and conditions for electronically filing Currency Transaction Report (CTR) FinCEN Form 104 and Designation of Exempt Person (DEP) FinCEN Form 110. For the purpose of these specifications, electronic filing of this report will be through the BSA E-Filing System operated by the Financial Crimes Enforcement Network (FinCEN). For more information on the BSA E-Filing System and to register please go to http://bsaefiling.fincen.treas.gov. This document should be used in conjunction with the 'General Specifications for Electronic Filing of Bank Secrecy Act (BSA) Reports' (General Specifications) available at http://www.fincen.gov/forms/files/General_BSA_Reports_E-Filing_Specs.pdf. It is recommended that you refer to the General Specifications first, and then the specific information contained in this document.

Electronic Filing

The BSA E-Filing System Batch File Testing Procedures are detailed in a separate document that can be accessed on the BSA E-Filing System web site at http://bsaefiling.fincen.treas.gov under Quick Links.

For the purpose of this specification, the filer is the organization responsible for filing the CTR.

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

Filers are required to retain a copy of the CTR and/or DEP data or have the ability to reconstruct the data filed electronically for a period of five years. In addition, the electronic filer must retain the acknowledgment from the BSA E-Filing System 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 electronic filing than it would be if filing paper CTRs.

File Organization

The following data controls must be adhered to or the CTR electronic file 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 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 electronically.

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 returned to the filer for correction.

Record Layouts

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. All data elements for this record are required.

Field Position	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 that 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 code. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
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, or invalid entries such as all nines or all zeroes.

Field Position	Field Name	Length	Description and Remarks
165-172	Coverage Beginning Date	8	REQUIRED. This will be the date of the earliest original transaction on the file. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
173-180	Coverage Ending Date	8	REQUIRED. This will be the date of the latest original transaction on the file. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
181-188	Transmitter Control Code (TCC)	8	REQUIRED. Enter your assigned 8-character TCC.
189-196	Signature Date	8	REQUIRED. This is the date of approval of the documents (transmittal signature date/file creation date). Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
197-210	Filler	14	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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 Financial Institutions included on the file. The 2A Record item numbers refer to the CTR Form Part III.

Field Position	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter '2A'.
3	Federal Regulator or BSA Examiner (Item 37)	1	REQUIRED. Enter the federal regulator or BSA examiner, using the following codes: Code Description 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 (USPS) 9 Commodities Future Trading Commission (CFTC) 0 State Regulator
4-38	Institution Name (Item 37)	35	REQUIRED. Enter the financial institution headquarters full legal name.
39-73	Institution Address (Item 38)	35	REQUIRED. Enter the address of the financial institution headquarters. Do not abbreviate.
74-100	Institution City (Item 40)	27	REQUIRED. Enter the city of the financial institutions headquarters.
101-102	Institution State (Item 41)	2	REQUIRED. Enter the 2 character state code. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.

Field Position	Field Name	Length	Description and Remarks
103-111	Institution Zip Code (Item 42)	9	REQUIRED. Enter the zip code for the financial institution headquarters.
112-120	Institution EIN/SSN (Item 39)	9	REQUIRED. Enter the financial institution's EIN. If the financial institution does not have an EIN, enter the SSN of the institution's principal owner. Do not enter hyphens, slashes, alpha characters, or invalid entries such as all nines or all zeroes.
121-129	Institution Routing (MICR) Number (Item 43)	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 (TCC)	8	REQUIRED. Enter your assigned 8-character TCC.
138-210	Filler	73	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require, otherwise, space fill. Not included in acknowledgment file.

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 electronic file. The 2B Record item numbers refer to the CTR Form Part III.

Field Position	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 justified and zero fill.
10	Federal Regulator or BSA Examiner Code (Item 37)	1	REQUIRED. Enter the federal regulator or BSA examiner, using the following codes: Code Description 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 (Item 37)	35	REQUIRED. Enter the full legal name of branch where transaction took place.
46-80	Institution Address (Item 38)	35	REQUIRED. Enter address of the branch.
81-107	Institution City (Item 40)	27	REQUIRED. Enter name of city where the branch is located.

Field Position	Field Name	Length	Description and Remarks
108-109	Institution State (Item 41)	2	REQUIRED. Enter state code where the branch is located. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
110-118	Institution Zip Code (Item 42)	9	REQUIRED. Enter the zip code for the branch.
119-127	Institution EIN/SSN (Item 39)	9	REQUIRED. Enter the EIN or SSN for the branch. Do not enter hyphens, slashes, alpha characters, or invalid entries such as all nines or all zeroes.
128-136	Institution Routing Number (Item 37)	9	REQUIRED. Enter the Routing number for the branch. 8-digit numbers are acceptable but should be left justified with a space in the ninth position.
137-156	Approving Official's Title (Item 44)	20	REQUIRED. Enter the title of the approving official. Left justify and space fill.
157-191	Approving Official's Name (Item 48)	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. Code Description 1 Financial institution branch 2 Parent financial institution 3 Transmitter
193-210	Filler	18	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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.

- Customer Account Records, if customer accounts are affected.
- Owner (Part I, Section A) Records (Person(s) on whose behalf transaction is conducted).
- 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. The 3A Record item numbers refer to the CTR Form Part II and Part III.

Field Position	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 Number	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 (Items 29-34)	7	REQUIRED. Enter the appropriate code(s) to identify the following type of transaction(s): Code Description 1 Foreign Currency 2 Wire Transfer(s) 3 Negotiable Instrument(s) Purchased 4 Negotiable Instrument(s) Cashed 5 Currency Exchange(s) 6 Deposits/Withdrawals Enter the Account number(s) in 3E record(s) 7 Other. Provide a description in positions 22-45, 'Other Transaction Description'.

Field Position	Field Name	Length	Description and Remarks
22-45	Other Transaction Description	24	Enter the description of the transaction when type of transaction is '7'- other.
46-47	Foreign Currency Country Code (Item 29)	2	If foreign currency is involved, enter the two character standard country code. If multiple foreign currencies are involved, identify the country for which the largest amount is exchanged. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
48-57	Transaction Amount Cash-In (Item 26)	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.
58-67	Transaction Amount Cash-Out (Item 27)	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 (Item 28)	8	REQUIRED. Date of this transaction. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
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	B Reason Incomplete Armored Car (Part I)	1	Enter 'A' if this transaction is by an armored car service.

Field Position	Field Name	Length	Description and Remarks
86	B Reason Incomplete Mail Deposit or Shipment (Part I)	1	Enter 'B' if this transaction is by mail deposit/shipment.
87	B Reason Incomplete Night Deposit or ATM Transaction (Part 1)	1	Enter 'C' if this transaction is a night deposit or ATM transaction.
88	B Reason Incomplete Multiple Transaction (Part 1)	1	Enter 'D' if this transaction is a multiple transaction. Example: If there are multiple transactions that are only reportable after aggregating.
89	B Reason Incomplete Conducted on Own Behalf (Part 1)	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.
93-127	Preparer Name (Item 47)	35	REQUIRED. Enter the name of individual designated by the Financial Institution to prepare this report. Left justify and space fill. Follow name editing conventions in attachments.
128-162	Contact Person (Item 48)	35	REQUIRED. Enter the name of an individual to contact concerning questions about this CTR.

Field Position	Field Name	Length	Description and Remarks
163-165	Contact Person's Area Code (Item 49)	3	REQUIRED. Enter the area code of the contact person.
166-172	Contact Person's Telephone Number (Item 49)	7	REQUIRED. Enter the phone number of the contact person.
173-186	Document Control Number (DCN)	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 ECC-D 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 1-800-800-2877, and follow prompts.
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 (Item 26a)	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. Do not convert to U.S. dollars and do not indicate the currency symbol. Round decimals to the next higher amount. Do not truncate. Right justify, zero fill.

Field Position	Field Name	Length	Description and Remarks
201-210	Foreign Cash Out (Item 27a)	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. Do not convert to U.S. dollars and do not indicate the currency symbol. Round decimals to the next higher amount. Do not truncate. Right justify, zero fill.
211-220	Filler	10	Space Filled.

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. The 3E Record item numbers refer to the CTR Form Part III.

Field Position	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 Number	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) (Item 35)	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	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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. The 4A Record item numbers refer to the CTR Form Part I, Section B.

Field Position	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 Number	5	REQUIRED. Enter the transaction sequence number from the associated Currency Transaction (3A) Record.
15-49	Name (Items 15, 16, 17)	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 (Item 18)	35	REQUIRED. Enter the street address of the individual who conducted this transaction. Left justified and space filled.
85-111	City (Item 20)	27	REQUIRED. Enter the city of individual who conducted this transaction. Left justified and space filled.
112-113	State (Item 21)	2	REQUIRED. Enter the appropriate two digit state code. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
114-122	Zip Code (Item 22)	9	REQUIRED. Enter zip code of individual conducting transaction.

Field Position	Field Name	Length	Description and Remarks
123-124	Country (Item 23)	2	REQUIRED. Enter country code. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
125-133	SSN (Item19)	9	REQUIRED. Enter the SSN of individual conducting transaction.
134	Method of Identification (Item 25)	1	REQUIRED. Enter the appropriate code for the method by which the individual's identity was verified. Code Description 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 Issued L Law Enforcement M Amish Customer no ID **Note: Codes 'E', 'F', 'G', 'L' and 'M' (customer with no ID), No entry required for positions 135-136, ID Issued by, and positions 137-158, ID Number.**
135-136	ID Issued by State/Country (Item 25e)	2	REQUIRED. Enter the appropriate code to designate country or state where identification was issued. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
137-158	ID Number (Item 25f)	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 (Item 24)	8	REQUIRED. Enter the date of birth of the individual conducting this transaction. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
167-210	Filler	44	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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) was conducted. If the transaction was completed for more than one individual or organization there should be a record for each individual/organization. The 5A Record item numbers refer to the CTR Form Part I.

Field Position	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 Number	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 Indiv. Name (Item 2)	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 Indiv. Address (Item 7)	35	REQUIRED. Enter the street address of the owner.
86-112	Org. or Indiv. City (Item 9)	27	REQUIRED. Enter the city of the owner.
113-114	Org. or Indiv. State (Item 10)	2	REQUIRED. Enter the state code. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
115-123	Org. or Indiv. Zip Code (Item 11)	9	REQUIRED. Enter the Zip Code.

Field Position	Field Name	Length	Description and Remarks
124-125	Org. or Indiv. Country (Item 12)	2	REQUIRED. Enter the 2 character code identifying the country. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
126-134	EIN/SSN (Item 6)	9	REQUIRED. Enter the owner's EIN or SSN. Do not enter hyphens, slashes, alpha characters, or invalid entries such as all nines or all zeroes.
135-169	Occ., Prof., Bus. (Item 13)	35	Enter the occupation, profession, or business of the individual for whom the transaction was conducted. (e.g., Attorney, Securities Broker, Auto Dealer).
170	Method of Identification (Item 14)	1	REQUIRED for all individuals conducting a reportable transaction for themselves. Enter the appropriate code for identification provided. Code Description 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 **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.**
171-172	ID Issued by State/Country (Item 14e)	2	REQUIRED. Enter the appropriate code to designate the state/country where the identification was issued. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
173-196	ID Number (Item 14f)	24	REQUIRED. Enter the number from the identification.
197-204	Date of Birth (Item 8)	8	REQUIRED, if individual. Enter the date of birth of the individual for whom the transaction was conducted. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).

Field Position	Field Name	Length	Description and Remarks
205-210	Filler	6	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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 item numbers refer to the CTR Form Part I.

Field Position	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 Number	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 (Item 5)	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	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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.

Field Position	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	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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 Branch Summary (9A) Record for the FI. This record contains counts of the number of each type record associated with the FIs.

Field Position	Field Name	Length	Description and Remarks
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	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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. The 9E Record item numbers refer to the DEP Form Part I and Part II.

Field Position	Field Name	Length	Description and Remarks
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 (Item 1)	1	REQUIRED. Enter appropriate code as follows: Code Description A Initial Designation B Biennial Renewal C Exemption Amended D 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 (Item 3)	35	REQUIRED. Enter the full legal name of the business being exempted, or the complete last name/first name of the sole proprietor being exempted.
45-79	DBA Name (Item 4)	35	REQUIRED. Enter if knowledge of a separate 'Doing Business As' name.

Field Position	Field Name	Length	Description and Remarks
80-114	Exempt Person Street Address (Item 5)	35	REQUIRED. Enter the street address of exempt person.
115-141	Exempt Person City (Item 6)	27	REQUIRED. Enter the city of exempt person.
142-143	Exempt Person State (Item 7)	2	REQUIRED. Enter the state of exempt person. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf.
144-152	Exempt Person Zip Code (Item 8)	9	REQUIRED. Enter the zip code of exempt person.
153-154	Exempt Person Country Code	2	Enter the country code of the exempt person. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf
155-163	TIN of Exempt Person (Item 9)	9	REQUIRED. Enter the Taxpayer Identification Number (TIN) of the exempt person.
164	Exemption Basis Indicator (Item10)	1	REQUIRED. Enter the appropriate code for the basis of the exemption. Code Description 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 (Item 2)	8	REQUIRED. Enter the date the exemption is effective. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).

Field Position	Field Name	Length	Description and Remarks
173	Exemption Change Indicator (Item 11)	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 (DCN)	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	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require, otherwise, space fill. The Acknowledgement file WILL include this field.

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 9F Record item numbers refer to the DEP Form Part IV and Part V.

Field Position.	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter '9F'.
3-7	Transaction Sequence Number	5	REQUIRED. Enter the transaction sequence number form the associated '9E' record.
8-27	Approving official Title (Item 23)	20	REQUIRED. Enter the title of the Approving Official for initial approval or biennial renewal.
28-62	Approving official Name (Item 21)	35	REQUIRED. Enter the name of the approving Official for initial approval or biennial renewal.
63-70	Date of Approval (Item 22)	8	REQUIRED. Enter the Date the Exemption was approved. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
71-105	Name of Contact Person (Item 24)	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 (Item 25)	10	REQUIRED. Enter the Phone number of the Contact Person including area code.
116-150	Name of Approving Official for Biennial Updates Only (Item 27)	35	REQUIRED. Enter the Name of the Approving Official for Biennial Updates only.
151-210	Filler	60	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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.

Field Position	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter '9G.'
3-7	Transaction Sequence Number	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. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf
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. Do not enter hyphens, slashes, alpha characters, or invalid entries such as all nines or all zeroes.

Field Position	Field Name	Length	Description and Remarks
126	Affiliate Bank Federal Regulator	1	REQUIRED. Enter the federal regulator using the following codes: Code Description 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	Space Filled.
210-220	User Field	11	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

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.

Field Position	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 Count	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	Space Filled.
211-220	User Field	10	Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file.

Acknowledgment Record Formats

Acknowledgement Transmitter (1A) Record

Field Position	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 ECC-D for Errors.
57	Filler	1	Space filled.

Acknowledgement Financial Institution (2A) Record

Field Position	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 ECC-D for Errors.
41-57	Filler	17	Space filled

Acknowledgement Branch Financial Institution (2B) Record

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

Acknowledgement CTR Information (3R) Record

Field Position	Field Name	Length	Description and Remarks
1-2	Record Type	2	CTR 3R record
3-7	Transaction Sequence Number	5	From 3A record positions 10-14.
8-21	Document Control Number (DCN)	14	Assigned by ECC-D. 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 ECC-D. 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	Space Filled.

Acknowledgement Designation of Exempt Person (9R) Record

Field Position	Field Name	Length	Description and Remarks
1-2	Record Type	2	Designation of Exempt Person 9R Record
3-7	Transaction Sequence Number	5	From 9E record positions 3-7
8-21	Document Control Number (DCN)	14	Assigned by ECC-D. A unique identifying number.
22-31	User Field	10	From 9E record positions 211-220.
32-55	Error Codes	3 each	Assigned by ECC-D. Contains up to 8 error codes.
56-57	Filler	2	Space Filled.

Acknowledgement Trailer Record for Transmitter (9Z) Record

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

Attachment A – Definitions

Below are the definitions for terms specific to this document. General definitions are contained in the General Specifications document.

Term	Description
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 1-800-800-2877, and follow prompts.
CTR	Currency Transaction Report (Form104).
DEP	Designation of Exempt Person (FinCEN Form 110)
Drawer	Individual or organization who initiates a check or wire transfer.
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.
Transaction	For CTR purposes, the **physical** transfer of currency from one in **Currency 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.

Attachment B - Error Code List

* Indicates error codes generated by BSA E-Filing only.

Error Code	Error Source
File Error	
F01	Non-numeric record counts reported on 1A summary record.
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.
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.
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.
F08	Number of records reported does not match the computer count 3E records.
F09	Number of records reported does not match computer count for 4A 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.
F18	No File Summary (9Z) Record on file.
F19	Branch summary amounts do not equal total of transaction amounts.
F20	File summary amounts do not equal total of transaction amounts.
F21	No FI Summary (9B) Record on file.
F22	FI summary amounts do not equal total of transaction amounts.
F23	Number of records reported does not match computer count for 9E records.

Error Code	Error Source
F34	An invalid record type was present on the submitted file.
F88*	The Transmitter Control Code (TCC) specified in the file is not a valid production TCC code.
F90*	The submitted batch is not a valid version.
F91*	The submitted EBCDIC file is invalid.
F92*	The submitted file is empty or the file type is invalid.
F93*	An invalid line terminator was present on the submitted file
F94*	Cannot continue processing the submitted file because of previous errors encountered.
F95*	Too many errors were encountered while processing the submitted file to continue.
F96*	One, or more, invalid characters were present in the submitted file.
F97*	Invalid record sequencing was present on the submitted file.
F98*	An invalid record length was present on the submitted file.
F99*	Unknown file error. Please contact the BSA E-Filing Help Desk for assistance.
Transmitter (1A) Record	
T01	Transmitter Name is blank.
T02	Transmitter Address is blank.
T03	Transmitter City is blank.
T04	Transmitter State is blank.
T05	Transmitter Zip-Code is blank.
T06	Transmitter Area Code and/or Telephone Number is blank.
T07	Transmitter Contact Name is blank.
T08	Transmitter EIN is blank or invalid.
T09	Coverage beginning date is blank or invalid.
T10	Coverage ending date is blank or invalid.
T11	Coverage ending date is more than 25 days from coverage beginning date. (Information only)

Error Code	Error Source
T12	Transmitter Control Code is blank or invalid.
Financial Institution (2A & 2B) Record	
001	FI Name is blank or contains leading spaces.
002	FI Address is blank.
003	FI City is blank.
004	FI State is blank.
007	FI Zip-Code is blank, zeroes, not numeric, or invalid.
008	FI Federal Regulator or BSA examiner code is blank or invalid.
010	Name of Approving Official is blank.
011	Title of Approving Official is blank.
012	FI EIN/SSN is missing, all zeros, all nines, invalid or non-numeric.
013	FI Routing Number is not numeric, blank, or zeroes.
014	FI Resolution Code is invalid or missing.
Currency Transaction (3A) Record	
015	FI TCC is blank or invalid.
021	Type of transaction is blank or contains codes other than 1 thru 7.
022	The Transaction Amount Cash-In and/or Transaction Amount Cash-Out are invalid in the Currency Transaction Summary (3A) Record due to one of the following reasons: a. Both amounts are blank. b. The amount(s) is non-numeric, excluding blank. c. The amount(s) is invalid.
023	Amounts greater than 20 million will generate this error code as information. Please verify the cash in or cash out amount.

Error Code	Error Source
024	Date of transaction is invalid. a. Date not numeric. b. Month not a valid code 01 -12. c. Day not a valid code 01-31 d. Date not less than current date.
025	Contact name is missing.
026	Contact phone number is missing.
028	Preparer Name is missing.
029	Preparer Title is missing.
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 number of Transactor Records present.
034	Number of owners is not numeric.
035	Number of owners value does not equal the number of Owner Records present.
036	Number of Customer Account Records is not numeric.
037	Number of customer accounts value does not equal the number of Customer Account Records present.
038	Invalid Document Control Number Returned. (**CTR not updated)**
039	Missing Account Number for Transaction types of Deposit or Withdrawal.
040	Reason Part I Section B incomplete is spaces but no Transactor Record is presented.

Error Code	Error Source
076*	The Cash In or Cash Out amount(s) is invalid. Only cash transactions that exceed $10,000 should be reported.
077*	The Foreign Currency Country Code field was provided on the Currency Transaction Summary (3A) Record but the Foreign Cash In and the Foreign Cash Out fields are all spaces or are all zeros.
078*	The Foreign Currency Country Code is spaces on the Currency Transaction Summary (3A) Record when an amount was provided in the Foreign Cash Out field.
079*	The Foreign Currency Country Code is spaces on the Currency Transaction Summary (3A)Record when an amount was provided in the Foreign Cash In field.
Customer Account (3E) Record	
083	Number of customer accounts not numeric.
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) (e.g., error 283 indicates the second 3E record has an error 083).	
Transactor (4A) Record	
091	Transactor Name is invalid.
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.

Error Code	Error Source
097	Transactor Zip-Code is blank, zeroes, or invalid and the Country is US.
098	Transactor SSN is spaces, zeros or 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.
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) (e.g., 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	
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.

Error Code	Error Source
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 nines, invalid or non-numeric.
122	Owner Address contains punctuation.
125	Owner Alien ID information is missing when EIN/SSN is blank.
126	Owner Date of birth is missing or invalid.
128	Owner SSN/EIN is not valid according to our files.
129	Owner SSN/EIN does not match our file as a valid SSN/EIN for the name shown.
130	Owner 'DBA' name is missing.
131	Owner 'DBA' record is present without an associated owner '5A' record.
150*	The Method of Identification field on the Owner Summary '5A' record has a value of A,B,C,or D and the ID Issued By field and/or ID Number field is blank.
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) (e.g., 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	
901	Type of Transaction is blank or contains codes other than A or B.
902	Exemption Status contains codes other than A or B.
903	Business or Sole Proprietor Name is blank or contains leading spaces.

Error Code	Error Source
904	Exempt Person address is blank.
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 blank or invalid. 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.
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.

Error Code	Error Source
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. Note: Error code 928 is a warning message only.
929	Exempt Person TIN does not match our file as a valid SSN/TIN for the name shown. Note: Error code 929 is a warning message only.
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.
BSA E-Filing Validation Error Codes	
E00*	This submission cannot be **Accepted** because it contains significant errors. Please fix and resubmit the file.
E01*	This submission cannot be **Accepted** because it contains significant errors. Please fix the file and resubmit or resubmit the same file with the override option applied.
E02*	This submission has been **Accepted** and will be processed by ECC-D, however it contains some errors which need to be corrected once this submission has been acknowledged.
E03*	This submission had the override option applied and has been **Accepted** to be processed by ECC-D. However it contains some errors that need to be corrected once this submission has been acknowledged.
E04*	The override could not be applied because the submission that was specified to be overridden could not be found or is invalid.

Error Code	Error Source
E05*	The override could not be applied because the submission that was specified to be overridden is already overridden.
E06*	The override could not be applied because the submission that was specified to be overridden is not in the **Rejected** state.
E07*	The override could not be applied because the submitted file data has changed, or new/different errors were returned. Please resubmit the unchanged file, fix the file, or resubmit the same file, with the override applied to this submission.
E08*	The override could not be applied because the version of the submitted file is not valid for the override option.
E09*	The override could not be applied because of errors returned.

Attachment C - FAQs

Q1.	On aggregations, what branch do we use for the 2B record?
A1.	Use your main office in the 2B record for aggregations.
Q2.	If an error is identified in the Parent 2A or Branch 2B records, will the IRS still validate subsequent Parent and Branch records?
A2.	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.
Q3.	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?
A3.	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. You can also use the User Field position at the end of the record to enter an Internal Record Number (IRN) to match up acknowledgement records.

Attachment D – 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:
   a. THE
   b. SEE ABOVE
   c. SAME AS ABOVE
   d. SAME
   e. COMPUTER GENERATED
   f. SIGNATURE CARD
   g. NONE
   h. NON CUSTOMER
   i. CUSTOMER
   j. T/A
   k. VARIOUS
   l. OTHER
   m. N/A
   n. 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, e.g., 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').