Electronic Filing Requirements Updates

The Department of Revenue Services (DRS) has made the following changes since the publication of **IP 2007(19)**, *Forms 1098, 1099-R, 1099-MISC, and W-2G Electronic Filing Requirements for Tax Year 2007*, and **IP 2007(20)**, *Form W-2 Electronic Filing Requirements for Tax Year 2007*.

Issued: March 7, 2008

If you are filing 25 or more Forms W-2, 1099-R, 1099-MISC, or W-2G, DRS requests that you file these forms electronically on our website at **www.ct.gov/DRS**. However, if you are unable to file electronically or believe that filing electronically is unduly burdensome, DRS will accept these forms on CD (but not on any other type of magnetic media). All forms submitted on CD must be in MMREF/EFW2 format. For file layout information, see **IP 2007(19)** or **IP 2007(20)**. For CD filing instructions, see **IP 2007(19)**, *Appendix A through C* or **IP 2007(20)**, *Appendix A through D*.

NOTE: You may file the 2007 informational returns on CD even if you did not file **Form CT-8508**, *Request for Waiver from Filing Informational Returns Electronically*. The filing deadline for 2007 informational returns filed electronically or on CD is March 31, 2008.

Issued: February 1, 2008

The following information is required for file upload using the *TSC*.

Technical Requirements for File Upload Using the *TSC* Batch File Upload Utilizing the Standard File Layout:

- Data within the file must be created using the ASCII character set.
- Each record in the file **must** be 512 characters in length. Data must be entered in each record in the exact positions shown in *Section V*.
- The file upload must be formatted using carriage-return and line feed (CR/LF).
- Do not place a record delimiter before the first record of the file.
- Data must be in **UPPERCASE LETTERS**
- All files must be from a single transmitter and only contain 1 RA record.
- Each file must contain W-2 information for a single calendar year only. Multiple calendar years will be rejected.
- The *TSC* does **not** accept backup, compressed, zip, or Excel files.

IP 2007(19)

State of Connecticut
Department of Revenue Services

Important Information on Filing Annual Informational Returns

Department of Revenue Services (DRS) requires that:

- Specifications for record layouts be followed.
- Payers who file 25 or more Forms 1098, 1099-R, 1099-MISC, or W-2G, per form type, file electronically with DRS.

www.ct.gov/DRS

TSC

Taxpayer Service Center

DRS electronic **Taxpayer Service Center (*TSC*)** allows taxpayers to electronically file, pay, and manage state tax responsibilities.

To make electronic transactions or administer your tax account online, visit the DRS website at **www.ct.gov/DRS** and select the *TSC* logo in the left tool bar.

Connecticut tax information is also available on our website.

Issued: 12/07

Forms 1098, 1099-R, 1099-MISC, and W-2G Electronic Filing Requirements For Tax Year 2007

For payers filing annual informational returns electronically, the due date is March 31, 2008.

For payers not filing annual informational returns electronically, the due date is February 29, 2008.

Department of Revenue Services walk-in locations and telephone numbers are listed on the back cover.

What's New

Taxpayer Service Center *(TSC)*

Connecticut taxpayers can upload withholding information through the Department of Revenue Services (DRS) electronic **Taxpayer Service Center** *(TSC)*. The *TSC* is an interactive tool that can be accessed through our website at **www.ct.gov/DRS** for a free, fast, easy, and secure way to conduct business with DRS.

Some features of the *TSC* include the ability to view current balances, make scheduled payments, and amend certain business tax returns. The self-service aspect of the *TSC* enables taxpayers to easily get answers to the most frequently-asked questions in addition to exchanging confidential information through a secure mailbox. For this publication, the following forms are eligible to be transmitted through the *TSC*:

- Federal Forms 1099-R;

- Federal Forms W-2G; **and**

- **Form CT-1096**, Connecticut *Annual Summary and Transmittal of Informational Returns*

Connecticut taxpayers can either key-in or upload withholding information through the *TSC*.

Electronic Filing of Informational Returns

The *TSC* makes filing informational returns easier while ensuring the security of the data being filed. Taxpayers or preparers can use the *TSC* to key and send or upload forms either by:

- Using the bulk filing capabilities assigned to your current Connecticut Tax Registration Number that is registered for income tax withholding; **or**

- Completing an application and being issued a separate Third Party Bulk Filer (TPBF) Identification Number. This option is available for tax preparers who are filing for their clients and are not registered with DRS.

With bulk filing capabilities, you may then select and begin to file your informational returns online. Once you have entered all informational returns you must transmit Form CT-1096 to complete the entire filing process. The informational returns are not accepted until Form CT-1096 has been filed. You will receive a unique confirmation number for each Form CT-1096 submitted. The confirmation number is your proof of filing.

Three Options to File Forms 1099-R, W-2G, and CT-1096 Through the *TSC*:

1. Key and Send

This may be the easiest way to file for taxpayers and preparers who submit 24 or fewer informational returns. Selecting this option allows you to enter in the information for payees one at a time with a single login process. Once all informational returns are entered, you are brought to Form CT-1096 where the *TSC* has automatically filled in most of the required information. You will be required to enter the quarterly breakdown of the total amount reported. The informational returns entered will not be transmitted to DRS until a confirmation number has been issued for Form CT-1096.

2. Dynamic Web Import (DWI)

DWI enables you to upload a file of the informational returns. This DWI tool does not support existing EFW2 file formats. It is a file import process that allows you to dynamically define a file. You will prepare a file with your payee figures. Each field of your file will represent a line item from a return you are reporting. You can arrange the fields in any order by defining your own customized layout. If any informational returns have an error, DRS will provide you a list of the failed records with an explanation. Simply correct the file and resubmit. Once all informational returns are uploaded, you will be brought to Form CT-1096 where the *TSC* will have automatically filled in most of the information based on all successfully uploaded informational returns. You will be required to provide the quarterly breakdown of the total amount reported. You must complete Form CT-1096 at this time. The informational returns uploaded will not be transmitted to DRS until you receive a confirmation number for the associated Form CT-1096.

3. Batch File Upload/DWI Utilizing the Standard MMREF/EFW2 File Layout

Requirements: Must be registered as a Third Party Bulk Filer. See *Registering as a Third Party Bulk Filer (TPBF)* on Page 3.

Batch upload allows you to submit a file using the standard MMREF/EFW2 layout as defined in this publication. In the event an informational return is uploaded with errors, we will provide an acknowledgment file with details of the failed records with an explanation. See *Acknowledgment Results Layout Record* on Page 31. Simply correct the file and resubmit. The informational returns entered are not transmitted to DRS until you receive a confirmation number for the

associated Form CT-1096. Unlike the key and send method, once you have uploaded all your returns you must select Form CT-1096 from the Main Menu page and upload Form CT-1096 to complete the filing process. After the file of returns has been uploaded, the *TSC* will again provide a confirmation file with summary details. If an error occurs while uploading Form CT-1096, the *TSC* will again provide you an explanation. Resubmit only those Forms CT-1096 for which a confirmation number was not received.

Forms 1098 and 1099-MISC

You will **not** be able to use the *TSC* to submit the following federal forms:

- Form 1098; **or**
- Form 1099-MISC

However, you may still file electronically by visiting the DRS website to upload a file.

Go to **www.ct.gov/electronicfileW2and1099** and follow the prompts to completion. You will receive a confirmation number for all successfully transmitted files.

DRS plans to have these forms available for the 2008 filing season as an option in the *TSC*.

Registering as a Third Party Bulk Filer (TPBF)

To register as a Third Party Bulk Filer (TPBF), go to the DRS website at **www.ct.gov/DRS** and click on the *TSC* logo on the left toolbar, then complete the following steps:

- Click on the blue Tax Preparer button;
- Click on the link that states: Third Party Bulk Filing requires pre-registration. Please click here to register;
- Click on: Application to Become a Bulk Filer (Fillable Version); **and**
- Fill out online, print, and fax to: 860-297-4761 Attention: Bulk Filing Coordinator. Or, print and mail to:

  Connecticut Department of Revenue Services
  Electronic Commerce Unit
  25 Sigourney Street
  Hartford CT 06106

A Bulk Filing Identification Number, password, and instructions will be sent to you by mail.

Additional Bulk Filing Information for Transmitting Informational Returns

Our web page at **www.ct.gov/electronicfileW2and1099** has up-to-date information regarding system enhancements and answers to other questions you may have about the electronic filing of informational returns.

Questions & Answers
Connecticut Electronic Filing of
Federal Forms 1098, 1099-MISC, 1099-R, and W-2G

Q. Which nonpayroll informational returns must be filed with the Connecticut Department of Revenue Services (DRS)?

A. DRS requires every state copy of the following:

- Federal Form W-2G for winnings paid to a Connecticut resident even if no Connecticut income tax was withheld;
- Federal Form 1098 for property taxes paid on real estate located in Connecticut and owned by an individual;
- Federal Form 1099-MISC for:
    a. Payments made to a Connecticut resident even if no income tax was withheld;
    b. Payments made to a nonresident of Connecticut that relate to services performed wholly or partly in Connecticut even if no Connecticut income tax was withheld;
- Federal Form 1099-R but **only** if Connecticut income tax was withheld;

Multistate filers must also comply with these requirements.

Q. Does DRS participate in the Federal/State Combined Filing Program?

A. Yes. DRS participates in the Federal/State Combined Filing Program for federal Forms 1099-MISC and 1099-R. See *Federal/State Combined Filing* on Page 6.

Q. Who is required to file electronically with DRS?

A. Payers who file 25 or more Forms 1098, 1099-R, 1099-MISC, or W-2G, per form type, are required to file electronically with DRS. Payers who file 24 or fewer forms, per form type, are encouraged to file electronically. See the *Key and Send* option described on Page 2.

Q. Under what circumstances will DRS accept paper informational returns?

A. DRS will accept paper informational returns from payers who file 24 or fewer Forms 1098, 1099-R, 1099-MISC, or W-2G, per form type. However, payers filing Forms 1099-R and W-2G are encouraged to file electronically using the Key and Send option

described on Page 2. Payers filing Form 1098 and Form 1099-MISC are encouraged to file electronically at **www.ct.gov.electronicfileW-2and1099**.

Q. Were there any technical changes in the specifications for 2007?

A. Yes. See Record Specifications beginning on Page 11.

Q. Are DRS electronic filing specifications the same as the federal specifications?

A. No. DRS does not require the filing of the State Totals K Record. Also, many fields are not required by DRS. These are indicated by **N/A**. **Enter blanks.**

Q. How will records not required by DRS be treated?

A. Information records not required by DRS will be ignored.

Q. What paper forms should accompany the electronic filing?

A. None. There is no need to submit paper copies of any electronically filed forms. If there are any attachments or schedules that cannot be electronically filed, keep this information with your records to be provided upon request to DRS.

Q. How does a payer request an extension of time to file informational returns?

A. To request an extension, a payer must complete and submit the paper **Form CT-8809**, *Request for Extension of Time to File Informational Returns*, on or before the last day of March if filing electronically, or the last day of February if not filing electronically. DRS will only notify payers whose extension requests have been denied.

For 2007, Form CT-8809 cannot be filed electronically.

Q. How does a payer request a waiver from filing informational returns electronically?

A. DRS may waive the electronic filing requirement if a payer can show hardship. To request a waiver, a payer must complete and submit a paper **Form CT-8508**, *Request for Waiver From Filing Informational Returns Electronically,* on or before January 15, 2008. DRS will only notify payers whose request for waiver has been denied.

Payers who have requested and received a waiver from filing electronically are encouraged to submit files to DRS on CD following the specifications for record layout noted in this publication, in lieu of paper filing. See *Appendix A, B,* and *C* for more information on submitting CD files to DRS.

Q. Will failure to file informational returns electronically result in the assessment of penalties?

A. Yes. Payers required to file electronically will be treated as having failed to file if they file paper forms in lieu of electronic filing, unless DRS has granted a waiver. A penalty of $5 may be imposed for each informational return that a payer fails to file with DRS by the last day of March if required to file electronically, or by the last day of February if submitting CD files or filing paper forms. The total penalty imposed will not exceed $2,000 for any calendar year.

Q. How does a payer report changes on a previously-filed electronic submission?

A. Any changes to files submitted electronically must be done using the paper method. Once a file is successfully transmitted electronically, you will no longer have the option to return to a file and correct informational returns and Form CT-1096. If a particular form is omitted, that form must be sent in on paper in addition to a corrected paper Form CT-1096.

Q. How can a payer submit data when there is a requirement for the data to be protected?

A. Electronic filing of informational returns through the *TSC* is a free, fast, easy, and secure way to conduct business with DRS. The connection created during your session with the *TSC* encrypts all information sent from the filer until the information is delivered to DRS, thus keeping data secure while in transport.

The connection created through the alternate filing site at **www.ct.gov/electronicfileW-2and1099** for filers of Forms 1098 and 1099-MISC is a secured connection.

Table of Contents

I. Federal/State Combined Filing

Connecticut participates in the Federal/State Combined Filing Program for federal Forms 1099-MISC and 1099-R. The only differences in the record requirements are noted to the right. Records T, C, and F are identical to the filing requirements in this booklet.

What to Send to DRS

Combined filers are required to file **Form CT-1096**, *Connecticut Annual Summary and Transmittal of Information Returns,* if Connecticut income tax was withheld from nonpayroll amounts. **Do not file Form CT-1096 if Connecticut tax was not withheld**.

Mail Form CT-1096 (if applicable) to:

> Department of Revenue Services
> PO Box 5081
> Hartford CT 06102-5081

Do **not** send federal Form 6847 to DRS.

Record Differences for Combined Filing

Record A

- **Field position 26** (Combined Federal/State Filer) must contain a **1**.

Record B

- **Field positions 723-734** (State Income Tax Withheld) must contain the dollar amount of Connecticut state income tax withheld from Forms 1099-MISC and 1099-R only. The payment amount must be right justified and unused positions must be zero-filled.

- **Field positions 747-748** (Combined Federal/State Code) The code for Connecticut is 08.

Corrections

Any corrections to filing using the Federal/State Combined Filing Program for federal forms 1099-MISC and 1099-R should be replaced by sending DRS paper forms and identifying that the information is a corrected file.

II. Connecticut Electronic Filing Reporting Requirements for Forms 1098, 1099-R, 1099-MISC, and W-2G

General Information

This booklet contains the specifications and instructions for reporting Forms 1098, 1099-R, 1099-MISC, and W-2G information to DRS electronically.

DRS requires every state copy of the following:

- Federal Form W-2G for winnings paid to a Connecticut resident even if no Connecticut income tax was withheld;
- Federal Form 1098 for property taxes paid on real estate located in Connecticut and owned by an individual;
- Federal Form 1099-MISC for:
  a. Payments made to a Connecticut resident even if no Connecticut income tax was withheld,
  b. Payments made to a nonresident of Connecticut that relate to services performed wholly or partly in Connecticut even if no Connecticut income tax was withheld;
- Federal Form 1099-R **only** if Connecticut income tax was withheld;

Multistate filers must also comply with these requirements.

Electronic Filing Reporting Requirements

Payers filing 25 or more Forms 1098, 1099, or W-2G, per form type, with DRS are required to file electronically. Payers who file 24 or fewer forms, per form type, are encouraged to file electronically. See the *Key and Send* option described on Page 2.

Filing Deadline

Informational return files are due the last day of March if filing electronically. For payers not filing electronically, informational returns are due the last day of February. If the due date falls on a Saturday, Sunday, or legal holiday, the next business day is the due date.

Extension of Time to File

DRS may grant a payer an extension of time to file informational returns upon request by the payer. To request an extension, the payer must complete and submit **Form CT-8809**, *Request for Extension of Time to File Informational Returns*, to DRS on or before the last day of March if filing electronically, or the last day of February if not filing electronically.

For 2007, Form CT-8809 cannot be filed electronically.

Waiver From Filing Electronically

DRS may waive the electronic reporting requirement for a payer if the payer can show hardship. To request a waiver, the payer must complete and submit **Form CT-8508**, *Request for Waiver From Filing Informational Returns Electronically*, to DRS on or before January 15, 2008. If a waiver is granted, payers are encouraged to submit informational returns on CD in lieu of paper. See *Appendix A, B,* and *C* for more information on submitting CD files to DRS.

For 2007, Form CT-8508 cannot be filed electronically.

CD Filing Requirements

Payers who have requested and received a waiver from filing electronically, are encouraged to submit files to DRS on CD following the specifications for record layouts noted in this publication. See *Appendix A, B,* and *C* for more information on submitting CD files to DRS.

Private Delivery Services

Taxpayers can use certain designated delivery services, in addition to the U.S. Postal Service, for delivering returns, claims, statements or other documents, or payments and meet the timely mailing as timely filing and payment rules. DRS has accepted the list of designated delivery services currently published by the IRS. The following are the designated PDSs and designated types of service at the time of publication:

DHL Express (DHL)	
• *DHL Same Day Service*	
• *DHL Next Day 10:30 a.m.*	
• *DHL Next Day 12:00 p.m.*	
• *DHL Next Day 3:00 p.m.*	
• *DHL 2nd Day Service*	
Federal Express (FedEx)	**United Parcel Service (UPS)**
• *FedEx Priority Overnight*	• *UPS Next Day Air*
• *FedEx Standard Overnight*	• *UPS Next Day Air Saver*
• *FedEx 2 Day*	• *UPS 2nd Day Air*
• *FedEx International Priority*	• *UPS 2nd Day Air A.M.*
• *FedEx International First*	• *UPS Worldwide Express Plus*
	• *UPS Worldwide Express*

This list is subject to change. To verify the names of designated PDSs and designated types of service, check the DRS website or call DRS. See **Policy Statement 2005(4)**, *Designated Private Delivery Services and Designated Types of Service*.

Penalties for Late Filing

The penalty for late filing is $50. Additionally, a penalty of $5 per form (up to a total of $2,000 per calendar year) is imposed on payers who fail to provide copies of federal Forms 1098, 1099, or W-2G to DRS. Any payer required to file federal Forms 1098, 1099, or W-2G electronically with DRS is subject to these penalties if the payer files using paper forms without obtaining a waiver.

Processing Information and Payer Retention Responsibilities

DRS requires payers to keep a copy of their 1098, 1099, and W-2G data, or to be able to reconstruct the data, for at least four years after the due date.

Test Files

The *TSC* offers the ability to test your file layout and confirm your transmission capability by using the "Demo" mode feature. Log into the *TSC* and choose "Demo" mode from the Main Menu. Once in Demo mode, the *TSC* responds like the live application, but does not submit your data to DRS. In Demo mode, you upload your actual live files and replicate the process, while validating the quality of your data and file layouts. Like the *TSC*, Demo mode provides a confirmation number in the following format: 07D0100020001. This is a Demo mode confirmation; indicated with the "D" in the third position. This confirmation notifies you that this filing has no apparent errors and should be acceptable by the *TSC*. **This is a**

Demo mode confirmation and not an official filing. The system has not stored any part of this file and DRS has not received any information from this demo mode filing.

Use of Agent

Payers using a service to electronically file or transmit information are responsible for the accuracy and timeliness of their informational returns. If a transmitter fails to meet the electronic filing requirements, the payer is liable for any penalties imposed by DRS.

Use of Paper Forms

Do not send paper forms to DRS if the information was submitted to DRS electronically.

A penalty may apply if you file paper federal Forms W-2G, 1098, 1099-R, or 1099-MISC, when you are required to file these forms electronically.

III. Data Record Descriptions

General Information

Use the information below, as well as the list of technical requirements and specifications in the other sections of this publication, to prepare Forms 1098, 1099-R, 1099-MISC, and W-2G filings. See *Section V* for examples of proper record sequence.

These record formats are identical to those published by the IRS in Publication 1220 (Rev. Proc. 2007-51), Specifications for Filing Forms 1098, 1099, 5498, and W-2G Electronically or Magnetically.

Section VI includes formats for the following record types required by DRS. (See *Section V,* for proper record sequence.)

- T Record – Transmitter Record
- A Record – Payer Record
- B Record – Payee Record
- C Record – End of Payer Record
- F Record – End of Transmission Record

Transmitter T Record identifies the entity transmitting the file. It must be the initial record of each file.

Payer A Record identifies the institution or person making the payments. The number of Payer A Records depends on the number of payers and the different types of returns being reported.

Payee B Record contains the payment information from the information returns. The record layout for field positions 1 through 543 is the same for all types of returns. Field positions 544 through 750 vary for each type of return to accommodate special fields for individual forms.

End of Payer C Record has the total number of payees (B Records) and the totals of the payment amount fields filed by a given payer or a particular type of return.

End of Transmission F Record is the summary of payers (A Records) in the entire file. It must be the last record in the file.

There is **no** K Record (State Totals) requirement for Connecticut. If included, it will be ignored.

Punctuation may be used when appropriate. Do not include titles in the payer name field. Titles make it difficult for DRS to determine an individual payer's name and may prevent DRS from properly crediting return data.

If it is impossible to remove a title, then you **must** report the surname first.

Money Amounts

All money amounts are strictly numeric. They must include both dollars and cents with the **decimal point assumed**. Do not round to the nearest dollar

Example: $5,500.99 = 000000550099

Do not use any punctuation in any money field.

Negative money amounts are **not** allowed.

Right justify and zero fill all money fields. Enter zeros in a money field that is not applicable.

IV. Programmer's Review

General Information

❒ You must follow the Connecticut specifications for record layouts.

❒ Once a file is sent, DRS will review your file for errors and accept all returns that have no errors. If a return contains errors, DRS will provide you a list of the failed records with an explanation. Simply correct the file and resubmit only the failed records.

Payment (Calendar) Year

❒ Remember to change the Payment Year in positions 2-5 of the Transmitter T Record, Payer A Record, and Payee B Record each year the program is run. Payment Year = the calendar year.

❒ The payment year must be in a **YYYY** format.

Proper Order of Records for Files With More Than One Payer

❒ If a file contains informational returns for more than one payer, there must be no Transmitter T Record(s) or End of Transmission F Record(s). See *Section V, Example 3*.

Money Amounts

❒ Do not include negative money amounts in money fields under any circumstances.

❒ Zero fill money fields not applicable to your company.

❒ Report money amounts in dollars and cents without a decimal or dollar sign.

❒ Money amounts must be in the exact field positions prescribed in the instructions, right justified, and zero filled.

❒ Do not sign money fields.

V. Examples of Proper Record Sequence for Filing Forms 1098, 1099s, and W-2G Informational Returns

Example 1	Example 2	Example 3
Payer Filing Own 1099 with 42 Returns	Transmitter Filing 1099 for One Payer with 42 Returns	Transmitter Filing 1099 for Three Payers with 42, 106, and 89 Returns Respectively

T... TRANSMITTER
A .. PAYER
B
  } . 42 PAYEE RECORDS
B
C .. END OF PAYER
F... END OF TRANSMISSION
	T... TRANSMITTER
	A .. PAYER
	B
	  } . 42 PAYEE RECORDS
	B
	C .. END OF PAYER
	F... END OF TRANSMISSION
		T... TRANSMITTER
		A .. PAYER 1
		B
		  } . 42 PAYEE RECORDS
		B
		C .. END OF PAYER 1
		A .. PAYER 2
		B
		  } . 106 PAYEE RECORDS
		B
		C .. END OF PAYER 2
		A .. PAYER 3
		B
		  } . 89 PAYEE RECORDS
		B
		C .. END OF PAYER 3
		F... END OF TRANSMISSION

VI. Record Specifications

Transmitter T Record - General Field Descriptions

- The Transmitter T Record identifies the entity transmitting the file.
- The Transmitter T Record is the first record on each file and is followed by a Payer A Record. A file will not transmit if the T Record is not present.
- The Transmitter T Record requires the total number of Payees (B Records) being reported. No money or payment amounts are reported in the Transmitter T Record.

- For all fields marked **Required**, the transmitter must provide the information described under Description and Remarks. For those fields **not** marked **Required**, the transmitter must allow for the field, but may be instructed to enter blanks or zeros in the indicated media position(s) and for the indicated length.
- The Transmitter T Record must be followed by the Payer A Record, which must be followed with Payee B Records; however, the initial record on each file must be a Transmitter T Record.
- All records must be a fixed length of **750 positions**.

Record Name: Transmitter T Record

–Fixed Length of 750 Positions–

Field Position	Field Title	Length	Description and Remarks
1	Record Type	1	**Required.** Enter **T**.
2-5	Payment Year	4	**Required.** Enter **2007**.
6	Prior Year Data Indicator	1	DRS does not accept prior year data. **Enter a blank.**
7-15	Transmitter's Identification TIN	9	**Required.** Enter the transmitter's nine-digit Tax Identification Number (TIN). May be an FEIN or Social Security Number (SSN). Do not enter blanks, hyphens, or alpha characters.
16-20	Transmitter Control Code	5	N/A. **Enter blanks.**
21-27	Blank	7	**Enter blanks.**
28	Test File Indicator	1	DRS does not accept test files. **Enter a blank.**
29	Foreign Entity Indicator	1	N/A. **Enter a blank.**

Field Position	Field Title	Length	Description and Remarks
30-69	Transmitter Name	40	**Required.** Enter the name of the transmitter in the manner in which it is used in normal business. Left justify information and fill unused positions with blanks.
70-109	Transmitter Name (Continuation)	40	Enter any additional information that may be part of the name. Left justify information and fill unused positions with blanks.

Note: All **Required** information in Field Positions 110 through 280 **must** contain the name and address information

Field Position	Field Title	Length	Description and Remarks
110-149	Company Name	40	**Required.** Enter the name of the company to be associated with the address where correspondence should be sent or media should be returned due to processing problems.
150-189	Company Name (Continuation)	40	Enter any additional information that may be part of the name of the company where correspondence should be sent.
190-229	Company Mailing	40	**Required.** Enter the mailing address where correspondence should be sent.
230-269	Company City	40	**Required.** Enter the city, town, or post office where correspondence should be sent.
270-271	Company State	2	**Required.** Enter the valid U.S. Postal Service state abbreviation for the state.
272-280	Company ZIP Code	9	**Required.** Enter the valid nine-digit ZIP Code assigned by the U.S. Postal Service. If only the first five digits are known, left justify information and fill unused positions with blanks.
281-295	Blank	15	**Enter blanks.**
296-303	Total Number of Payees	8	**Required.** Enter the total number of Payee B Records reported in the file. Right justify information and fill unused positions with zeros.
304-343	Contact Name	40	**Required.** Enter name of the person to be contacted if DRS encounters problems with the file.
344-358	Number & Extension	15	**Required.** Enter telephone number of the person to contact regarding magnetic files. Omit hyphens. If no extension is available, left justify information and fill unused positions with blanks. For example, phone number of 860-297-1234 with extension of 1099 is 86029712341099.
359-408	Contact Email Address	50	**Required if available.** Enter the email address of the person to contact regarding electronic or magnetic files. Left justify information. If no email address is available, enter blanks.

Field Position	Field Title	Length	Description and Remarks
409-410	Magnetic File Indicator	2	**Not required.**
411-416	Transmitter's Media	6	**Not required.**
417-499	Blank	83	**Enter blanks.**
500-507	Record Sequence Number	8	**Not required.**
508-517	Blank	10	**Enter blanks.**
518	Vendor Indicator	1	**Not required.**
519-558	Vendor Name	40	**Not required.**
559-598	Vendor Mailing Address	40	**Not required.**
599-638	Vendor City	40	**Not required.**
639-640	Vendor State	2	**Not required.**
641-649	Vendor ZIP Code	9	**Not required.**
650-689	Vendor Contact Name	40	**Not required.**
690-704	Vendor Contact Phone Number and Extension	15	**Not required.**
705-739	Blank	35	**Enter blanks.**
740	Vendor Foreign Entity Indicator	1	**Enter blanks.**
741-748	Blank	8	**Enter blanks.**
749-750	Blank	2	**Enter blanks.**

Payer A Record - General Field Descriptions

- The Payer A Record identifies the institution or person making payments. The Payer A Record also provides parameters for the succeeding Payee B Records. DRS computer programs rely on the absolute relationship between the parameters and the data fields in the A Record and the data fields in the B Records to which they apply.

- The number of A Records depends on the number of payers and the different types of returns being reported. The payment amounts for one payer and for one type of return should be consolidated under one A record if submitted on the same file.

- Do not submit separate A Records for each payment amount being reported. For example, if a payer is filing Form 1099-MISC to report Amount Codes 1, 2, and 3, all three amounts should be reported under one A Record, not three separate A Records. For Payee B Records that do not contain payment amounts for all three amount codes, enter zeros for those that have no payment to be reported.

- The second record on the file must be an A Record. A transmitter may include B Records for more than one payer. However, **each group** of B Records must be preceded by an A Record and followed by an End of Payer C Record. A file may contain different types of returns, but the types of returns **must not** be intermingled. A separate A Record is required for each payer and each type of return being reported.

- An A Record may be blocked with B Records; however, the initial record on the file must be a T Record followed by an A Record. DRS will accept an A Record after a C Record.

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

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

- All records must be a fixed length of **750 positions**.

Record Name: Payer A Record

–Fixed Length of 750 Positions–

Field Position	Field Title	Length	Description and Remarks
1	Record Type	1	**Required.** Enter **A**.
2-5	Payment Year	4	**Required.** Enter **2007**.
6-11	Blank	6	**Enter blanks.**
12-20	Payer's TIN	9	**Required.** Must be the valid nine-digit TIN number assigned to the payer. **Do not enter blanks, hyphens, or alpha characters.** All zeros, ones, twos, etc., will have the effect of an incorrect TIN.
21-24	Payer Name Control	4	Same as IRS. See IRS Publication 1220, Rev. Proc. 2007-51.
25	Last Filing Indicator	1	Payers should enter a **1** if this indicator is the last year they will file; otherwise, **enter a blank**. Payers should use this indicator if due to a merger, bankruptcy, etc., they will not be filing information returns under this payer name and TIN in the future, either electronically or on paper.

Field Position	Field Title	Length	Description and Remarks
26	Combined Federal/State Filer	1	If you are participating in the federal/state combined filing, enter a **1**. Otherwise enter a blank.
27	Type of Return	1	**Required.** Enter the appropriate code from the table below:

Type of Return	Code
1098	3
1099-MISC	A
1099-R	9
W-2G	W

Field Position	Field Title	Length	Description and Remarks
28-41	Amount Codes	14	**Required.** Enter the appropriate amount code for the type of return being reported. Generally, for each amount code entered in the field, a corresponding payment amount **must** appear in the Payee B Record.

Amount Codes
Form 1098
Mortgage Interest Statement

For Reporting Payments on Form 1098:

Amount Code	Amount Type
1	Mortgage interest received from payers/borrowers
2	Points paid on purchase of principal residence
3	Refund (or credit) of overpaid interest
4	Mortgage Insurance Premiums
5	Property taxes paid (See **Note 1**.)

Note 1: Code 5 is used to report real estate property taxes paid to a Connecticut municipality.

Amount Codes
Form 1099-MISC
Miscellaneous Income Amount

For Reporting Payments on Form 1099-MISC:

Code	Amount Type
1	Rent (See **Note 1** below.)
2	Royalties (See **Note 2** below.)
3	Prizes, awards, etc.
4	Federal income tax withheld (backup withholding or withholding on Indian gaming profits)
5	Fishing boat proceeds
6	Medical and health care payments
7	Nonemployee compensation
8	Substitute payments in lieu of dividends or interest
A	Crop Insurance Proceeds
B	Excess golden parachute payments
C	Gross proceeds paid to an attorney in connection with legal services
D	Section 409A Deferrals
E	Section 409A Income

Note 1: When using the Direct Sales Indicator in position 547 of Payee B Record, use Type of Return Code A for 1099-MISC in position 27, and Amount Code 1 in position 28 of the Payer A Record. All payment amount fields in the Payee B Record will contain zeros.

Field Position	Field Title	Length	Description and Remarks
	Amount Codes **Form 1099-R** Distributions from Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.		For Reporting Payments on Form 1099-R:

Amount Code	**Amount Type**
1	Gross distribution
2	Taxable amount (See **Note 1** below.)
3	Capital gain (included in Amount Code 2)
4	Federal income tax withheld
5	Employee contributions or insurance premiums
6	Net unrealized appreciation in employer's securities
8	Other
9	Total employee contributions
A	Traditional IRA/SEP/SIMPLE distribution or Roth Conversion (See **Note 2** below.)

Note 1: If the taxable amount cannot be determined, enter a **1** in position 547 of the B Record. Payment Amount 2 must contain zeroes.

Note 2: For Form 1099-R, report the Roth conversion or total amount distributed from an IRA, SEP, or SIMPLE in Payment Amount Field A (IRA/SEP/SIMPLE Distribution or Roth conversion) of the Payee "B" Record, and generally, the same amount in Payment Amount Field 1 (Gross Distribution). The IRA/SEP/SIMPLE indicator should be set to "1" in Field Position 548 of the Payee B Record. Refer to IRS 2007, Instructions for Forms 1099, 1098, 5498, and W-2G, for exceptions.

Field Position	Field Title	Length	Description and Remarks
	Amount Codes **Form W-2G** Certain Gambling Winnings		For Reporting Payments on Form W-2G:

Amount Code	**Amount Type**
1	Gross winnings
2	Federal income tax withheld
7	Winnings from identical wagers

Field Position	Field Title	Length	Description and Remarks
42-51	Blank	10	**Enter blanks.**
52	Foreign Entity Indicator	1	N/A. **Enter a blank.**
53-92	First Payer Name Line	40	**Required.** Enter the name of the payer whose TIN appears in positions 12-20 of the A Record. Any extraneous information must be deleted. Left justify information and fill unused positions with blanks. (Filers should not enter a transfer agent's name in this field. Any transfer agent's name should appear in the Second Payer Name Line Field.)

Field Position	Field Title	Length	Description and Remarks
93-132	Second Payer Name Line	40	If the Transfer Agent Indicator (position 133) contains a **1**, this field must contain the name of the transfer (or paying) agent. If the indicator contains a **0 (zero)**, this field may contain either a continuation of the First Payer Name Line or blanks. Left justify information and fill unused positions with blanks.
133	Transfer Payer Name Agent Indicator	1	**Required.** Identifies the entity in the Second Line Field.

			Code	Meaning
			1	The entity in the Second Payer Name Line Field is the transfer (or paying) agent.
			0 (zero)	The entity shown is **not** the transfer (or paying) agent (for example, the Second Payer Name Line Field contains either a continuation of the First Payer Name Line Fields or blanks).

Field Position	Field Title	Length	Description and Remarks
134-173	Payer Shipping Address	40	**Required.** If the Transfer Agent Indicator in position 133 is a **1**, enter the shipping address of the transfer (or paying) agent. Otherwise, enter the **actual** shipping address of the payer. The street address should include number, street, apartment, or suite number (or PO Box if mail is not delivered to street address). Left justify information and fill unused positions with blanks.
174-213	Payer City	40	**Required.** If the Transfer Agent Indicator in position 133 is a **1**, enter the city, town, or post office of the transfer agent. Otherwise, enter the city, town, or post office of the payer. Left justify information, and fill unused positions with blanks. Do not enter state and ZIP Code information in this field.
214-215	Payer State	2	**Required.** Enter the valid U.S. Postal Service state abbreviation for the states.
216-224	Payer ZIP Code	9	**Required.** Enter the valid nine-digit ZIP Code assigned by the U.S. Postal Service. If only the first five digits are known, left justify information and fill the unused positions with blanks.
225-239	Payer Phone Number & Extension	15	Enter the payer's phone number and extension. Omit hyphens. If no extension is available, left justify information and fill unused positions with blanks. For example, phone number of 860-297-1234 with extension of 1099 is 86029712341099.
240-499	Blank	260	**Enter blanks.**
500-507	Record Sequence Number	8	**Not required.**
508-748	Blank	241	**Enter blanks.**
749-750	Blank	2	**Enter blanks.**

Payee B Record - General Field Description

The Payee B Record contains the payment information from the informational returns. When filing informational returns, the format for the B Records remains constant and is a fixed length of 750 positions. The record layout for field positions 1 through 543 is the same for all types of returns. Field positions 544 through 750 vary for each type of return to accommodate special fields for individual forms. In the A Record, the amount codes that appear in the field positions 28 through 39 should be left justified and filled with blanks. In the B Record, the filer **must** allow for all 14 Payment Amount Fields. For those fields not used, enter **0s** (zeros). For example, a payer reporting Form 1099-MISC should enter **A** in field position 27 of the A Record, Type of Return. If reporting payments for Amount Codes 1, 2, 4, 7, and A, the payer would report field positions 28 through 39 of the A Record as **1247Abbbbbbb**. In this example, **b** denotes blanks. Do not enter the letter **b**.

Positions 55 through 66 for Payment Amount 1 represent rents.

Positions 67-78 for Payment Amount 2 represent royalties.

Positions 79-90 for Payment Amount 3, enter **0s** (zeros).

Positions 91-102 for Payment Amount 4 represent federal income tax withheld for Forms 1099-MISC and W-2G. For Form 1098, this field is used to report property taxes paid and should be formatted as the other payment amount fields.

Positions 103-126 for Payment Amount 5 and 6, enter **0s** (zeros).

Positions 127-138 for Payment Amount 7 represent nonemployee compensation.

Positions 139-162 for Payment Amount 8 and 9, enter **0s** (zeros).

Positions 163-174 for Payment Amount A represent crop insurance proceeds.

Positions 175-186 for Payment Amount B, enter **0s** (zeros).

Positions 187-198 for Payment Amount C represent gross proceeds paid to an attorney in connection with legal services.

Positions 199-210 for Payment Amount D, enter **0s** (zeros).

Positions 211-222 for Payment Amount E, enter **0s** (zeros).

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

- Do not use decimal points to indicate dollars and cents. Ten dollars ($10) must appear as 000000001000 in the payment amount field.

- All records must be a fixed length of **750 positions**.

Record Name: Payee B Record

–Fixed Length of 750 Positions–

Field Position	Field Title	Length	Description and Remarks
1	Record Type	1	**Required.** Enter **B**.
2-5	Payment Year	4	**Required.** Enter **2007**.
6	Corrected Return Indicator	1	N/A. **Enter a blank.** DRS does not accept partial corrections. If there is any error in the information returns, correct the error and replace the entire file.
7-10	Name Control	4	Same as IRS. See IRS Publication 1220, Rev. Proc. 2007-51.
11	Type of TIN	1	This field is used to identify the Taxpayer Identification Number (TIN) in positions 12-20 as either a Federal Employer Identification Number (FEIN), a Social Security Number (SSN), an Individual Taxpayer Identification Number (ITIN) or an Adoption Taxpayer Identification Number (ATIN). Enter the appropriate code from the following table:

Code	Type of TIN	Type of account
1	FEIN	A business, organization, sole proprietor, or other entity
2	SSN	An individual, including a sole proprietor
	or	
2	ITIN	An individual required to have a taxpayer identification number, but who is not eligible to obtain an SSN
	or	
2	ATIN	An adopted individual prior to the assignment of an SSN
Blank	N/A	If the type of TIN is not determinable, enter a blank.

Field Position	Field Title	Length	Description and Remarks
12-20	Payee's TIN	9	**Required**. Enter the nine-digit TIN of the payee (SSN, ITIN, ATIN, or FEIN). If an identification number is not available or has been applied for but not received, enter blanks. **Do not enter hyphens or alpha characters.** All zeros, ones, twos, etc., will have the effect of an incorrect TIN. If the TIN is not available, enter blanks.

Field Position	Field Title	Length	Description and Remarks
21-40	Payer's Account Number For Payee	20	Enter any number assigned by the payer to the payee (such as a checking or savings account number). Filers are encouraged to use this field. **This number helps to distinguish individual payee records and should be unique for each document. Do not use the payee's TIN since this will not make each record unique.** This information is very useful when corrections are filed. This number will be provided with the backup withholding notification and may be helpful in identifying the branch or subsidiary reporting the transaction. Do not define data in this field in packed decimal format. If fewer than twenty characters are used, filers may either left or right justify, filling the remaining positions with blanks.
41-44	Payer's Office Code	4	Enter office code of payer; otherwise, **enter blanks**. For payers with multiple locations, this field may be used to identify the location of the office submitting the informational return.
45-54	Blank	10	**Enter blanks.**
	Payment Amount Fields (Must be numeric)		**Required. Allow for all payment amounts. For those not used, enter zeros.** For example: If position 27, Type of Return, of the A Record, is **A** (for 1099-MISC) and positions 28-39, Amount Codes, are **1247Abbbbbbb**. This indicates the payer is reporting any or all five payment amounts in all of the following B Records. In this example, **b** denotes blanks in the designated positions. Do not enter the letter **b**. Payment Amount 1 represents rents; Payment Amount 2 represents royalties; Payment Amount 3 will be all **0s** (zeros); Payment Amount 4 represents federal income tax withheld on Forms 1099-MISC and W-2G. For Form 1098, this field is used to report property taxes paid and should be formatted as the other payment amount fields; Payment Amounts 5 and 6 should be all **0s** (zeros); Payment Amount 7 represents nonemployee compensation; Payment Amounts 8 and 9 should be all **0s** (zeros); Payment Amount A represents crop insurance proceeds; and Payment Amounts B should be all **0s** (zeros). Payment C Amount represents gross proceeds paid to an attorney in connection with legal services. Each payment field must contain 12 numeric characters. Each payment amount must contain U.S. dollars and cents. The right-most two positions represent cents in the payment amount fields. Do not enter dollar signs, commas, decimal points, or negative amounts. Payment amounts must be right justified and unused positions must be zero-filled. **Income tax withheld cannot be reported as a negative amount on any form.**
55-66	Payment Amount 1*	12	The amount reported in this field represents payments for Amount Code 1 in the A Record.
67-78	Payment Amount 2*	12	The amount reported in this field represents payments for Amount Code 2 in the A Record.
79-90	Payment Amount 3*	12	The amount reported in this field represents payments for Amount Code 3 in the A Record.

Field Position	Field Title	Length	Description and Remarks
91-102	Payment Amount 4*	12	The amount reported in this field represents payments for Amount Code 4 in the A Record.
103-114	Payment Amount 5*	12	The amount reported in this field represents payments for Amount Code 5 in the A Record.
115-126	Payment Amount 6*	12	The amount reported in this field represents payments for Amount Code 6 in the A Record.
127-138	Payment Amount 7*	12	The amount reported in this field represents payments for Amount Code 7 in the A Record.
139-150	Payment Amount 8*	12	The amount reported in this field represents payments for Amount Code 8 in the A Record.
151-162	Payment Amount 9*	12	The amount reported in this field represents payments for Amount Code 9 in the A Record.
163-174	Payment Amount A*	12	The amount reported in this field represents payments for Amount Code A in the A Record.
175-186	Payment Amount B*	12	The amount reported in this field represents payments for Amount Code B in the A Record.
187-198	Payment Amount C*	12	The amount reported in this field represents payments for Amount Code C in the A Record.
199-210	Payment Amount D*	12	The amount reported in this field represents payments for Amount Code D in the A Record.
211-222	Payment Amount E*	12	The amount reported in this field represents payments for Amount Code E in the A Record.

*   If there are discrepancies between the payment amount fields and the boxes on the paper forms, the instructions in this booklet govern.

Field Position	Field Title	Length	Description and Remarks
223-246	Reserved	24	**Enter blanks.**
247	Foreign Country Indicator	1	**If the address of the payee is a foreign country**, enter a **1** in this field; otherwise, **enter a blank**. When filers use this indicator, they may use a free format for the payee city, state, and ZIP Code. Address information must not appear in the First or Second Payee Name Line.
248-287	First Payee Name Line (See **Note**.)	40	**Required.** Enter the name of the payee, preferably surname first, whose TIN was provided in positions 12-20 of the B Record. Left justify and fill unused positions with blanks. If more space is required for the name, utilize the Second Payee Name Line field. If there are multiple payees, only the name of the payee whose TIN has been provided should be entered in this field. The names of the other payees may be entered in the Second Payee Name Line Field. If reporting information for a sole proprietor, the individual's name **must** always be present, preferably on the First Payee Name Line. The use of the business name is optional in the Second Payee Name Line field.

Note: End First Payee Name Line with a full word.   Do not split words.

Field Position	Field Title	Length	Description and Remarks
288-327	Second Payee Name Line	40	If there are multiple payees (for example, partners, joint owners, or spouses), use this field for those names not associated with the TIN provided in positions 12-20 of the B Record or if not enough space was provided in the First Payee Name Line, continue the name in this field. See **Note**. **Do not enter address information.** It is important that filers provide as much payee information to DRS as possible to identify the payee associated with the TIN. Left justify and fill unused positions with blanks. **Fill with blanks if no entries are present for this field.**

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

Field Position	Field Title	Length	Description and Remarks
328-367	Blank	40	**Enter blanks.**
368-407	Payee Mailing Address	40	**Required.** Enter mailing address of payee. Street address should include number, street, apartment, or suite number (or PO Box if mail is not delivered to street address). Left justify information and fill unused positions with blanks. This field **must not** contain any data other than the payee's mailing address.

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

For foreign addresses, filers may use the payee city, state, and ZIP Code as a continuous 51 position field. Enter information in the following order: city, province or state, postal code, and the name of the country. When reporting a foreign address, the Foreign Country Indicator located in position 247 must contain a **1**.

Field Position	Field Title	Length	Description and Remarks
408-447	Blank	40	**Enter blanks.**
448-487	Payee City	40	**Required.** Enter the city, town, or post office. Left justify information and fill the unused positions with blanks. Enter APO or FPO, if applicable. Do not enter state and ZIP Code information in this field.
488-489	Payee State	2	**Required.** Enter the valid U.S. Postal Service state abbreviation.
490-498	Payee ZIP Code	9	**Required.** Enter the valid nine-digit ZIP Code assigned by the U.S. Postal Service. If only the first five digits are known, left justify information and fill the unused positions with blanks. For foreign countries, alpha characters are acceptable as long as the filer has entered a **1** in the Foreign Country Indicator located in position 247 of the B Record.
499	Blank	1	**Enter a blank.**
500-507	Record Sequence Number	8	**Not required.**
508-543	Blank	36	**Enter blanks.**

The following sections define the field positions for the different types of returns in the Payee B Record (positions 544-750):

1. Form 1098 - Mortgage Interest Statement
2. Form 1099-MISC - Miscellaneous Income
3. Form 1099-R - Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance, Contracts, etc.
4. Form W-2G - Certain Gambling Winnings

1. Payee B Record – Record Layout Positions 544-750 for Form 1098

Field Position	Field Title	Length	Description and Remarks
544-662	Blank	119	**Enter blanks.**
663-722	Special Data Entries	60	Used to report the city and state location of the property. Use the U.S. Postal Service state abbreviation. Example: Hartford CT
723-748	Blank	26	**Enter blanks.**
749-750	Blank	2	**Enter blanks.**

2. Payee B Record – Record Layout Positions 544-750 for Form 1099-MISC

Field Position	Field Title	Length	Description and Remarks
544	Second TIN Notice (Optional)	1	Enter **2** to indicate notification by DRS twice within three calendar years that the payee provided an incorrect name or TIN combination; otherwise, **enter a blank**.
545-546	Blank	2	**Enter blanks.**
547	Direct Sales Indicator (See **Note**.)	1	Enter a **1** to indicate sales of $5,000 or more of consumer products to a person on a buy/sell, deposit/commission, or any other commission basis for resale anywhere other than in a permanent retail establishment. Otherwise, **enter a blank**.

Note: If reporting a direct sales indicator only, use Type of Return A in field position 27, and Amount Code 1 in field position 28 of the Payer A Record. All payment amount fields in the Payee B Record should contain zeros.

Field Position	Field Title	Length	Description and Remarks
548-662	Blank	115	**Enter blanks.**
663-722	Special Data Entries	60	**Required.** Enter payer Connecticut Tax Registration Number. Right justify and fill unused positions with blanks. Do not enter hyphens.
723-734	State Income	12	**Required.** Enter the state income tax withheld for 1099-MISC Tax Withheld only. The payment amount must be right justified and unused positions must be zero-filled.

Field Position	Field Title	Length	Description and Remarks
735-746	Local Income Tax Withheld	12	N/A. **Enter blanks.**
747-748	Combined Federal/State Code	2	If you are participating in the federal/state combined filing, the code for Connecticut is **08**. Otherwise enter blanks.
749-750	Blank	2	**Enter blanks.**

3. Payee B Record – Record Layout Positions 544-750 for Form 1099-R

Field Position	Field Title	Length	Description and Remarks
544	Blank	1	**Enter a blank.**
545-546	Document Specific/ Distribution Code (For a detailed explanation of the distribution codes see the 2007 IRS Instructions for Forms 1099-R and 5498.)	2	**Required.** Enter at least one distribution code from the table below. More than one code may apply. If only one code is necessary, it must be entered in position 545 and position 546 will be blank. When using Code P for an IRA distribution under I.R.C. §408(d)(4), the filer may also enter Code 1, 2, 4, or J if applicable. Only three numeric combinations are acceptable: Codes 8 and 1, 8 and 2, and 8 and 4, on one return. These three combinations can be used only if both codes apply to the distribution being reported. If more than one numeric code is applicable to different parts of a distribution, report two separate B Records. Distribution Codes 3, 5, 6, 9, E, F, N, Q, R, S, and T cannot be used with any other codes. Distribution Code G may be used with Distribution Code 4 only if applicable.

Code	Category
1*	Early distribution, no known exception (in most cases, under age 59½)
2*	Early distribution, exception applies (under age 59½)
3*	Disability
4*	Death
5*	Prohibited transaction
6	Section 1035 exchange (a tax-free exchange of life insurance, annuity, or endowment contracts)
7*	Normal distribution
8*	Excess contributions plus earning/excess deferrals (and/or earnings) taxable in 2007
9	Cost of current life insurance protection (premiums paid by a trustee or custodian for current insurance protection)
A	May be eligible for ten-year tax option
B	Designated Roth account distribution
D*	Excess contributions plus earnings/excess deferrals taxable in 2005
E	Excess annual additions under Section 415/certain excess amounts under section 403(b) plans.

Field Position	Field Title	Length	Description and Remarks
			F Charitable gift annuity
			G Direct rollover and rollover contribution
			J Early distribution from a Roth IRA. (This code may be used with Code 8 or P.)
			L Loans treated as deemed distribution under Section 72(p)
			N Recharacterized IRA contribution made for 2007
			P* Excess contributions plus earning/excess deferrals taxable in 2006
			Q Qualified distribution from a Roth IRA. (Distribution from a Roth IRA when the five-year holding period has been met, and the recipient has reached 59½, has died, or is disabled.)
			R Recharacterized IRA contribution made for 2006 (See **Note**.)
			S* Early distribution from a SIMPLE IRA in first two years, no known exception
			T Roth IRA distribution, exception applies because participant has reached 59 1/2, died, or is disabled, but it is unknown if the 5-year period has been met.

*   If reporting an IRA, SEP or SIMPLE distribution, or a Roth conversion, use the IRA/SEP/SIMPLE Indicator of **1** in position 548 of the Payee B Record.

Note: The trustee of the first IRA must report the recharacterization as a distribution on Form 1099-R (and the original contribution and its character on Form 5498).

Field Position	Field Title	Length	Description and Remarks
547	Taxable Amount Not Determined Indicator	1	Enter **1** only if the taxable amount of the payment entered for Payment Amount Field 1 (Gross distribution) of the B Record cannot be computed; otherwise, **enter a blank**. (If Taxable Amount Not Determined Indicator is used, enter **0s** (zeros) in Payment Amount Field 2 of Payee B Record.) Please make every effort to compute the taxable amount.
548	IRA/SEP/ SIMPLE (See **Note**.)	1	Enter **1** if reporting for a traditional IRA, SEP, or SIMPLE distribution or Roth conversion; otherwise, **enter a blank.** If the IRA/SEP/SIMPLE Indicator is used, enter the amount of the Roth conversion or distribution in Payment Amount Field A of the Payee B Record. **Do not use the indicator for a distribution from a Roth or an IRA characterization.**

Note: For Form 1099-R, report the Roth conversion or the total amount distributed from a traditional IRA, SEP, or SIMPLE in Payment Amount Field A (IRA/SEP/SIMPLE Distribution, or Roth conversion), as well as Payment Amount Field 1 (Gross Distribution) of the B Record. Refer to the IRS 2007, Instructions for Forms 1099-R and 5498, box 2a instructions, for exceptions.

Field Position	Field Title	Length	Description and Remarks
549	Total Distribution Indicator (See **Note**.)	1	Enter a **1** only if payment shown for Account Code 1 is a total distribution that closed out the account; otherwise, **enter a blank.**

Note: A *total distribution* is one or more distributions within one tax year in which the entire balance of the account is distributed. Any distribution that does not meet this definition is not a total distribution.

Field Position	Field Title	Length	Description and Remarks
550-551	Percentage of Total Distribution	2	Use this field when reporting a total distribution to more than one person, such as when a participant is deceased and a payer distributes to two or more beneficiaries. Therefore, if the percentage is 100, leave this field blank. If the percentage is a fraction, round off to the nearest whole number (for example, 10.4 percent will be 10 percent; 10.5 percent will be 11 percent). Enter the percentage received by the person whose TIN is included in position 12-20 of the B Record. This field must be right justified, and unused positions must be zero-filled. If not applicable, **enter blanks**. Filers need not enter this information for any IRA distribution or for direct rollovers.
552-555	Date of Designated Roth Contribution	4	Enter the date of the first year a designated Roth contribution was made. Enter in YYYY format.
556-662	Blank	107	**Enter blanks.**
663-722	Special Data Entries	60	**Required.** Enter payer Connecticut Tax Registration Number. Right justify and fill unused positions with blanks. Do not enter hyphens.
723-734	State Income Tax Withheld	12	**Required.** Enter the state income tax withheld. This field must be right justified, and unused positions must be zero-filled.
735-746	Local Income Tax Withheld	12	N/A. **Enter blanks.**
747-748	Combined Federal/State Code	2	If you are participating in the federal/state combined filing the code for Connecticut is **08**. Otherwise enter blanks.
749-750	Blank	2	**Enter blanks.**

4.   Payee B Record – Record Layout Positions 544-750 for Form W-2G

Field Position	Field Title	Length	Description and Remarks
544-546	Blank	3	**Enter blanks.**
547	Type of Wager Code	1	**Required.** Enter the applicable type of wager code from the table below: **Code** **Category** 1 Horse race track (or off-track betting of a horse track nature) 2 Dog race track (or off-track betting of a dog track nature) 3 Jai alai 4 State conducted lottery 5 Keno

Field Position	Field Title	Length	Description and Remarks
			6 Casino type bingo. **Do not** use this code for any other type of bingo winnings (for example, church or fire department.)
			7 Slot machines
			8 Any other type of gambling winnings including church bingo, fire department bingo, or unlabeled winnings
548-555	Date Won	8	**Required.** Enter the date of the winning transaction in the format YYYYMMDD (for example, 20071022). **Do not enter hyphens or slashes.** This is not the date the money was paid, if paid after the date of the race (or game).
556-570	Transaction	15	**Required.** For state conducted lotteries, enter the ticket or other identifying number. For keno, bingo, or slot machines, enter the ticket or card number, and color, if applicable, machine serial number, or any other information that will help identify the winning transaction. For all others, **enter blanks**.
571-575	Race	5	If applicable, enter the race (or game) relating to the winning ticket; otherwise, **enter blanks**.
576-580	Cashier	5	If applicable, enter the initials of the cashier making the winning payment; otherwise, **enter blanks**.
581-585	Window	5	If applicable, enter the window number or location of the person paying the winning payment; otherwise, **enter blanks**.
586-600	First ID	15	For other than state lotteries, enter the first identification number of the person receiving the winning payment; otherwise, **enter blanks**.
601-615	Second ID	15	For other than state lotteries, enter the second identification number of the person receiving the winnings; otherwise, **enter blanks**.
616-662	Blank	47	**Enter blanks.**
663-722	Special Data Entries	60	**Required.** Enter payer Connecticut Tax Registration Number. Right justify and fill unused positions with blanks. Do not enter hyphens.
723-734	State Income Tax Withheld	12	**Required.** Enter the state income tax withheld. This field must be right justified and unused positions must be zero-filled.
735-746	Local Income Tax Withheld	12	N/A. **Enter blanks.**
747-748	Blank	2	**Enter blanks.**
749-750	Blank	2	**Enter blanks.**

End of Payer C Record - General Field Descriptions

- The control total fields are each 18 positions in length.

- The C Record consists of the total number of the payees and the payment amount fields totals, filed by a given payer, a particular type of return, or both. The C Record must be written after the last B Record for each type of return for a given payer. For each A Record and a group of B Records on the file, there must be a corresponding C Record.

- In developing the C Record, for example, if a payer used Amount Codes 1, 3, and 6 in the A Record, the totals from the B Records would appear in Control Total 1 (positions 16-33), 3 (positions 52-69), and 6 (positions 106-123) of the C Record. In this example, positions 34-51, 70-105, and 124-231 would be zero-filled. Positions 232-748 would be blank-filled.

- All records must be a fixed length of **750 positions**.

Record Name: End of Payer C Record

–Fixed Length of 750 Positions–

Field Position	Field Title	Length	Description and Remarks
1	Record Type	1	**Required.** Enter **C**.
2-9	Number of Payees	8	**Required.** Enter the total number of B Records covered by the preceding A Record. Right justify information and fill unused positions with zeros.
10-15	Blank	6	**Enter blanks.**

Required. Accumulate totals of any payment amount fields in the B Record into the appropriate control total fields of the C Record. **Control totals must be right justified and unused control total fields zero-filled.** All control total fields are **18** positions in length.

16-33	Control Total 1	18	
34-51	Control Total 2	18	
52-69	Control Total 3	18	
70-87	Control Total 4	18	
88-105	Control Total 5	18	
106-123	Control Total 6	18	
124-141	Control Total 7	18	

Field Position	Field Title	Length	Description and Remarks
142-159	Control Total 8	18	
160-177	Control Total 9	18	
178-195	Control Total A	18	
196-213	Control Total B	18	
214-231	Control Total C	18	
232-249	Control Total D	18	
250-267	Control Total E	18	
268-499	Blank	232	**Enter blanks.**
500-507	Record Sequence Number	8	**Not required.**
508-748	Blank	241	**Enter blanks.**
749-750	Blank	2	**Enter blanks.**

End of Transmission F Record - General Field Descriptions

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

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

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

- All records must be a fixed length of **750 positions**.

Record Name: End of Transmission F Record
–Fixed Length of 750 Positions–

Field Position	Field Title	Length	Description and Remarks
1	Record Type	1	**Required.** Enter **F**.
2-9	Number of A Records	8	Enter the total number of Payer A Records in the entire file. Must be right justified and unused positions must be zero-filled or enter all zeros.
10-30	Zero	21	**Enter blanks.**
31-49	Blank	19	**Enter blanks.**
50-57	Total Number Payees	8	**Not required.**
58-499	Blank	442	**Enter blanks.**
500-507	Record Sequence Number	8	**Not required.**
508-748	Blank	241	**Enter blanks.**
749-750	Blank	2	**Enter blanks.**

Acknowledgement Results Layout Record

When using the bulk filing method and utilizing the standard EFW2 file upload, DRS provides you with an "acknowledgement" file as detailed below. Each individual 1099 record that fails did not get accepted.
In order for the Form CT-1096 to be accepted by DRS, all values must equal the accepted number of 1099's submitted.

Item Nbr	Field Name	Starting Position	End Position	Byte Count	Paper Format / Special Instructions
Submitter Record. This record will appear once per submitter					
1	Record Identifier	1	1	1	Value ='T'-This is the Submitter Record
2	Submitter ID	2	14	13	ID entered on the TSC Welcome
3	Blank	15	750	736	Blanks
Payer A Record. This record will appear for each Payer in the file. May be many Payers per submitter					
1	Record Identifier	1	1	1	Value = 'A' - this is the Payer Record
	Tax Year	2	5	4	Pass Tax Year YYYY
2	Payer CT Reg Number	6	10	5	CT Reg Number of payer
3	Payer's Federal Identification Number (FEIN)	11	16	6	Payers FEIN
4	Type of Return	17	23	7	Pass '9' for 1099-R, 'A' for 1099-MISC, 'W' for W2-G
5	Blank	24	750	727	Blanks
Payee B Record. This record will appear for each failed Payee B. May be many failed Payee Bs for a single Payer A					
1	Record Identifier	1	1	1	Value = 'B' - this is the Payee Record
2	Line Number	2	8	7	Payee record line number within Payer File
3	Tax Year	9	16	8	Tax Year YYYY
4	Payee's Taxpayer Identification Number (TIN/SSN)	17	25	9	Payee Tax Identification Number
5	Payee Reason for Failure	26	750	725	Reason for failure for payee
End of Payer / Totals Record. This record will appear for each Payer					
1	Record Identifier	1	1	1	Value = 'C' - This is the end of Payer Record
2	Total Nonpayroll Amounts received	2	19	18	Total of all nonpayroll amounts reported. (From all accepted 1099s)
3	Total CT Tax Withheld	20	37	18	Total of all CT tax withheld reported. (From all accepted 1099s)
4	Number of Successful Payees	38	44	7	The number of successful 1099's filed by this payer
5	Number of Failed Payees	45	51	7	The number of failed 1099's filed by this payee
6	Employer Reason for Failure	52	750	699	Reason for failure for payer
Total Submitter Record. This record will appear once per submitter					
1	Record Identifier	1	1	1	Value = 'F' This is the Total Submitter Record
2	Number of A records	2	19	18	Pass total number of payers in this file
3	Total number of Payees	20	38	19	Pass total number of payees in file
4	Submitter reason for file failure	39	750	712	Reason for failure for payer

Appendix A: Instructions for Preparing an External CD Label

Prepare a label similar to the one shown below to identify each CD being submitted to DRS. Include the following information:

1. **Type of Filing** – Indicate if the file is original or replacement.

2. **Calendar Year** – Enter the calendar year for which the file is prepared. Only one year may be reported per file.

3. **Transmitter Name** – Enter the name of the organization transmitting this file. The entry should be the same organization recorded on the Transmitter record (T Record) of this file.

4. **FEIN** – Enter the nine-digit Federal Employer Identification Number (FEIN) of the organization transmitting the file. The FEIN on the label should be the same as the FEIN recorded on the Transmitter record (T Record) of the file.

5. **No. of Payers** – Enter the number of payers (A Records) on the file.

6. **No. of Payees** – Enter the number of payees (B Records) on the file.

7. **Record Length** – The only acceptable record length is 750.

8. **Volume** - For multiple volume file, enter the sequence of each and the total number of diskettes for the file. (For example, Volume 1 of a two volume file would indicate **Vol. 1 of 2**; Volume 2 would indicate **Vol. 2 of 2**.)

9. **Contact Information** – Enter the name and phone number of the person to contact about this filing.

Example:

1098, 1099's, and W-2G CD Label		
1. Type of filing ☐ Original ☐ Replacement		**2. Calendar Year**
3. Transmitter Name		
4. FEIN	**5. No. of Payers**	**6. No. of Payees**
7. Return type ☐ 1098 ☐ 1099-MISC ☐ 1099-R ☐ W-2G		**8. Volume** Vol. ____ of _____
9. Contact Name Contact Phone		

Appendix B: Forms for Filing Informational Returns on CD

Transmittal Forms

DRS encourages the use of computer-generated substitutes for **Form CT-4804**, *Transmittal of Informational Returns Reported on CD*. Include all information required on these transmitter forms including the declaration, the transmitter, and the payer information.

Form CT-4804

Use Form CT-4804 to identify the transmitter of a CD file and to identify the payer(s) included on the CD files. The information on Form CT-4804 must agree with information on your CD. This form must accompany every CD file sent to DRS. The transmitter of the file must sign the declaration.

Form CT-1096

Use **Form CT-1096**, to report Connecticut income tax withheld from non-payroll amounts. Do not file Form CT-1096 if Connecticut tax is not withheld.

Packaging CDs for Mailing

Send the CD with an external label on each volume (multiple volumes allowed), Form CT-4804, and **Form CT-4802**, *Transmittal of Informational Returns Reported on CD (Continuation)*, if applicable, in a single box with proper packing to prevent damage. It is not necessary to use an oversized box. Mailers for CDs are available commercially. DRS is unable to return special containers.

Appendix C: Checklist for Mailing Forms 1098, 1099, and W-2G Informational Returns on CD

❑ Label the CD. Make sure the external label shows 1098, 1099, or W-2G, the calendar year, the transmitter name and FEIN, and contact name and phone number.

❑ Make a backup of the CD for your files in case the package sent to DRS is lost or damaged.

❑ Complete Form CT-4804 for each CD file, or use a computer generated form with the same information. Be sure to sign and date the declaration. Keep copies of Form CT-4804 for your records.

❑ Use packaging that will protect the media.

❑ Place the following items inside each package:
- The labeled CD.
- A completed Form CT-4804 and Form CT-4802 (if applicable) or a computer generated facsimile.
- A completed Form CT-1096 if Connecticut tax is withheld from non-payroll amounts.

❑ Do not enclose paper Forms 1098, 1099-MISC, 1099-R, or W-2G, or other notes.

Send CDs to the address below:

Department of Revenue Services
PO Box 5081
Hartford CT 06102-5081

If a PO Box cannot be used, send to:

Department of Revenue Services
Attn: Processing II, 15th Floor
25 Sigourney Street
Hartford CT 06106-5032

Appendix D: Glossary

ASCII (American Standard Code for Information Interchange) – One of the acceptable character sets used for electronic processing of data.

Block – A number of logical records grouped and written together as a single unit on a magnetic cartridge.

Byte – A computer unit of measurement; one byte contains eight bits and can store one character.

Calendar Year – Generally, the year in which payments were made by a payer to a payee.

Character – A letter, number, or punctuation symbol.

Character Set – A group of unique electronic definitions for all letters, numbers, and punctuation symbols.

Compress – Reformat computer data in a storage or size-saving technique.

DRS – State of Connecticut Department of Revenue Services.

FEIN (Federal Employer Identification Number) – A nine-digit number assigned by the IRS to an organization for federal tax reporting purposes.

File – A file consists of one Transmitter T Record at the beginning of the file followed by Payer A Record, Payee B Records, and an End of Payer C Record after each set of B Records. The last record on the file should be the End of Transmission F Record. Nothing should be reported after the End of the Transmission F Record.

Filer – Person (may be payer or transmitter) submitting information to DRS.

Filing Year – The calendar year during which the informational returns are submitted to DRS.

Payee – Person or organization receiving payments from the payer or for whom an informational return must be filed. The payee includes a gambling winner (Form W-2G) or a seller or other transferor.

Payer – Includes the person or institution making payments or a person reporting a real estate transaction. The payer will be held responsible for the completeness, accuracy, and timely submission of files submitted to DRS.

Transmitter – Any person or organization submitting an electronic or CD file to DRS.

TSC (Taxpayer Service Center) – Interactive tool accessed through the DRS website at **www.ct.gov/DRS** for a free, fast, easy, and secure way to conduct business with DRS.

Notes

Effect on Other Documents: This Informational Publication supersedes **IP 2006(34)**, *Annual Informational Returns on Magnetic Media.*

Effect of This Document: An Informational Publication issued by the Department of Revenue Services (DRS) addresses frequently asked questions about a current position, policy, or practice, usually in a less technical question and answer format.

Connecticut Taxpayer Service Center

www.ct.gov/DRS
TSC
Taxpayer Service Center

The Department of Revenue Services has a new electronic services center available to Connecticut taxpayers. The **Taxpayer Service Center** (*TSC*) is an interactive system that allows taxpayers to file, pay, and review their Connecticut tax account information online.

All DRS electronic filing systems (*WebFile*, *Fast-File*, and *Telefile*) are now accessed through the *TSC*.

Connecticut tax filers can file most returns, **extensions**, **and estimates**, at no charge, by Internet using the *TSC*. For more information about the *TSC*, visit the DRS website at **www.ct.gov/DRS** or see the *TSC* on Page 2 of this book.

	Tax Information	Forms and Publications
Telephone	For telephone assistance, call our Taxpayer Services Division at **1-800-382-9463** (Connecticut calls outside the Greater Hartford calling area only); **or 860-297-5962** (from anywhere).	**1-800-382-9463** (Connecticut calls outside the Greater Hartford calling area only) and select **Option 2**; **or 860-297-4753** (from anywhere).
Write	Department of Revenue Services Taxpayer Services Division 25 Sigourney Street Hartford CT 06106-5032	Department of Revenue Services Forms Unit 25 Sigourney Street Hartford CT 06106-5032

Walk-In Offices	Location	Address	Phone*
Free personal taxpayer assistance and forms are available by visiting our offices, Monday through Friday, 8:00 a.m. to 5:00 p.m. If you require special accommodations, please advise the DRS representative.	**Bridgeport**	10 Middle Street	203-336-7890
	Hartford	25 Sigourney Street	860-297-5962
	Norwich	2 Cliff Street	860-425-4125
	Hamden	3074 Whitney Avenue, Building #2	203-287-8243
	Waterbury	55 West Main Street, Suite 100	203-805-6789

* All calls are answered at our Customer Service Center, not at the local office.

Federal Tax Information

For questions about **federal taxes**, visit **www.irs.gov** or contact the Internal Revenue Service (IRS) at 1-800-829-1040.

To order **federal tax forms**, call 1-800-829-3676.

Statewide Services

Visit the ConneCT Web site at **www.ct.gov** for information on statewide services and programs.

Department of Revenue Services
State of Connecticut
25 Sigourney Street
Hartford CT 06106-5032