Financial Crimes Enforcement Network

FinCEN Designation of Exempt Person (FinCEN Form 110) Electronic Filing Requirements

Release Date October 2012 – Version 1.0

DEPARTMENT OF THE TREASURY

Financial Crimes Enforcement Network (FinCEN)

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Revision History

Version Number	Date	Reason for Change
1.0	09/19/12	**General Updates:** • Updates electronic specification document title from "Bank Secrecy Act Designation of Exempt Person (FinCEN Form 110) Electronic Filing Requirements" (see new title on cover page) and replaces "BSA DOEP" with "FinCEN DOEP" throughout the document. • Replaces all references to "filing organization" with "filing institution" throughout the document. • **Acknowledgement File Format** Updates the acknowledgement file format to include User Field values from incoming records. • **FinCEN DOEP "report"** Replaces the reference to the FinCEN DOEP as a "form" with "report" throughout the document. **Updates to File Organization:** • **Filer Information (2A) Record** Replaces "filing organization" with "filing institution" in the first sentence. **Updates to Record Layout:** • **Transmitter ZIP/Postal Code (as well as Items 23/11)** Updates the Description and Remarks to include "or four nines" in the following statement: "A nine-digit ZIP Code cannot end with four zeros or four nines." • **Transmitter Country** Updates the Description and Remarks by adding the sentence "See General Instructions 5 in Attachment C for information about the country codes to be entered." • **Coverage Beginning Date/Coverage Ending Date** Updates the Description and Remarks by replacing "original exemption" with "Effective Date of Exemption" in the first sentence for each field. • **Effective Date of Exemption (Item 2)** Updates the Description and Remarks by replacing "following day's date after the date of the last transaction to be exempted" with "date of the day following the date of the last exempted transaction" in the last sentence. • **Exempt person is entity** Updates the Description and Remarks by replacing "Enter "X" if the exempt person is an entity" with "Enter "X" if the exempt person is an entity and space fill the "First Name, "Middle Name," and "Name Suffix" fields." • **Middle Name/Name Suffix (Item 5)**

Version Number	Date	Reason for Change
		Updates the Description and Remarks by replacing "Space-fill if no entry" with "Space-fill if no entry or if "Exempt person is entity" contains "X." • **E-mail address (Item 14) and Phone Number (Item 15)** Updates the Field Name by removing "(If available)"for clarification purposes. • **Items 26/27/29** Updates the Description and Remarks by removing "Space-fill if no entry." • **BSA Identifier/Document Control Number** Updates the Field Name and Description and Remarks by replacing "BSAI" with "BSA ID." **Updates to Attachment A – Error Code List** • **Errors Codes** Adds the error code F24 "Number of forms reported on the batch form does not match the computed count of the forms found in the file" to the list of error codes. **Attachment B – Error Correction Instructions** • **Error Categories** Replaces the statement "fatal errors that result" with "format errors that may result" in the first sentence of the section. **Attachment C – Electronic Filing Instruction** • **General Instructions (7. Name Editing Instructions)** Updates "7. Name Editing Instructions" to match the instructions in the FinCEN SAR and FinCEN CTR. • **Item Instructions (Item 18 – EIN)** Updates "Item 18—EIN" instructions to "Enter the bank's Employer Identification Number (EIN)." • **Item Instructions (Item 25 – Affiliated banks** • Adds "some or" in the following sentence: "A parent bank holding company or one of its bank subsidiaries may make the designation of exempt person on behalf of **some or** all bank subsidiaries of the holding company so long as the designation lists each bank subsidiary that will treat the customer as an exempt person." • **Secure Data Transfer Mode Users** • Updates the instructions to include a section describing the naming convention information related to SDTM/System to System filers.

Purpose

The purpose of this document is to provide the requirements and conditions for electronically filing the Bank Secrecy Act Designation of Exempt Person (DOEP) report (FinCEN Form 110). 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/e-filing_GENspecs.pdf. It is recommended that you refer to the General Specifications first, and then the specific information contained in this document. If the General Specifications conflict with any specific requirement found in this document, the specific requirement should be followed. Additional instructions concerning the data to be entered in the electronic file are found in Attachment C – Electronic Filing Instructions.

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 purposes of this document, the filer is the organization responsible for filing the FinCEN Form 110 (DOEP) and the transmitter is the organization responsible for preparing the electronic files. The filer and transmitter may be the same or different organizations. Filers are required to retain a copy of the DOEP data and all original supporting documentation or business record equivalent for five years from the date of the report. All supporting documentation must be made available to appropriate authorities upon request.

File Organization

The following data controls must be followed or the DOEP electronic file will be rejected. The data records must be in the following sequence:

Transmitter (1A) Record – Required

There can only be one of these record types and it must be the first record on the file.

Filer Information (2A) Record – Required

There must be one of these record types for each filing institution on the file. This record type immediately precedes all records related to the filer.

Affiliated Bank Information (2B) Record

One or more of these record types may follow a 2A Record when the designation is being made for one or more affiliated banks. Filers are permitted to associate up to 99 2B records for a single exemption report. Multiple 2B records must be grouped together prior to the associated Exempt Person Information (3A) Record(s).

Exempt Person Information (3A) Record – Required

There can only be one of these record types for each exempt person reported on the file. Filers are permitted to associate multiple 3A records with a single 2B record or a set of 2B records— assuming the affiliated bank(s) is(are) the same for all associated 3A records that follow.

Filer Information Summary (9B) Record – Required

There must be one of these record types for each 2A record reported on the file.

File Summary (9Z) Record – Required

There must be one of these record types on the file and it must be the last record.

Record Layouts

Transmitter (1A) Record – Required

The first record on each file must be the Transmitter (1A) Record, which will contain information identifying the batch file transmitter (person or organization handling the data accumulation and formatting). There will be only one transmitter record on each electronic file. All data elements for this record are required.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "1A."
3-152	Transmitter Name	150	REQUIRED. Enter the full name of the individual or organization that is transmitting the exemptions in this file. Left justify and space-fill the entry.
153-252	Transmitter Address	100	REQUIRED. Enter the street address of the transmitter. Left justify and space-fill the entry.
253-302	Transmitter City	50	REQUIRED. Enter the city of the transmitter. Left justify and space-fill the entry.
303-305	Transmitter State	3	REQUIRED. Enter the state code of the transmitter if the "Transmitter Country" is "CA," "MX," or "US." Space-fill if "Transmitter Country" contains a country code other than "CA," "MX," or "US."
306-314	Transmitter ZIP/Postal Code	9	REQUIRED. Enter the ZIP Code or foreign postal code of the transmitter. Do not include punctuation or formatting such as hyphens, periods, and spaces within the entry. An entry must be five or nine digits if "Transmitter Country" is "US." A nine-digit entry cannot end with four zeros or four nines if "Transmitter Country" is "US." Left justify and space-fill this entry if less than nine digits.
315-316	Transmitter Country	2	REQUIRED. Enter the country code of the transmitter. See General Instruction 5 in Attachment C for information about the country codes to be entered.
317-332	Transmitter Telephone Number	16	REQUIRED. Enter the telephone number of the transmitter. Enter as a single number string without formatting and punctuation such as spaces, hyphens, or parenthesis. Left justify and space-fill the entry.

Field Position(s)	Field Name	Length	Description and Remarks
333-482	Transmitter Contact Name	150	REQUIRED. Enter the name of an official contact for the transmitter. Left justify and space-fill the entry.
483-507	Transmitter Taxpayer Identification Number (TIN)	25	REQUIRED. Enter the U.S. or foreign Taxpayer Identification Number (TIN) assigned to the transmitter. Do not enter hyphens, slashes, or invalid entries such as all nines, all zeros, or "123456789." Left justify and space-fill the entry.
508-515	Coverage Beginning Date	8	REQUIRED. This will be the date of the earliest Effective Date of Exemption on the file. Enter as a numeric 8-position entry in the format MMDDCCYY where MM = Month, DD = Day, CC = Century, and YY = Year.
516-523	Coverage Ending Date	8	REQUIRED. This will be the date of the latest Effective Date of Exemption on the file. Enter as a numeric 8-position entry in the format MMDDCCYY where MM = Month, DD = Day, CC = Century, and YY = Year.
524-531	Transmitter Control Code (TCC)	8	REQUIRED. Enter the assigned 8-character Transmitter Control Code (TCC). Do not enter a TCC assigned for testing purposes.
532-534	Batch Sequence Number (BSN)	3	Space-fill this field, which is reserved for BSA E-Filing use.
535-1036	Filler	502	Space-filled.
1037-1040	Format Indicator	4	Space-fill this field, which is reserved for BSA E-Filing use.
1041-1050	User Field	10	Use this field for any descriptive information you may require; otherwise, space-fill. This information will be returned in the acknowledgement file.

BSA Electronic Filing Requirements for the Designation of Exempt Person (FinCEN Form 110) report

Filer Information (2A) Record – Required

This record identifies information regarding the filing institution that is responsible for reporting designation of exempt persons. The number of 2A records depends on the number of different filing institutions included on the file. The 2A record item numbers refer to Attachment C – Electronic Filing Instructions Part III Filer Information, Items 17-25.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2A."
3-152	Name of bank (Item 17)	150	REQUIRED. Enter the full legal name of the filing institution. Left justify and space-fill the entry.
153-177	EIN (Item 18)	25	REQUIRED. Enter the Employer Identification Number (EIN) of the filing institution. The EIN must be a valid nine-digit entry with no formatting such as hyphens, slashes, and alpha characters, or invalid entries such as all nines, all zeros, and "123456789." Left justify and space-fill the entry.
178-197	RSSD (Item 19)	20	Enter the Research Statistics Supervision Discount (RSSD) number of the filing institution. Left justify and space-fill the entry. Space-fill if no entry.
198-297	Address (Item 20)	100	REQUIRED. Enter the permanent street address of the filing institution. Left justify and space-fill the entry.
298-347	City (Item 21)	50	REQUIRED. Enter the full name of the city of the filing institution. Left justify and space-fill the entry.
348-350	State (Item 22)	3	REQUIRED. Enter the appropriate state/territory code of the filing institution. Left justify and space-fill the entry. Use only the authorized U.S. Postal Service state, territory, or military address abbreviations found at https://www.usps.com/ship/official-abbreviations.htm .
351-359	ZIP Code (Item 23)	9	REQUIRED. Enter the ZIP Code of the filing institution. ZIP Codes must be five or nine digits in length and entered without formatting or special characters such as spaces or hyphens. A five-digit ZIP Code must be followed by four spaces. A nine-digit ZIP Code cannot end with four zeros or four nines. Left justify and space-fill the entry.

Field Position(s)	Field Name	Length	Description and Remarks
360	Primary federal regulator (Item 24)	1	REQUIRED. Enter the appropriate code to record the filing institution's primary federal regulator: Code Description B Federal Reserve Board (FRB) C Federal Deposit Insurance Corporation (FDIC) D Internal Revenue Service (IRS) E National Credit Union Administration (NCUA) F Office of the Comptroller of the Currency (OCC)
361	Affiliated Banks Indicator (Item 25)	1	If the designation is being made for one or more affiliated banks, enter "X." Otherwise, space-fill the entry.
362-1040	Filler	679	Space-filled.
1041-1050	User Field	10	Use this field for any descriptive information you may require; otherwise, space-fill. This information will be returned in the acknowledgement file.

Affiliated Bank Information (2B) Record

This record identifies information regarding the bank subsidiary that will be treating the customer as an exempt person. The number of 2B records depends on the number of different affiliated banks associated with each filing institution on the file. Filers are permitted to associate up to 99 2B records for a single exempt person. Multiple 2B records must be grouped together prior to the associated Exempt Person Information (3A) Record(s). The 2B record item numbers refer to Attachment C – Electronic Filing Instructions Part III Filer Information Items 17-24.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2B."
3-152	Name of bank (Item 17)	150	REQUIRED. Enter the full legal name of the affiliated bank. Left justify and space-fill the entry.
153-177	EIN (Item 18)	25	REQUIRED. Enter the Employer Identification Number (EIN) of the affiliated bank. The EIN must be a valid nine-digit entry with no formatting such as hyphens, slashes, and alpha characters, or invalid entries such as all nines, all zeros, and "123456789." Left justify and space-fill the entry.
178-197	RSSD (Item 19)	20	Enter the Research Statistics Supervision Discount (RSSD) number of the affiliated bank. Left justify and space-fill the entry. Space-fill if no entry.
198-297	Address (Item 20)	100	REQUIRED. Enter the permanent street address of the affiliated bank. Left justify and space-fill the entry.
298-347	City (Item 21)	50	REQUIRED. Enter the full name of the city of the affiliated bank. Left justify and space-fill the entry.
348-350	State (Item 22)	3	REQUIRED. Enter the appropriate state/territory code of the affiliated bank. Left justify and space-fill the entry. Use only the authorized U.S. Postal Service state, territory, or military address abbreviations found at https://www.usps.com/ship/official-abbreviations.htm .
351-359	ZIP Code (Item 23)	9	REQUIRED. Enter the ZIP Code of the affiliated bank. ZIP Codes must be five or nine digits in length and entered without formatting or special characters such as spaces or hyphens. A five-digit ZIP Code must be followed by four spaces. A nine-digit ZIP Code cannot end with four zeros or four nines. Left justify and space-fill the entry.

Field Position(s)	Field Name	Length	Description and Remarks
360	Primary federal regulator (Item 24)	1	REQUIRED. Enter the appropriate code to record the affiliated bank's primary federal regulator: Code Description B Federal Reserve Board (FRB) C Federal Deposit Insurance Corporation (FDIC) D Internal Revenue Service (IRS) E National Credit Union Administration (NCUA) F Office of the Comptroller of the Currency (OCC)
361-1040	Filler	680	Space-filled.
1041-1050	User Field	10	Use this field for any descriptive information you may require; otherwise, space-fill. This information will be returned in the acknowledgement file.

Exempt Person Information (3A) Record – Required

This record identifies information regarding the exempt person and the DOEP filing. The number of 3A records depends on the number of different exempt persons included on the file. The 3A record item numbers refer to Attachment C - Electronic Filing Instructions Item 1-2, Part II Items 3-16, and Part IV Items 26-30.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "3A."
3-7	Sequence Number	5	REQUIRED. Enter a sequential number starting with "00001" and increment by 1 for each Exempt person Information (3A) Record.
8	Filing type (Item 1)	1	REQUIRED. Enter the appropriate code to record the type of filing. Code Description A Initial designation B Exemption amended C Exemption revoked
9-16	Effective Date of Exemption (Item 2)	8	REQUIRED. Enter the effective date of exemption as a numeric 8-position entry in the format MMDDCCYY where MM = Month, DD = Day, CC = Century, and YY = Year. If "Filing type" is "A Initial designation," enter the date of the first transaction to be exempted. If "Filing type" is "B Exemption amended" and the effective date of the exemption is not being amended, the date entered should be the same as the exemption date reported on the initial designation, or if the effective date of the exemption is being amended, enter the date of the first transaction to be exempted. If "Filing type" is "C Exemption revoked," enter the date of the day following the date of the last exempted transaction.
17-166	Individual's last name, or entity's legal name of the exempt person (Item 3)	150	REQUIRED. Enter the legal name (if entity) or last name (if individual) of the exempt person. If the exempt person is a sole proprietorship, enter the last name of the proprietor in this field. Enter the remainder of the proprietor's name in "First Name," "Middle Name," and "Name Suffix." If the sole proprietorship has a name separate from the proprietor's name, enter that name in "Alternate Name."
167	Exempt person is entity	1	Enter "X" if the exempt person is an entity and space fill the "First Name, "Middle Name," and "Name Suffix" fields. Space-fill if no entry.

Field Position(s)	Field Name	Length	Description and Remarks
168-202	First Name (Item 4)	35	REQUIRED (conditional). If the exempt person is an individual, enter his/her first name. Left justify and space-fill the entry. Space-fill if "Exempt person is entity" contains "X."
203-237	Middle Name (Item 5)	35	Enter the middle name or middle initial of the exempt person. Left justify and space-fill the entry. Space-fill if no entry or if "Exempt person is entity" contains "X."
238-272	Name Suffix (Item 5)	35	Enter the name suffix such as JR, SR, III, etc. of the exempt person. Left justify and space-fill the entry. Space-fill if no entry or if "Exempt person is entity" contains "X."
273-422	Alternate Name (Item 6)	150	Enter the alternate name of the exempt person (e.g. AKA - individual or DBA - entity). Do not include the acronyms "AKA" or "DBA" with the alternate name. Left justify and space-fill the entry. Space-fill if no entry.
423-452	Occupation or type of business (Item 7)	30	Enter the exempt person's occupation or type of business. Left justify and space-fill the entry. Space-fill if no entry.
453-458	NAICS Code (Item 7a)	6	Enter the NAICS Code associated with the exempt person's occupation or type of business. Access the NAICS Code list from the BSA E-Filing Web Site http://bsaefiling.fincen.treas.gov/main.html . Left justify and space-fill this entry. Space-fill if no entry.
459-558	Address (Item 8)	100	REQUIRED. Enter the permanent address of the exempt person's business location. For exempt persons doing business at more than one physical location, enter the local headquarters address or local address of the exempt person. For a sole proprietorship, enter the business address of the sole proprietorship rather than the home address of the sole proprietor, unless they are the same. Left justify and space-fill the entry.
559-608	City (Item 9)	50	REQUIRED. Enter the full name of the city of the exempt person's business location. Left justify and space-fill the entry.
609-611	State (Item 10)	3	REQUIRED. Enter the state code of the exempt person's business location. Left justify and space-fill the entry. Use only the authorized U.S. Postal Service state, territory, or military address abbreviations found at https://www.usps.com/ship/official-abbreviations.htm .

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Field Position(s)	Field Name	Length	Description and Remarks
612-620	ZIP Code (Item 11)	9	REQUIRED. Enter the ZIP Code of the exempt person's business location. ZIP Codes must be five or nine digits in length and entered without formatting or special characters such as spaces or hyphens. A five-digit code must be followed by four spaces. A nine-digit code cannot end with four zeros or four nines. Left justify and space-fill this entry.
621-645	TIN (Item 12)	25	REQUIRED. Enter the exempt person's Taxpayer Identification Number (TIN). The TIN must be a valid nine-digit entry with no formatting such as hyphens, slashes, alpha characters, or invalid entries such as all nines, all zeros, or "123456789." Left justify and space-fill the entry.
646	TIN type (Item 13)	1	REQUIRED. Enter the appropriate code to record the exempt person's TIN type. Code Description A EIN B SSN/ITIN
647-746	E-mail address (Item 14)	100	Enter the exempt person's email address. Left justify and space-fill the entry. Space-fill if no entry.
747-762	Phone Number (Item 15)	16	Enter the telephone number of the exempt person. The telephone number must be a total of 10 digits in length, beginning with the exempt person's 3 digit area code followed by a 7 digit telephone number. Enter as a single number string without formatting and punctuation such as spaces, hyphens, or parenthesis. Left justify and space-fill the entry. Space-fill if no entry.
763-768	Extension (if any) (Item 15a)	6	Enter the exempt person's telephone extension. Enter as a single number string without formatting and punctuation such as spaces, hyphens, or parenthesis. Left justify and space-fill the entry. Space-fill if no entry.
769	Type of exempt person (Item 16)	1	REQUIRED. Enter the appropriate code to record the type of exempt person. Code Description A Listed company B Listed company subsidiary C Eligible non-listed business D Payroll customer
770-919	Print Name (Item 26)	150	Enter the name of the bank official who authorized this exemption. Left justify and space-fill the entry.

Field Position(s)	Field Name	Length	Description and Remarks
920-954	Title (Item 27)	35	Enter the title of the bank official who authorized this exemption. Left justify and space-fill the entry.
955-970	Phone Number (Item 29)	16	Enter the telephone number of the bank official identified as the authorizer of this report. The telephone number must be a total of 10 digits in length, beginning with the exempt person's 3 digit area code followed by a 7 digit telephone number. Enter as a single number string without formatting and punctuation such as spaces, hyphens, or parenthesis. Left justify and space-fill the entry.
971-976	Phone Number Ext. (Item 29a)	6	Enter the telephone extension of the bank official identified as the authorizer of this report. Enter as a single number string without formatting and punctuation such as spaces, hyphens, or parenthesis. Left justify and space-fill the entry. Space-fill if no entry.
977-984	Date of signature (Item 30)	8	Enter the date of signature (i.e. authorization to submit) as a numeric 8-position field in the format MMDDCCYY where MM = month, DD = day, CC = Century, and YY = year. Space-fill if no entry.
985-998	BSA Identifier (BSA ID)/ Document Control Number (DCN)	14	REQUIRED (conditional). If "Filing Type" is "B Exemption amended" or "C Exemption revoked," enter the BSA ID/DCN previously assigned by FinCEN to the DEP. If the BSA ID/DCN is unknown, zero-fill this field. If "Filing Type" is "A Initial designation," space-fill this field.
999-1040	Filler	42	Space-filled.
1041-1050	User Field	10	Use this field for any descriptive information you may require; otherwise, space-fill. This information will be returned in the acknowledgement file.

Filer Information Summary (9B) Record – Required

There must be one of these record types for each Filer Information (2A) Record reported on the file. This record contains counts of the number of 2B and 3A record types associated with the Filer Information (2A) Record.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "9B."
3-9	Affiliated Bank Information (2B) Record Count	7	REQUIRED. Enter the number of Affiliated Bank Information (2B) Records for the associated Filer Information (2A) Record.
10-16	Exempt Person Information (3A) Record Count	7	REQUIRED. Enter the number of Exempt Person Information (3A) Records for the associated Filer Information (2A) Record.
17-1040	Filler	1024	Space-filled.
1041-1050	User Field	10	Use this field for any descriptive information you may require; otherwise, space-fill. This information will be returned in the acknowledgement file.

File Summary (9Z) Record – Required

There should only be one of these record types on the file and it must be the very last record reported. This record contains counts of the number of 2A, 2B, and 3A record types associated with the Transmitter (1A) Record.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "9Z".
3-9	Filer Information (2A) Record Count	7	REQUIRED. Enter the total number of Filer Information (2A) Records.
10-16	Affiliated Bank Information (2B) Record Count	7	REQUIRED. Enter the total number of Affiliated Bank Information (2B) Records.
17-23	Exempt person Information (3A) Record Count	7	REQUIRED. Enter the total number of Exempt person Information (3A) Records.
24-1040	Filler	1017	Space-filled.
1041-1050	User Field	10	Use this field for any descriptive information you may require; otherwise, space-fill. This information will be returned in the acknowledgement file.

Acknowledgement Record Formats

The DOEP batch acknowledgement file defined below is provided in ASCII format. The acknowledgement file will contain a corresponding acknowledgement record for each record received on the batch file.

Acknowledgement Transmitter (1A) Record

This record is created by FinCEN as part of an acknowledgement file returned to the transmitter. This record contains identifying information and error codes pertaining to the transmitter data received by FinCEN.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	Field position 1-2 of the incoming 1A record.
3-10	Coverage Beginning Date	8	Field position 508-515 of the incoming 1A record. Entered as a numeric 8-position entry in the format MMDDCCYY where MM = Month, DD = Day, CC = Century, and YY = Year.
11-18	Coverage Ending Date	8	Field position 516-523 of the incoming 1A record. Entered as a numeric 8-position entry in the format MMDDCCYY where MM = Month, DD = Day, CC = Century, and YY = Year.
19-26	Transmitter Control Code (TCC)	8	Field position 524-531 of the incoming 1A record.
27-29	Batch Sequence Number (BSN)	3	References the batch number of the original transmission file (532-534, 1A record). This number is for BSA E-Filing internal use only.
30-59	Error Codes	30	Please see Attachment A - Error Code List for a detailed description of each error code. Error codes associated with this record begin with a "T" and are left-justified. Unused error code positions are zero filled.
60-69	User Field	10	Field Positions 1041-1050 of the incoming 1A record.
70-90	Filler	21	Space-filled.

Acknowledgement Filer Information (2A) Record

This record is created by FinCEN as part of an acknowledgement file returned to the transmitter. This record contains identifying information and error codes pertaining to the Filer Information (2A) Record data received by FinCEN.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	Field position 1-2 of the incoming 2A record.
3-27	Filer EIN	25	Field position 153-177 of the incoming 2A record.
28-57	Error Codes	30	Please see Attachment A - Error Code List for a detailed description of each error code. Error codes associated with this record are three alphanumeric characters in length and are left-justified. Unused error code positions are zero filled.
58-67	User Field	10	Field – Positions 1041-1050 of the incoming 2A record.
68-90	Filler	23	Space filled.

Acknowledgement Affiliated Bank Information (2B) Record

This record is created by FinCEN as part of an acknowledgement file returned to the transmitter. This record contains identifying information and error codes pertaining to the Affiliated Bank Information (2B) Record data received by FinCEN.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	Field position 1-2 of the incoming 2B record.
3-27	Affiliated Bank EIN	25	Field position 153-177 of the incoming 2B record.
28-57	Error Codes	30	Please see Attachment A - Error Code List for a detailed description of each error code. Error codes associated with this record are three alphanumeric characters in length and are left-justified. Unused error code positions are zero filled.
58-67	User Field	10	Field – Positions 1041-1050 of the incoming 2B record.
68-90	Filler	23	Space filled.

Acknowledgement Exempt Person Information (3A) Record

This record is created by FinCEN as part of an acknowledgement file returned to the transmitter. This record contains identifying information and error codes pertaining to the Exempt Person Information (3A) Record data received by FinCEN.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	Field position 1-2 of the incoming 3A record.
3-7	Sequence Number	5	Field position 3-7 of the incoming 3A record.
8-21	BSA Identifier	14	A unique identifying number assigned by FinCEN for each DOEP in the file.
22-51	Error Codes	30	Please see Attachment A - Error Code List for a detailed description of each error code. Error codes associated with this record are three alphanumeric characters in length and are left-justified. Unused error code positions are zero filled.
52-61	User Field	10	Field Positions 1041-1050 of the incoming 3A record.
62-90	Filler	29	Space filled.

Acknowledgement Trailer for Transmitter (9Z) Record

This record is created by FinCEN as part of an acknowledgement file returned to the transmitter. This record is a systems control record and it summarizes the data processed by FinCEN.

Field Position(s)	Field Name	Length	Description and Remarks
1-2	Record Type	2	Field position 1-2 of the incoming 9Z record.
3-12	Number of Filer Information (2A) Records	10	Generated by FinCEN.
13-22	Number of Designation of Exempt Person Information (3A) Records	10	Generated by FinCEN.
23-52	Error Codes	30	Please see Attachment A - Error Code List for a detailed description of each error code. Error codes associated with this record are three alphanumeric characters in length and are left-justified. Unused error code positions are zero filled.
53-62	User Field	10	Field Positions 1041-1050 of incoming 9Z record.
63-90	Filler	28	Space filled.

Attachment A – Error Code List

Error Code	Error Description	Record	Field Position	Report Field Number
Fatal Errors				
*A fatal error will result in the rejection of the batch file (not including error code F24).				
F02	Number of records reported does not match the computer count for the 2A record.			
F03	Number of records reported does not match the computer count for the 2B record.			
F04	Number of records reported does not match the computer count for the 3A record in the file.			
F11	A required 2A record is missing from the submitted file.			
F13	A required 3A record is missing from the submitted file.			
F16	A required 1A record is missing from the submitted file.			
F18	A required 9Z record is missing from the submitted file.			
F24	Number of forms reported on the batch form does not match the computed count of the forms found in the file. Note: This error is not returned in the acknowledgement file. The Batch Form is used when submitting a batch file via the website. If this error is returned via the web site, do not resubmit the file with a corrected value for number of forms. This error is to assist with ensuring the filer has uploaded the correct file for processing.			
F21	A required 9B record is missing from the submitted file.			
F34	An invalid record type was present in Field Position 1-2 in one or more records of the submitted file.			
F37	A duplicate "Transaction Sequence"/"Transaction Sequence Number" was present in the submitted file.			
F38	The "Transaction Sequence"/"Transaction Sequence Number" is missing from the submitted file.			
F39	A non-numeric "Transaction Sequence"/"Transaction Sequence Number" is present in the submitted file.			

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Error Code	Error Description	Record	Field Position	Report Field Number
F88	The Transmitter Control Code (TCC) specified in the file is not a valid production TCC.			
F89	The submitted batch contains an invalid format indicator in the 1A record.			
F93	An invalid line terminator was present on the submitted file			
F94	Cannot continue processing the submitted file because of previous errors encountered.			
F96	One, or more, invalid characters were present in the submitted file.			
F97	An 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.			
Validation Errors *Validation errors are for informational purposes only.*				
E01	This submission cannot be accepted because it contains significant errors. Please fix and resubmit the file.			
E02	This submission has been accepted and will be processed by FinCEN, however it contains some errors which need to be corrected once this submission has been acknowledged.			
File Errors *File error codes containing an asterisk (*) are primary errors that must be corrected.*				
T01	Transmitter name is blank.	1A	3-152	
T02	Transmitter street address is blank.	1A	153-252	
T03	Transmitter city is blank	1A	253-302	

Error Code	Error Description	Record	Field Position	Report Field Number
T04	Transmitter state is blank.	1A	303-305	
T05	Transmitter ZIP Code is blank.	1A	306-314	
T13	Transmitter country is blank.	1A	315-316	
T06	Transmitter telephone number is blank.	1A	317-332	
T07	Transmitter contact name is blank.	1A	333-482	
T08	Transmitter TIN is blank.	1A	483-507	
T09	Coverage beginning date is blank or invalid.	1A	508-515	
T10	Coverage ending date is blank or invalid.	1A	516-523	
T12	The Transmitter Control Code is blank.	1A	524-531	
D01*	Bank name is blank.	2A/2B	3-152	17
D02*	EIN is blank.	2A/2B	153-177	18
D03*	EIN is an invalid number string such as all zeros, all nines, 123456789, or not equal to nine numbers.	2A/2B	153-177	18
D04	Address is blank.	2A/2B	198-297	20
D05	City is blank.	2A/2B	298-347	21
D06	State is blank.	2A/2B	348-350	22

Error Code	Error Description	Record	Field Position	Report Field Number
D07	State is not a valid state code.	2A/2B	348-350	22
D08	ZIP Code is blank.	2A/2B	351-359	23
D09	ZIP Code is a nine digit code ending in four zeros/nines.	2A/2B	351-359	23
D10	ZIP Code is not equal to five or nine digits or contains non-numeric values.	2A/2B	351-359	23
D11	Primary federal regulator is blank.	2A/2B	360-360	24
D12	Primary federal regulator contains an invalid code.	2A/2B	360-360	24
D13	Affiliated banks indicator contains an invalid code.	2A	361-361	25
D14	Filing type is blank.	3A	8	1
D15	Filing type contains an invalid code.	3A	8	1
D16*	Effective date of exemption is blank.	3A	9-16	2
D17*	Effective date of exemption is not a numeric 8-position entry in MMDDCCYY format where MM = month, DD = day, CC = Century, and YY = year.	3A	9-16	2
D18*	Effective date of exemption is not less than or equal to the date of signature.	3A	9-16	2
D19*	Effective date of exemption is not greater than or equal to January 1, 1900.	3A	9-16	2
D20*	Exempt person last/legal name is blank.	3A	17-166	3
D21	Exempt person is entity contains an invalid code.	3A	167-167	3a

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Error Code	Error Description	Record	Field Position	Report Field Number
D22*	Exempt person first name is blank and the entity box is not checked.	3A	168-202	4
D23*	TIN is blank.	3A	621-645	12
D24*	TIN is an invalid number string such as all zeros, all nines, 123456789, or not equal to nine numbers.	3A	621-645	12
D25	TIN type is blank.	3A	646-646	13
D26	TIN type contains an invalid code.	3A	646-646	13
D27	E-mail address is in an invalid format.	3A	647-746	14
D28	Exempt person phone number contains non-numeric values, is in an invalid format, or is not equal to ten numbers.	3A	747-762	15
D29	Type of exempt person contains an invalid code.	3A	769-769	16
D30	Type of exempt person is blank.	3A	769-769	16
D31	Authorizer phone number contains non-numeric values, is in an invalid format, or is not equal to ten numbers.	3A	955-970	29
D32	Date of signature is not a numeric 8-position entry in MMDDCCYY format where MM = month, DD = day, CC = Century, and YY = year.	3A	977-984	30
D33	Date of signature is greater than the current date.	3A	977-984	30
D34	Prior report BSA Identifier/ Document Control Number (DCN) is blank.	3A	985-998	
D35	Prior report BSA Identifier/ Document Control Number contains non-numeric values.	3A	985-998	

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Attachment B – Error Correction Instructions

This attachment identifies the requirements and procedures for correcting DOEP errors reported to batch filers during the DOEP acknowledgement process.

Error Categories:

There are two types of errors identified in batch files: batch file format errors that may result in automatic rejection of a batch file and data errors that represent errors in data entered in individual fields. Some format errors are termed fatal errors because they prevent the batch file from being processed. For example, error F18 "A required 9Z record is missing from the submitted file" is a fatal format error because each batch file must contain a 9Z record. All format error codes begin with the letter "F." All data error codes begin with the letter "T" or "D." Error D01 "Bank name is blank" is a data error because it indicates data is missing from a record. Generally, data error codes indicate that data entries are missing or incorrect.

File errors are classified as primary or secondary errors, depending on their importance. Primary errors are file errors that violate electronic filing requirements or report instructions and so degrade DOEP data quality that they must be corrected. Primary errors make it difficult for regulators, analysts, and law enforcement investigators to locate the DOEPs filed by specific banks or on specific persons in the database. Examples of such errors include blank legal name or missing filer Employer Identification Number. Attachment A – Error Code List identifies primary errors by adding an asterisk (*) to the three-digit file error codes.

Secondary errors are file errors that violate electronic filing requirements or report instructions but have a lesser impact on DOEP data quality. Examples of secondary errors are ZIP Codes that end in four zeros (e.g. 123450000) or invalid telephone numbers.

Correction Requirements:

Filers should immediately correct and resubmit a batch file rejected for fatal errors when notified by FinCEN the batch file was not accepted. Rejection of a batch file does not relieve the filer of the responsibility to file a DOEP within the time frames established by the BSA.

When a batch file is accepted by the BSA E-Filing Program, filers receive an acknowledgement file that records all errors identified in the batch file. A DOEP that contains primary errors must be re-filed as a corrected DOEP with the primary errors and any secondary errors corrected. DOEPs that contain only secondary errors need not be corrected. FinCEN requires that filers prevent all reported errors in their future filings.

FinCEN recommends that primary error corrections be made no later than 30 days after receiving error notifications. Furthermore, FinCEN recommends that filers remedy any systemic problems in their electronic submissions within 30 days of receiving error notifications. **If technical issues prevent filers from implementing corrections within these time frames, filers should notify FinCEN by writing to:**

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Financial Crimes Enforcement Network
Office of Compliance
P.O. Box 39
Vienna, VA 22183

This correspondence should explain the technical issues that prevent meeting this time frame, provide an estimate of when the issues will be resolved, and include a contact name and telephone number.

Correction Procedures:

A DOEP batch file is rejected when it contains fatal format errors. The filer must correct all errors identified in the batch file and resubmit the batch file to BSA E-Filing. Because they were not accepted by FinCEN, all DOEPs in the re-submitted batch file must retain their original filing type. Do not identify DOEPs in a refiled batch file as corrected reports unless they originally were filed as corrected reports in the rejected batch file.

If errors in an accepted batch file involve primary file errors, filers must file corrected reports on all DOEPs containing primary file errors using the following procedures:

- Make the corrections to both the primary and secondary errors in all DOEPs that contain primary errors. Filers are encouraged, but not required, to correct any secondary errors in DOEPs that contained no primary errors.

  NOTE: Do not correct any error codes that begin with "T." Instead, ensure any "T" errors are prevented in future batch files.

- Enter "B" at Field Position 8 "Filing type" in the Exempt Person Information (3A) Record for each corrected DOEP.

- Enter the prior DOEP's BSA Identifier (from the DOEP acknowledgement file) at Field Positions 985 – 998 "BSA Identifier (BSA ID)/Document Control Number (DCN)" in the Exempt Person Information (3A) Record for each corrected DOEP.

- Ensure that Field Positions 977 - 984 contain a new "Date of signature" in the Exempt Person Information (3A) Record for each corrected DOEP.

- Complete all other data in the DOEPs in their entirety.

- Retransmit the corrected DOEPs in a new batch file. Do not re-transmit the original batch file because this will cause duplicate database entries on any DOEPs that were not corrected.

FinCEN monitors DOEP filings to identify financial institutions that fail to correct primary errors in prior filings or to prevent previously-reported errors of any type in future filings. FinCEN may report such failures to a financial institution's primary federal/state regulator or BSA examiner.

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Attachment C – Electronic Filing Instructions

The following instructions apply only to the electronic filing of the Designation of Exempt Person (DOEP) report, FinCEN Form 110, through FinCEN's BSA E-Filing System. These instructions do not apply to any other current or prior Bank Secrecy Act reports.

General Information

The Bank Secrecy Act and its implementing regulations require banks to file currency transaction reports on transactions in currency of more than $10,000. The regulations also permit a bank to exempt certain customers from currency transaction reporting in accordance with 31 CFR 1020.315.

Banks are the only type of financial institutions that may exempt customers from CTR filing requirements. The term bank is defined in 31CFR 1010.100(d); and includes savings and loan associations, thrift institutions, and credit unions.

The customers that the bank may exempt are called "exempt persons." An exempt person may be a bank, government agency/government authority, listed company, listed company subsidiary, eligible non-listed business, or payroll customer.

A bank may, but is not required to, use this report to notify the Treasury that the bank has revoked the designation of a customer as an exempt person.

FinCEN encourages banks to use the exemption procedure to the fullest extent. FinCEN reminds banks of their continuing obligation to monitor for and report suspicious activity with respect to transactions of all customers, including currency transactions conducted by exempt persons.

General Instructions

1. Filing: The DOEP should be e-filed through the BSA E-Filing System. Go to http://bsaefiling.fincen.treas.gov/index.jsp to register. Any bank that wishes to designate a customer as an exempt person must file the DOEP no later than 30 days after the first transaction to be exempted.

2. **Report Completion.** Complete the report in accordance with instructions for each item. Unless there is a specific instruction to the contrary, leave blank any items that do not apply.

3. Dates. Enter all dates in MM/DD/ YYYY format where MM = month, DD = day, and YYYY = year. Precede any single number with a zero, *i.e.*, 01, 02, etc.

4. Numbers. Enter all numbers such at identifying and telephone numbers as single number strings without formatting or punctuation such as spaces, hyphens, or parenthesis.

5. Addresses. Enter the permanent street address, city, two-letter state or territory abbreviation, and ZIP Code. Provide the apartment number or suite number, if known, following the street address. A non-location address such as a post office box or rural route number should be used only if no other street address information is available. ZIP Codes must be five or nine digits. ZIP Codes must be entered without formatting or special characters such as hyphens. For example, the ZIP Code 12354-6120 would be entered as 123546120. Complete any address item that is known, even if the entire address is unknown. No abbreviations are permitted in city names, which must be completely spelled out. A U.S. city name should match the city name used by the U.S. Postal Service for the associated state and ZIP Code. Use only the authorized U.S. Postal Service state, territory, or military address abbreviations found at https://www.usps.com/ship/official-abbreviations.htm. Foreign batch filers who are completing the Transmitter (1A) Record with foreign address information must use only the Canadian and Mexican state/territory/province codes and ISO country codes approved for use by FinCEN. For Canadian provinces and territories use the Canada Post Corporation codes found at http://www.canadapost.ca/tools/pg/manual/PGaddress-e.asp#1380608. For Mexican states and territories use the ISO 3166-2 three-letter codes found at http://www.commondatahub.com/live/geography/state_province_region/iso_3166_2_state_codes. For all countries use the ISO 3166-1 two-letter country codes found at http://www.iso.org/iso/country_names_and_code_elements. Note: The ISO 3166-1 country list includes entries for all U.S. territories. Do not use these U.S. territory entries, which match the U.S. Postal Service abbreviations required in state fields, in any country field.

6. Prohibited Words. Do not use the following words or their variations in fields:

a) AKA
b) CUSTOMER
c) DBA
d) NONE
e) NOT APPLICABLE
f) OTHER
g) SAME
h) SAME AS ABOVE
i) SEE ABOVE
j) UNKNOWN
k) VARIOUS
l) XX

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7. **Name Editing Instructions.** Because many names do not consist of a single first name, middle name, and last name, care must be taken to ensure these names are entered properly in the BSA SAR. This is especially important when there are separate fields for the last name, first name, and middle name. Some names have multiple surnames (family names) or multiple given names that do not include a middle name. Others may not be written in [first name] [middle name] [last name] order. Multiple surnames must be entered in the last name field. For example, Hispanic names may be written in the order of given name, father's last name, and mother's last name, e.g., "Juan Vega Santiago." Thus the surname "VEGA SANTIAGO" would be entered in the last name field with "JUAN" entered in the first name field. Some Hispanic surnames consist of three names (e.g., father's last name, mother's last name, and husband's father's last name in the case of a married woman). In that case all three would be entered in a last name field. Hispanic names do not have middle names, so a multiple Hispanic given name such as "Rosa Maria" would be recorded in the first name field. In some cultures names consist of multiple first names and a single family name, not necessarily in (first name) (last name) order. For example, the Korean name "Kim, Chun Nam" consists of the family name "Kim" and the first name "Chun Nam" separated by a comma and space. There is no middle name. In this case "KIM" would be entered in the last name field and "CHUN NAM" would be entered in the first name field. Nothing is entered in the middle name field. When an individual name is entered in a single name field it should be entered in [first name] [middle name] [last name] order regardless of any foreign naming conventions. Thus, "Kim, Chun Nam" would be entered as "CHUN NAM KIM" in a single name field. Punctuation and special characters should be used in names only when they are part of the name. For example, the period in "Expedia.Com" should be included because it is part of the name. Placing a period after a middle initial would be prohibited because the period is not part of the middle name. Abbreviations in names are prohibited unless an abbreviation is part of a legal name. Entry of middle initials is permitted when a middle name is unknown. A name suffix may be abbreviated, i.e. Junior can be JR, Senior can be SR, the Third can be III, etc.

Specific Instructions

Part I Filing Information

Item 1--Type of filing. Check only one of the three boxes 1a "Initial designation," 1b "Exemption amended," or 1c "Exemption revoked." If the DOEP amends or revokes a prior designation, include the Document Control Number or BSA Identifier of the prior filing in the associated number field. If this number is unknown, enter "00000000000000" in the number field. Leave the number field blank if the filing is an initial designation.

Item 2--Effective date of the exemption. For an initial designation, enter the date of the first transaction to be exempted. For amended DOEPs, if the effective date of the exemption is not being amended, the date entered should be the same date the bank used in the "effective date of the exemption box" when the initial designation was made. If the effective date of the

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exemption is being amended, enter the revised date of the first transaction to be exempted. If an exemption is being revoked, enter the day after the date of the last transaction that was exempted.

Part II Exempt Person Information

Check here if entity. Check this box if the exempt person is an entity. Leave this box blank if the exempt person is an individual.

Item 3—Individual's last name or entity's legal name of the exempt person. If the exempt person is an entity, enter the full legal name of the exempt person as it is shown on the charter or other document creating the entity. For exempt individuals such as sole proprietorships, enter individual's last name.

Item 4—First name. Enter the first name of the exempt person if an individual.

Item 5—Middle name. Enter the middle name or initial of the exempt person if an individual.

Item 5—Suffix. Enter the name suffix such as JR, SR, III, etc. of the exempt person if an individual.

Item 6—Alternate name. Enter the individual's also known as (AKA) or the entity's doing business as (DBA) name if different from the name entered in Items 3-5. Do not include the acronyms AKA or DBA with the name.

Item 7—Occupation or type of business. Record the occupation, profession, or type of business of the exempt person. Use specific descriptions such as doctor, carpenter, attorney, used car dealership, plumber, truck driver, hardware store, etc. Do not use non-descriptive occupations such as businessman, merchant, retailer, or self-employed without indicating the nature of the occupations, e.g. shoe merchant or self-employed accountant.

Item 7a—NAICS Code. Select the North American Industry Classification System (NAICS) code for the occupation entered in Item 7. Batch filers should only use codes from the NAICS Code list on the BSA E-Filing Web Site at http://bsaefiling.fincen.treas.gov/main.html.

Item 8—Address. Enter the permanent street address of the business location of the exempt person. For exempt persons doing business at more than one physical location, enter the local headquarters address or local address of the exempt person. For individuals such as sole proprietorships, enter the business address of the individual rather than the home address, unless they are the same.

Item 9—City. Enter the city associated with the business location of the exempt person. Do not abbreviate the city name (see General Instruction 5).

Item 10—State. Select the state or territory associated with the business location of the exempt person.

Item 11—ZIP Code. Enter the ZIP Code associated with the business location of the exempt person. Use only the five or nine-digit ZIP Code assigned to the address by the U.S. Postal Service.

Item 12—TIN. Enter the Employer Identification Number (EIN) or Social Security Number (SSN) of the exempt person. If a sole proprietorship does not have an EIN, enter the proprietor's Social Security Number (SSN).

Item 13—TIN type. Select the TIN type associated with the TIN in Item 12.

Item 14—E-mail address. Enter the e-mail address associated with the exempt person.

Item 15—Phone number. Enter the telephone number of the exempt person. Enter as a single number string without formatting and punctuation such as spaces, hyphens, or parenthesis.

Item 15a—Extension. Enter the telephone number extension of the exempt person.

Item 16—Type of exempt person. Check only one of the four boxes 16a "Listed company," 16b "Listed company subsidiary, 16c "Eligible non-listed business, or 16d "Payroll customer."

Part III Filer Information

Item 17—Name of bank. Enter the bank's full legal name.

Item 18—EIN. Enter the bank's Employer Identification Number (EIN).

Item 19—RSSD. Enter the bank's Research Statistics Supervision Discount (RSSD) number.

Items 20 - 23—Address. Enter the bank's headquarters address.

Item 24—Primary federal regulator. Select the bank's primary federal regulator from the list. The options are:

> Federal Reserve Board (FRB)
> Federal Deposit Insurance Corporation (FDIC)
> Internal Revenue Service (IRS)

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National Credit Union Administration (NCUA)
Office of the Comptroller of the Currency (OCC)

Item 25—Affiliated banks. A parent bank holding company or one of its bank subsidiaries may make the designation of exempt person on behalf of some or all bank subsidiaries of the holding company so long as the designation lists each bank subsidiary that will treat the customer as an exempt person. Check the box in Item 25 and complete an Affiliated Bank Information section on each affiliated bank. Batch filers will complete an Affiliated Bank Information (2B) Record on each affiliated bank.

Part IV Signature

It**em 26—Print name.** Enter the name of the bank official who authorized the exemption.

Item 27—Title. Enter the title of the bank official who authorized the exemption.

Item 28—Signature. This report is signed when the discrete report or batch file is signed with a personal identification number (PIN) assigned to an appropriate bank official by the BSA E-Filing System.

Item 29—Phone number. Enter the telephone number of the bank official who authorized the exemption.

Item 29a—Extension. Enter the telephone number extension of the bank official who authorized the exemption.

 Item 30—Date of signature. If the DOEP is a discrete filing, this date will be supplied by the BSA E-Filing System when the report is signed with a PIN. Batch filers should enter the signature date in the 3A record.

Paperwork Reduction Act Notice: The purpose of this report is to provide an effective means for banks and depository institutions to exempt eligible customers from currency transaction reporting. This report is required by law, pursuant to 31 CFR 1020.315 Federal law enforcement and regulatory agencies, including the U.S. Department of Treasury and other authorized authorities, may use and share this information. You are not required to provide the requested information unless a report displays a valid OMB control number. Public reporting and recordkeeping burden for this report is estimated to average 70 minutes per response, and includes time to gather and maintain information for the required report, review the instructions, and complete the information collection. The record retention period is five years. Send comments regarding this burden estimate, including suggestions for reducing the burden, to Financial Crimes Enforcement Network, Attention: Paperwork Reduction Act, P. O. Box 39, Vienna, VA 22183-0039.

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Secure Data Transfer Mode Users

For filers using this option for filing, SDTM users can submit a single file containing the FinCEN DOEP batch data. The file naming convention is as follows:

Submission type - DOEPST
Date/Time - This will be a date-time stamp to guarantee filename uniqueness
year – YYYY
month – MM day – DD
hour – hh
minute – mm
second – ss
Organization name –custom naming by the submitting organization.

Example file name:

DOEPST.20120609153015.BANKORGNAME