Government of Puerto Rico Department of the Treasury

Publication 19-06

Reference Guide for Informative Declaration Errors Year 2019

Analysis and Programming Division Rev. January 24, 2020



Introduction

This guide contains a reference table with the description of possible errors that may occur during the filing process of Informative Declarations (Forms 480), according to the Publication 19-03, *Developer Guide Informative Returns Electronic Filing Requirements For Tax Year 2019.*

The purpose of this document is to:

- Give developers the necessary files to configure these error conditions in their system and determine if the file contains an error before submitting it;
- Streamline and facilitate the filing process;
- Create a reference table that contains the following information: i) error code; ii) error description; iii) record type; and iv) the position of the field in error within the record.



Filing Types

The text files that include the Informative Declarations can be filed through the Unified Internal Revenue System ("SURI") or through the Secure File Transfer Protocol ("SFTP"). Both methods receive the responses to the file errors and, if there is any error, it is rejected.

A. Text files for Informative Declarations filed through <u>SURI</u>

If the system identifies validation errors in the **text file**, it will display the following information:



The system will show the error code, error message, line number in the file, and the position of the field in the record where the error was identified.

B. Text files for Informative Declarations filed through SFTP

If you use the SFTP services and the text file contains validation errors, you will receive an email indicating we found errors. To view the errors, you must search for the report that will be in the server with the following information:

r Deta: Num-L:		Error-From	to	Field-Field	and Des	cription of the Error
1.	477	132	13	3 STAREQ	Address	state is required
2.	477	134	13	8 ZIPREQ	Address	zip is required.
3.	479	139	14	0 STAREQ	Address	state is required
4.	479	141	14	5 ZIPREQ	Address	zip is required.
5.	681	. 132	13	3 STAREQ	Address	state is required

The report will display the line number in the file, the position of the field in the record where the error was identified, the code, and the error message.



Error Reference Table (Informative Declarations)

This table describes the possible error codes that may occur during the file validation. For each error code there is a description, a record type, and the position of the error.

Note: This error reference table may be subject to change. We encourage you to access our website, www.hacienda.pr.gov to verify if there is a new version.

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
				_
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2	10
480.30	30FORM	Form type must be 9 for form 480.30 in 480.6C submission.	13	13
480.30	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.30	DOCTY5	The Reconciliation file type must be amended to add amended submissions.	15	15
480.30	DOCTY9	The Reconciliation file type must be original for the original submission.	15	15
480.30	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.30	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	27	27
480.30	INVIDT	The Identification Number type is incorrect.	27	27
480.30	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	48	56
480.30	NAMREQ	Name is required.	57	86
480.30	STRLEN	Address street must be at least 4 characters long	97	131
480.30	STRREQ	Address street is required	97	131
480.30	STRLEN	Address street must be at least 4 characters long	132	166
480.30	CITLEN	Address city must be at least 2 characters long	167	179
480.30	CITREQ	Address city is required	167	179
480.30	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	167	179
480.30	STAREQ	Address state is required	180	181
480.30	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	182	186
480.30	ZIPREQ	Address zip is required.	182	186



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	187	190
480.30	STRLEN	Address street must be at least 4 characters long	193	227
480.30	STRREQ	Address street is required	193	227
480.30	STRLEN	Address street must be at least 4 characters long	228	262
480.30	CITLEN	Address city must be at least 2 characters long	263	275
480.30	CITREQ	Address city is required	263	275
480.30	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	263	275
480.30	STAREQ	Address state is required	276	277
480.30	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	278	282
480.30	ZIPREQ	Address zip is required.	278	282
480.30	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	283	286
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	338	349
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	338	349
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	350	361
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	350	361



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	362	373
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	362	373
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	374	385
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	374	385
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	386	397
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	386	397
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	398	409
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	398	409
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	410	421
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	410	421
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	422	433
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	422	433
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	434	445
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or	434	445



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION
			FROIVI	ТО
		minus the difference from amended or		
		deleted records.		
480.30	EMPFLD	Field should be empty (blank or filled with	446	457
		zeros)		
480.30	INVNUM	Field must be numeric with no signs, decimals,	446	457
		or commas		
480.30	EMPFLD	Field should be empty (blank or filled with	458	469
		zeros)		
480.30	INVNUM	Field must be numeric with no signs, decimals,	458	469
		or commas		
480.30	EMPFLD	Field should be empty (blank or filled with	470	481
		zeros)		
480.30	INVNUM	Field must be numeric with no signs, decimals,	470	481
400.00	EA 4051 0	or commas	400	400
480.30	EMPFLD	Field should be empty (blank or filled with	482	493
400.20	1818/81118/4	zeros)	402	402
480.30	INVNUM	Field must be numeric with no signs, decimals,	482	493
480.30	EMPFLD	or commas Field should be empty (blank or filled with	494	505
460.50	EIVIPPLD	zeros)	494	303
480.30	INVNUM	Field must be numeric with no signs, decimals,	494	505
480.30	INVINCIVI	or commas	494	303
480.30	INVNUM	Field must be numeric with no signs, decimals,	506	517
400.50		or commas	300	317
480.30	PAID4	The total amount paid in the reconciliation is	506	517
		incorrect. If this is the original submission the		527
		value must be equal to the sum of the amount		
		paid from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount paid from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
		deleted records.		
480.30	INVNUM	Field must be numeric with no signs, decimals,	518	529
		or commas		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	518	529
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	530	541
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	530	541
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	542	553
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	542	553
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	554	565
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	554	565
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	566	577
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	566	577
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	578	589
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	578	589
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	590	601
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	590	601



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	602	613
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	602	613
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	614	625
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	614	625
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	626	637
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	626	637
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	638	649
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	638	649
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	650	661
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	650	661
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	662	673
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	662	673
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	674	685
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or	674	685



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
		minus the difference from amended or deleted records.		
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	686	697
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	686	697
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	722	733
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	722	733
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	758	769
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	758	769
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	770	781



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	770	781
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	782	793
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	782	793
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	794	805
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	794	805
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	806	817
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	806	817
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	818	829
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	818	829
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	830	841
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	830	841
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	842	853
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	842	853



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	INVNUM	Field must be numeric with no signs, decimals,	854	865
		or commas		
480.30	WITH7	The total amount paid in the reconciliation is	854	865
		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		withheld from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount withheld from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
400.20	EN ADEL D	deleted records.	066	077
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	866	877
480.30	INVNUM	Field must be numeric with no signs, decimals,	866	877
400.50	INVINOIVI	or commas	300	077
480.30	EMPFLD	Field should be empty (blank or filled with	878	889
		zeros)		
480.30	INVNUM	Field must be numeric with no signs, decimals,	878	889
		or commas		
480.30	EMPFLD	Field should be empty (blank or filled with	890	901
		zeros)		
480.30	INVNUM	Field must be numeric with no signs, decimals,	890	901
		or commas		
480.30	EMPFLD	Field should be empty (blank or filled with	902	913
		zeros)		
480.30	INVNUM	Field must be numeric with no signs, decimals,	902	913
100.00	E1 4051 0	or commas	24.4	225
480.30	EMPFLD	Field should be empty (blank or filled with	914	925
400.20	1815/81118/4	zeros)	014	025
480.30	INVNUM	Field must be numeric with no signs, decimals,	914	925
480.30	INVNUM	or commas Field must be numeric with no signs, decimals,	926	937
460.30	IINVINOIVI	or commas	920	937
480.30	PAID4	The total amount paid in the reconciliation is	926	937
480.30	I AID4	incorrect. If this is the original submission the	320	557
		value must be equal to the sum of the amount		
		paid from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount paid from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
		minus the difference from amended or deleted records.		
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	938	949
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	938	949
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	950	961
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	950	961
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	962	973
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	962	973
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	974	985
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	974	985
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	986	997
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	986	997
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	998	1009
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	998	1009
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1010	1021



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1010	1021
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1022	1033
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1022	1033
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1058	1069
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1058	1069
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1094	1105
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1094	1105
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1106	1117



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1106	1117
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1118	1129
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1118	1129
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1130	1141
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1130	1141
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1142	1153
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1142	1153
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1154	1165
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1154	1165
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1166	1177
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1166	1177
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1178	1189
480.30	PAID1	The total paid amount for Part 1 must equal the sum of amounts paid for each payment type.	1178	1189
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1190	1201
480.30	WITH4	The total withheld amount for Part 1 must equal the sum of amounts withheld for each payment type.	1190	1201
480.30	DEPOS1	The total deposit amount for Part 1 must equal the sum of amounts deposited for each payment type.	1202	1213



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1202	1213
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1202	1213
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1214	1225
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1226	1237
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1226	1237
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1238	1249
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1238	1249
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1250	1261
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1250	1261
480.30	INVNUM	Field must be numeric with no signs, decimals,	1262	1273
480.30	INVNUM	or commas Field must be numeric with no signs, decimals,	1274	1285
480.30	WITH2	Amount withheld cannot be greater than the	1274	1285
480.30	EMPFLD	amount paid. Field should be empty (blank or filled with	1286	1297
480.30	INVNUM	zeros) Field must be numeric with no signs, decimals,	1286	1297
480.30	EMPFLD	Field should be empty (blank or filled with	1298	1309
480.30	INVNUM	zeros) Field must be numeric with no signs, decimals, or commas	1298	1309
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1310	1321
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1322	1333
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1322	1333
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1334	1345
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1334	1345
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1346	1357



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1346	1357
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1358	1369
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1370	1381
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1370	1381
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1382	1393
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1382	1393
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1394	1405
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1394	1405
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1406	1417
480.30	INVNUM	Field must be numeric with no signs, decimals,	1418	1429
480.30	WITH2	Amount withheld cannot be greater than the	1418	1429
480.30	EMPFLD	amount paid. Field should be empty (blank or filled with	1430	1441
480.30	INVNUM	zeros) Field must be numeric with no signs, decimals, or commas	1430	1441
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1442	1453
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1442	1453
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1454	1465
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1466	1477
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1466	1477
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1478	1489
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1478	1489
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1490	1501
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1490	1501



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1502	1513
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1514	1525
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1514	1525
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1526	1537
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1526	1537
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1538	1549
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1538	1549
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1550	1561
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1562	1573
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1562	1573
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1574	1585
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1574	1585
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1586	1597
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1586	1597
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1598	1609
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1610	1621
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1610	1621
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1622	1633
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1622	1633
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1634	1645
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1634	1645
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1646	1657



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1658	1669
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1658	1669
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1670	1681
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1670	1681
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1682	1693
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1682	1693
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1694	1705
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1706	1717
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1706	1717
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1718	1729
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1718	1729
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1730	1741
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1730	1741
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1742	1753
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1754	1765
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1754	1765
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1766	1777
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1766	1777
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1778	1789
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1778	1789
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1790	1801
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1790	1801



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	PAID2	The total paid amount for Part 2 must equal the sum of amounts paid for each month	1790	1801
480.30	PAID3	The total paid amount in Part 2 must match the total paid amount from Part 1.	1790	1801
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1802	1813
480.30	WITH5	The total withheld amount for Part 2 must equal the sum of amounts withheld for each month.	1802	1813
480.30	WITH6	The total withheld amount in Part 2 must match the total withheld amount from Part 1.	1802	1813
480.30	DEPOS2	The total deposit amount for Part 2 must equal the sum of amounts deposited for each month	1814	1825
480.30	DEPOS3	The total deposited amount in Part 2 must match the total deposited amount from Part 1.	1814	1825
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1814	1825
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1814	1825
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1838	1849
480.30	TOTTAX	Total tax is incorrect. Verify this value is equal to the total tax withheld minus the total credit for deemed dividends.	1838	1849
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1850	1861
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1850	1861
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1862	1873
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1862	1873



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1874	1885
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or	1874	1885
480.30	EMPFLD	deleted records. Field should be empty (blank or filled with zeros)	1886	1897
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1886	1897
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1898	1909
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1898	1909
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1910	1921
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1910	1921
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1922	1933
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1922	1933
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1934	1945
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1934	1945
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1946	1957
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1946	1957
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1958	1969



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1958	1969
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1970	1981
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1970	1981
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1982	1993
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1982	1993
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	1994	2005
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	1994	2005
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2006	2017
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2006	2017
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2018	2029
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2018	2029
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2030	2041
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2030	2041



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2042	2053
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2042	2053
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2198	2209
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2198	2209
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2210	2221
480.30	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2210	2221
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2234	2245
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2234	2245
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2246	2257
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2246	2257
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2258	2269
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2258	2269
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2270	2281



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2270	2281
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2282	2293
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2282	2293
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2282	2293
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2294	2303
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2294	2303
480.30	TOTFRM	The total form count does not match the number of informatives submitted for this account and filing period.	2294	2303
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas	2304	2315
480.30	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2304	2315
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2446	2454
480.30	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.30	AMDARQ	Amended date is required for amended records.	2495	2500
480.30	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	TO
480.30	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.30	INVDAT	Date field is invalid.	2495	2500
480.5	6AFORM	Form type must be 2 for 480.6A submission.	13	13
480.5	6AFORM	Form type must be 2 for 480.6A submission.	13	13
480.5	6BFORM	Form type must be 3 for 480.6B submission.	13	13
480.5	6BFORM	Form type must be 3 for 480.6B submission.	13	13
480.5	6CFORM	Form type must be 5 for 480.6C submission.	13	13
480.5	6DFORM	Form type must be X for 480.6D submission.	13	13
480.5	7AFORM	Form type must be 6 for 480.7A submission.	13	13
480.5	7BFORM	Form type must be 7 for 480.7B submission.	13	13
480.5	7CFORM	Form type must be Y for 480.7C submission.	13	13
480.5	7DFORM	Form type must be Z for 480.7D submission.	13	13
480.5	7DFORM	Form type must be Z for 480.7D submission.	13	13
480.5	7FORM	Form type must be 4 for 480.7 submission.	13	13
480.5	7FORM	Form type must be 4 for 480.7 submission.	13	13
480.5	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.5	DOCTY4	The summary (480.5) document type must be amended for adding or amended file types.	15	15
480.5	DOCTY7	The summary (480.5) document type must be original for original filing.	15	15
480.5	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.5	ID12	Incorrect Payer ID type. If the beneficiary ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	23	23
480.5	INVIDT	The Identification Number type is incorrect.	23	23
480.5	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	24	32
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168
480.5	DOCCNT	The document count in the summary is incorrect. If this is the original submission than the document count must be equal to the total number of informatives included in the submission. If you are adding or amending informatives the document count must equal the original document count plus the number of informatives being added, and minus the number of informatives being deleted.	159	168



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.5	DOCCNT	The document count in the summary is	159	168
		incorrect. If this is the original submission than		
		the document count must be equal to the		
		total number of informatives included in the		
		submission. If you are adding or amending		
		informatives the document count must equal		
		the original document count plus the number		
		of informatives being added, and minus the		
		number of informatives being deleted.		
480.5	INVNUM	Field must be numeric with no signs, decimals,	159	168
		or commas		
480.5	INVNUM	Field must be numeric with no signs, decimals,	169	183
		or commas		
480.5	WITH18	The total tax withheld in the summary (480.5)	169	183
		must be 0.		
480.5	WITH8	The total amount withheld in the summary	169	183
		must match the sum of the amounts withheld		
		from each informative		
480.5	WITH8	The total amount withheld in the summary	169	183
		must match the sum of the amounts withheld		
		from each informative		
480.5	WITH8	The total amount withheld in the summary	169	183
		must match the sum of the amounts withheld		
		from each informative		
480.5	WITH8	The total amount withheld in the summary	169	183
		must match the sum of the amounts withheld		
		from each informative		
480.5	WITH8	The total amount withheld in the summary	169	183
		must match the sum of the amounts withheld		
		from each informative	1.00	100
480.5	WITH8	The total amount withheld in the summary	169	183
		must match the sum of the amounts withheld		
400.5	NA/ITI IO	from each informative	1.00	402
480.5	WITH8	The total amount withheld in the summary must match the sum of the amounts withheld	169	183
400 F	VACITUO	from each informative	160	102
480.5	WITH8	The total amount withheld in the summary must match the sum of the amounts withheld	169	183
		from each informative		
480.5	WITH8	The total amount withheld in the summary	169	183
400.3	VVII ПО	must match the sum of the amounts withheld	109	103
		from each informative		
480.5	INVNUM	Field must be numeric with no signs, decimals,	184	198
+00.3	IINVINUIVI	or commas	104	138
		UI CUITITIAS		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
400.5	DAIDE	from each informative	404	400
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid from each informative		
480.5	PAID5		184	198
480.5	PAIDS	The total amount paid in the summary (480.5) must match the sum of the amounts paid	104	198
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
480.5	I AIDS	must match the sum of the amounts paid	104	138
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
.00.0		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		
480.5	PAID5	The total amount paid in the summary (480.5)	184	198
		must match the sum of the amounts paid		
		from each informative		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.5	PAID5	The total amount paid in the summary (480.5) must match the sum of the amounts paid from each informative	184	198
480.5	PAID6	The total amount paid in the summary (480.5) must be 0.	184	198
480.5	INVTXP	Taxpayer type is invalid. The only values accepted in this field are "I", "P", "C", "T", and "O"	199	199
480.5	TXPTY1	Taxpayer type is incorrect. If ID in the employer (PA) record is an SSN or ITIN, the value for taxpayer type must be "I" (individual). If the ID is an FEIN then the value must be "P" (partnership), "C" (corporation), "T" (trust), or "O" (others).	199	199
480.5	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.5	AMDARQ	Amended date is required for amended records.	2495	2500
480.5	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.5	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.5	INVDAT	Date field is invalid.	2495	2500
480.6A	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6A	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6A	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.6A	CONTN3	The control number must be numeric.	2	10
480.6A	CONTN4	The control number must be 9 digits in length.	2	10
480.6A	CONTN6	You can not sure the interval (900000000-99999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	11	11
480.6A	INVIDT	The Identification Number type is incorrect.	11	11
480.6A	6AFORM	Form type must be 2 for 480.6A submission.	13	13



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6A	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.6A	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6A	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.6A	DUPREC	The payee has a duplicate registration.	15	15
480.6A	DUPREC	The payee has a duplicate registration.	15	15
480.6A	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.6A	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6A	ID12	Incorrect Payer ID type. If the beneficiary ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	31	31
480.6A	INVIDT	The Identification Number type is incorrect.	31	31
480.6A	PAYID	The Payer Identification Number must match the Identification Number in the 'PA' record.	32	40
480.6A	NAMREQ	Name is required.	41	70
480.6A	STRLEN	Address street must be at least 4 characters long	71	105
480.6A	STRREQ	Address street is required	71	105
480.6A	STRLEN	Address street must be at least 4 characters long	106	140
480.6A	CITLEN	Address city must be at least 2 characters long	141	153
480.6A	CITREQ	Address city is required	141	153
480.6A	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.6A	STAREQ	Address state is required	154	155
480.6A	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.6A	ZIPREQ	Address zip is required.	156	160
480.6A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6A	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification	167	175
490.64	EIN2	Number.	167	175
480.6A		Invalid EIN	167	175
480.6A	EIN2	Invalid EIN	167	175
480.6A	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.6A	SSN2	Invalid SSN	167	175
480.6A	ACCLEN	Account number value must be at least 4 characters long.	176	195
480.6A	ACCNUM	Account number is required.	176	195
480.6A	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6A	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6A	NAMREQ	Name is required.	196	225
480.6A	NAMREQ	Name is required.	196	225
480.6A	NAMREQ	Name is required.	196	225
480.6A	STRLEN	Address street must be at least 4 characters long	226	260
480.6A	STRREQ	Address street is required	226	260
480.6A	STRLEN	Address street must be at least 4 characters long	261	295
480.6A	CITLEN	Address city must be at least 2 characters long	296	308
480.6A	CITREQ	Address city is required	296	308
480.6A	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	296	308
480.6A	STAREQ	Address state is required	309	310
480.6A	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	311	315
480.6A	ZIPREQ	Address zip is required.	311	315
480.6A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	316	319



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6A	INVNUM	Field must be numeric with no signs, decimals,	321	332
		or commas		
480.6A	SVC1	The amount paid for services rendered by	321	332
		individuals cannot be greater than 0 if the		
		payee ID type is "1" (Corporation).		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	333	344
		or commas		
480.6A	SVC2	The amount paid for services rendered by	333	344
		corporations cannot be greater than 0 if the		
		payee ID type is "2" (Individual).		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	345	356
		or commas		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	357	368
		or commas		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	369	380
100.51		or commas	201	200
480.6A	EMPFLD	Field should be empty (blank or filled with	381	392
400.64	1813 (811 18 4	zeros)	204	202
480.6A	INVNUM	Field must be numeric with no signs, decimals,	381	392
400 CA	1815/811.18.4	or commas	202	404
480.6A	INVNUM	Field must be numeric with no signs, decimals,	393	404
480.6A	INVNUM	or commas Field must be numeric with no signs, decimals,	417	428
460.0A	IINVINOIVI	or commas	417	420
480.6A	INVNUM	Field must be numeric with no signs, decimals,	429	440
400.07	1144140141	or commas	723	7-70
480.6A	EMPFLD	Field should be empty (blank or filled with	441	452
100.071	EIVII I EB	zeros)	111	132
480.6A	INVNUM	Field must be numeric with no signs, decimals,	441	452
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	762	776
		zeros)		
480.6A	FNBLK	First name should be blank for corporations	762	776
		(ID Type "1")		
480.6A	FNREQ	First name is required for individual ID types.	762	776
480.6A	EMPFLD	Field should be empty (blank or filled with	777	791
		zeros)		
480.6A	EMPFLD	Field should be empty (blank or filled with	792	811
		zeros)		
480.6A	LNBLK	Last name should be blank for corporations	792	811
		(ID Type "1")		
480.6A	LNREQ1	Last name is required for Individuals (ID Type	792	811
		"2")		
480.6A	LNREQ2	Last name is required if first name is provided.	792	811



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	832	843
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas	832	843
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	844	844
480.6A	EXCOD1	Exemption code is invalid. If payment for services rendered by individuals/corporations is greater than \$1,500, enter exemption code "A", "B", "C", "D", "E", "F", "G", "H", "I", "J", or "K" based on the exemption that the payment qualifies for.	844	844
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	845	845
480.6A	EXCOD1	Exemption code is invalid. If payment for services rendered by individuals/corporations is greater than \$1,500, enter exemption code "A", "B", "C", "D", "E", "F", "G", "H", "I", "J", or "K" based on the exemption that the payment qualifies for.	845	845
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	846	857
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas	846	857
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	858	869
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas	858	869
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	870	881
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas	870	881
480.6A	SVC5	Reimbursed expenses cannot be greater than 0 if payment for services rendered is equal to 0.	870	881
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	882	893
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas	882	893
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	894	894
480.6A	SVC2	The amount paid for services rendered by corporations cannot be greater than 0 if the payee ID type is "2" (Individual).	894	894



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
400.64	ENABELD	Field de cold be a great of blank on filled or the		
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	895	895
480.6A	SVC3	The health services rendered by individuals	895	895
		indicator is invalid. Use "1" to indicate		
		payment was for health services, or blank if		
		otherwise.		
480.6A	EMPFLD	Field should be empty (blank or filled with	896	907
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	896	907
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	908	919
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	908	919
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	920	931
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	920	931
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	932	943
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	932	943
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	944	955
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	944	955
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	956	967
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	956	967
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	968	979
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	968	979
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	980	991
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	980	991
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	992	1003
		zeros)		
480.6A	INVNUM	Field must be numeric with no signs, decimals,	992	1003
		or commas		
480.6A	EMPFLD	Field should be empty (blank or filled with	1004	1015
		zeros)		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas	1004	1015
480.6A	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.6A	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.6A	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.6A	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.6A	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6A	AMDARQ	Amended date is required for amended records.	2495	2500
480.6A	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.6A	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.6A	INVDAT	Date field is invalid.	2495	2500
480.6B	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6B	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6B	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.6B	CONTN3	The control number must be numeric.	2	10
480.6B	CONTN4	The control number must be 9 digits in length.	2	10
480.6B	CONTN6	You can not sure the interval (900000000-99999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	11	11
480.6B	6BFORM	Form type must be 3 for 480.6B submission.	13	13



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B	INVREG	The record type must be '1' for detail and '2' for summary.	14	14
480.6B	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.6B	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6B	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.6B	DUPREC	The payee has a duplicate registration.	15	15
480.6B	DUPREC	The payee has a duplicate registration.	15	15
480.6B	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.6B	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6B	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	31	31
480.6B	INVIDT	The Identification Number type is incorrect.	31	31
480.6B	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	32	40
480.6B	NAMREQ	Name is required.	41	70
480.6B	STRLEN	Address street must be at least 4 characters long	71	105
480.6B	STRREQ	Address street is required	71	105
480.6B	STRLEN	Address street must be at least 4 characters long	106	140
480.6B	CITLEN	Address city must be at least 2 characters long	141	153
480.6B	CITREQ	Address city is required	141	153
480.6B	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.6B	STAREQ	Address state is required	154	155
480.6B	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.6B	ZIPREQ	Address zip is required.	156	160



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.6B	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.6B	EIN2	Invalid EIN	167	175
480.6B	EIN2	Invalid EIN	167	175
480.6B	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.6B	SSN2	Invalid SSN	167	175
480.6B	ACCLEN	Account number value must be at least 4 characters long.	176	195
480.6B	ACCNUM	Account number is required.	176	195
480.6B	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6B	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6B	NAMREQ	Name is required.	196	225
480.6B	NAMREQ	Name is required.	196	225
480.6B	NAMREQ	Name is required.	196	225
480.6B	STRLEN	Address street must be at least 4 characters long	226	260
480.6B	STRREQ	Address street is required	226	260
480.6B	STRLEN	Address street must be at least 4 characters long	261	295
480.6B	CITLEN	Address city must be at least 2 characters long	296	308
480.6B	CITREQ	Address city is required	296	308
480.6B	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	296	308
480.6B	STAREQ	Address state is required	309	310
480.6B	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	311	315
480.6B	ZIPREQ	Address zip is required.	311	315



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	316	319
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	321	332
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	321	332
480.6B	SVC1	The amount paid for services rendered by individuals cannot be greater than 0 if the payee ID type is "1" (Corporation).	321	332
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	333	342
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	333	342
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	343	354
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	343	354
480.6B	SVC2	The amount paid for services rendered by corporations cannot be greater than 0 if the payee ID type is "2" (Individual).	343	354
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	355	364
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	355	364
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	365	376
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	377	386
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	377	386
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	387	398
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	387	398
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	399	408
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	399	408
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	399	408
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	399	408
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	409	420



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
400 CD	1017/01110/4	Field worth he companies with the signed desired.		
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	409	420
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	421	430
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	421	430
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	421	430
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	421	430
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	431	442
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	443	452
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	443	452
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	443	452
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	453	464
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	465	474
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	465	474
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	465	474
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	475	486
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	487	496
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	487	496
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	487	496
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	497	508
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	509	518
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	509	518
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	509	518



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	519	530
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	531	540
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	531	540
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	531	540
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	541	552
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	553	562
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	553	562
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	553	562
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	563	563
480.6B	INVWAV	Waiver type code is invalid. The only values accepted in this field are "P" for partial or "T" for total.	563	563
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	564	583
480.6B	WCTBLK	The value for waiver certificate should be blank if the waiver type value is blank.	564	583
480.6B	WCTREQ	A value for waiver certificate is required when a waiver type value is provided.	564	583
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	762	776
480.6B	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.6B	FNREQ	First name is required for individual ID types.	762	776
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.6B	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.6B	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.6B	LNREQ2	Last name is required if first name is provided.	792	811
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	812	831



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	832	843
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	832	843
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	844	853
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	844	853
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	844	853
480.6B	WITH2	Amount withheld cannot be greater than the amount paid.	844	853
480.6B	WITH3	The amount withheld for dividends subject to a preferential rate is incorrect. The value must be equal to the provided preferential rate percent multiplied by the amount paid for dividends subject to preferential rate.	844	853
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	854	856
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	854	856
480.6B	PRERAT	Invalid percentage of the preferential rate for dividends. The value must be greater than zero if the amount paid is greater than zero, and it cannot be greater than 100. Verify the percentage of the preferential rate is not blank or zero, since there is an amount paid for dividends subject to preferential rate under Special Act.	854	856
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	857	868
480.6B	EXP1	The amount for reimbursed expenses for individuals cannot be greater than 0 if the payee ID type is "1" (Corporation).	857	868
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas	857	868
480.6B	SVC5	Reimbursed expenses cannot be greater than 0 if payment for services rendered is equal to 0.	857	868
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	869	880
480.6B	EXP2	The amount for reimbursed expenses for corporations cannot be greater than 0 if the payee ID type is "2" (Individual).	869	880



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B	INVNUM	Field must be numeric with no signs, decimals,	869	880
		or commas		
480.6B	SVC5	Reimbursed expenses cannot be greater than	869	880
		0 if payment for services rendered is equal to		
		0.		
480.6B	EMPFLD	Field should be empty (blank or filled with	881	892
		zeros)		
480.6B	INVNUM	Field must be numeric with no signs, decimals,	881	892
		or commas		
480.6B	EMPFLD	Field should be empty (blank or filled with	893	902
		zeros)		
480.6B	INVNUM	Field must be numeric with no signs, decimals,	893	902
		or commas		
480.6B	WITH1	Amount withheld cannot be 0 if the amount	893	902
		paid is greater than 0.		
480.6B	EMPFLD	Field should be empty (blank or filled with	903	914
		zeros)		
480.6B	INVNUM	Field must be numeric with no signs, decimals,	903	914
		or commas		
480.6B	EMPFLD	Field should be empty (blank or filled with	915	926
		zeros)		
480.6B	INVNUM	Field must be numeric with no signs, decimals,	915	926
		or commas		
480.6B	EMPFLD	Field should be empty (blank or filled with	927	927
		zeros)		
480.6B	SVC2	The amount paid for services rendered by	927	927
		corporations cannot be greater than 0 if the		
		payee ID type is "2" (Individual).		
480.6B	EMPFLD	Field should be empty (blank or filled with	928	928
		zeros)		
480.6B	SVC2	The amount paid for services rendered by	928	928
		corporations cannot be greater than 0 if the		
		payee ID type is "2" (Individual).		
480.6B	EMPFLD	Field should be empty (blank or filled with	929	929
		zeros)		
480.6B	SVC3	The health services rendered by individuals	929	929
		indicator is invalid. Use "1" to indicate		
		payment was for health services, or blank if		
400.65	ENADE: D	otherwise.	022	000
480.6B	EMPFLD	Field should be empty (blank or filled with	930	930
490 CD	CVC2	zeros)	020	030
480.6B	SVC3	The health services rendered by individuals	930	930
		indicator is invalid. Use "1" to indicate		
		payment was for health services, or blank if otherwise.		
		otherwise.		



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.6B	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.6B	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.6B	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.6B	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6B	AMDARQ	Amended date is required for amended records.	2495	2500
480.6B	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.6B	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.6B	INVDAT	Date field is invalid.	2495	2500
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2	10
480.6B.1	B1FORM	Form type must be 8 for form 480.6B.1 in 480.6B submission.	13	13
480.6B.1	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6B.1	DOCTY5	The Reconciliation file type must be amended to add amended submissions.	15	15
480.6B.1	DOCTY9	The Reconciliation file type must be original for the original submission.	15	15
480.6B.1	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6B.1	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	27	27
480.6B.1	INVIDT	The Identification Number type is incorrect.	27	27



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	48	56
480.6B.1	NAMREQ	Name is required.	57	86
480.6B.1	NAMREQ	Name is required.	87	116
480.6B.1	PHOREQ	Phone number is required.	117	126
480.6B.1	STRLEN	Address street must be at least 4 characters long	127	161
480.6B.1	STRREQ	Address street is required	127	161
480.6B.1	STRLEN	Address street must be at least 4 characters long	162	196
480.6B.1	CITLEN	Address city must be at least 2 characters long	197	209
480.6B.1	CITREQ	Address city is required	197	209
480.6B.1	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	197	209
480.6B.1	STAREQ	Address state is required	210	211
480.6B.1	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	212	216
480.6B.1	ZIPREQ	Address zip is required.	212	216
480.6B.1	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	217	220
480.6B.1	STRLEN	Address street must be at least 4 characters long	223	257
480.6B.1	STRREQ	Address street is required	223	257
480.6B.1	STRLEN	Address street must be at least 4 characters long	258	292
480.6B.1	CITLEN	Address city must be at least 2 characters long	293	305
480.6B.1	CITREQ	Address city is required	293	305
480.6B.1	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	293	305
480.6B.1	STAREQ	Address state is required	306	307
480.6B.1	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	308	312
480.6B.1	ZIPREQ	Address zip is required.	308	312
480.6B.1	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	313	316
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	368	379
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	368	379



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	368	379
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	380	391
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	380	391
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	380	391
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	392	403
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	392	403
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	404	415
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	404	415
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	416	427
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	416	427
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	428	439
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	428	439
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	440	451



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	440	451
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	452	463
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	452	463
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	452	463
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	464	475
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	464	475
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	464	475
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	476	487
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	476	487
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	488	499
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	488	499
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	500	511
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	500	511



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	512	523
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	512	523
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	524	535
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	524	535
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	536	547
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	536	547
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	548	559
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	548	559
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	560	571
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	560	571
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	572	583
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	572	583
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	584	595



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	584	595
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	596	607
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	596	607
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	608	619
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	608	619
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	620	631
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	620	631
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	620	631
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	632	643
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	632	643
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	632	643
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	644	655
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	644	655



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	EMPFLD	Field should be empty (blank or filled with	656	667
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	656	667
		or commas		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	668	679
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	668	679
100.55.1		or commas	500	504
480.6B.1	EMPFLD	Field should be empty (blank or filled with	680	691
480.6B.1	INVNUM	zeros) Field must be numeric with no signs, decimals,	680	691
480.06.1	INVINUIVI	or commas	080	091
480.6B.1	EMPFLD	Field should be empty (blank or filled with	692	703
400.05.1	LIVITIED	zeros)	032	703
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	692	703
		or commas		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	704	715
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	704	715
		or commas		
480.6B.1	PAID4	The total amount paid in the reconciliation is	704	715
		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		paid from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount paid from each added		
		informative plus the total from the original submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
		deleted records.		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	716	727
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	716	727
		or commas		
480.6B.1	WITH7	The total amount paid in the reconciliation is	716	727
		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		withheld from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount withheld from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
		minus the difference from amended or deleted records.		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	728	739
460.00.1	LIVIFILD	zeros)	720	739
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	728	739
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	740	751
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	740	751
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	752	763
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	752	763
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	764	775
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	764	775
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	776	787
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	776	787
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	788	799
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	788	799
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	800	811



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	800	811
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	812	823
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	812	823
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	824	835
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	824	835
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	836	847
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	836	847
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	848	859
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	848	859
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	860	871
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	860	871
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	872	883
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	872	883



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	884	895
		or commas		
480.6B.1	WITH7	The total amount paid in the reconciliation is	884	895
		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		withheld from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount withheld from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
480.6B.1	ENADELD	deleted records.	906	007
480.08.1	EMPFLD	Field should be empty (blank or filled with zeros)	896	907
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	896	907
400.00.1	1144140141	or commas	030	307
480.6B.1	EMPFLD	Field should be empty (blank or filled with	908	919
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	908	919
		or commas		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	920	931
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	920	931
		or commas		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	932	943
480.6B.1	1817/811 184	zeros)	022	042
480.08.1	INVNUM	Field must be numeric with no signs, decimals, or commas	932	943
480.6B.1	EMPFLD	Field should be empty (blank or filled with	944	955
400.00.1	LIVITIED	zeros)	344	333
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	944	955
		or commas		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	956	967
		or commas		
480.6B.1	PAID4	The total amount paid in the reconciliation is	956	967
		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		paid from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount paid from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
		minus the difference from amended or deleted records.		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	968	979
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	968	979
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	980	991
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	980	991
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	992	1003
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	992	1003
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1004	1015
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1004	1015
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1016	1027
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1016	1027
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1028	1039
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1028	1039
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1040	1051



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1040	1051
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1052	1063
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1052	1063
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1064	1075
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1064	1075
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1076	1087
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1076	1087
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1088	1099
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1088	1099
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1100	1111
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1100	1111
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1112	1123
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1112	1123



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1124	1135
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1124	1135
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1136	1147
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1136	1147
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1148	1159
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1148	1159
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1160	1171
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1160	1171
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1172	1183
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1172	1183
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1184	1195
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1184	1195
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1196	1207



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1196	1207
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1208	1219
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1208	1219
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1220	1231
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	1220	1231
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1232	1243
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1232	1243
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1244	1255
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1244	1255
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1256	1267
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1256	1267
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1268	1279
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1268	1279



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1280	1291
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1280	1291
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1292	1303
480.6B.1	PAID1	The total paid amount for Part 1 must equal the sum of amounts paid for each payment type.	1292	1303
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1304	1315
480.6B.1	WITH4	The total withheld amount for Part 1 must equal the sum of amounts withheld for each payment type.	1304	1315
480.6B.1	DEPOS1	The total deposit amount for Part 1 must equal the sum of amounts deposited for each payment type.	1316	1327
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1316	1327
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1316	1327
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1328	1339
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1340	1351
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1340	1351
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1352	1363
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1352	1363
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1364	1375
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1364	1375
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1376	1387
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1388	1399
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1388	1399
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1400	1411
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1400	1411



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1412	1423
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	1412	1423
		or commas		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1424	1435
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1436	1447
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1436	1447
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1448	1459
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1448	1459
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1460	1471
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1460	1471
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1472	1483
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1484	1495
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1484	1495
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1496	1507
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1496	1507
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1508	1519
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1508	1519
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1520	1531
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1532	1543
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1532	1543
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1544	1555
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1544	1555
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1556	1567



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1556	1567
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1568	1579
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1580	1591
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1580	1591
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1592	1603
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1592	1603
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1604	1615
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1604	1615
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1616	1627
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1628	1639
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1628	1639
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1640	1651
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1640	1651
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1652	1663
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1652	1663
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1664	1675
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1676	1687
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1676	1687
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1688	1699
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1688	1699
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1700	1711
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1700	1711



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
100.55.1			_	
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1712	1723
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1724	1735
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1724	1735
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1736	1747
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	1736	1747
480.6B.1	EMPFLD	Field should be empty (blank or filled with	1748	1759
480.6B.1	INVNUM	zeros) Field must be numeric with no signs, decimals,	1748	1759
480.6B.1	INVNUM	or commas Field must be numeric with no signs, decimals,	1760	1771
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	1772	1783
480.6B.1	WITH2	or commas Amount withheld cannot be greater than the	1772	1783
480.6B.1	EMPFLD	amount paid. Field should be empty (blank or filled with	1784	1795
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1784	1795
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1796	1807
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1796	1807
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1808	1819
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1820	1831
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1820	1831
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1832	1843
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1832	1843
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1844	1855
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1844	1855
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1856	1867



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1868	1879
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1868	1879
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1880	1891
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1880	1891
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1892	1903
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1892	1903
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1904	1915
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1904	1915
480.6B.1	PAID2	The total paid amount for Part 2 must equal the sum of amounts paid for each month	1904	1915
480.6B.1	PAID3	The total paid amount in Part 2 must match the total paid amount from Part 1.	1904	1915
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1916	1927
480.6B.1	WITH5	The total withheld amount for Part 2 must equal the sum of amounts withheld for each month.	1916	1927
480.6B.1	WITH6	The total withheld amount in Part 2 must match the total withheld amount from Part 1.	1916	1927
480.6B.1	DEPOS2	The total deposit amount for Part 2 must equal the sum of amounts deposited for each month	1928	1939
480.6B.1	DEPOS3	The total deposited amount in Part 2 must match the total deposited amount from Part 1.	1928	1939
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1928	1939
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1928	1939
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	1952	1963
480.6B.1	TOTTAX	Total tax is incorrect. Verify this value is equal to the total tax withheld minus the total credit for deemed dividends.	1952	1963
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	1964	1975



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	1964	1975
		or commas		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	1976	1987
		or commas		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	1988	1999
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	1988	1999
400 CD 4	DAIDA	or commas	1000	1000
480.6B.1	PAID4	The total amount paid in the reconciliation is	1988	1999
		incorrect. If this is the original submission the value must be equal to the sum of the amount		
		paid from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount paid from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
		deleted records.		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	2000	2011
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	2000	2011
		or commas		
480.6B.1	WITH7	The total amount paid in the reconciliation is	2000	2011
		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		withheld from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount withheld from each added		
		informative plus the total from the original submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
		deleted records.		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	2012	2023
10010212		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	2012	2023
		or commas		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	2024	2035
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals,	2024	2035
		or commas		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	2036	2047
		zeros)		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2036	2047
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2048	2059
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2048	2059
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2060	2071
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2060	2071
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2072	2083
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2072	2083
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2072	2083
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2072	2083
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2084	2095
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2084	2095



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2084	2095
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2096	2107
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2096	2107
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2096	2107
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2108	2119
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2108	2119
480.6B.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2108	2119
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2120	2131
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2120	2131



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2132	2143
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2132	2143
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2144	2155
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2144	2155
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2156	2167
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2156	2167
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2168	2179
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2168	2179
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2180	2191
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2180	2191
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	2180	2191
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2192	2203
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2192	2203
480.6B.1	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or	2192	2203



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
		minus the difference from amended or deleted records.		
		deleted records.		
480.6B.1	EMPFLD	Field should be empty (blank or filled with	2204	2213
		zeros)		
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas	2204	2213
480.6B.1	TOTFRM	The total form count does not match the	2204	2213
		number of informatives submitted for this		
400 CD 1	ENADELD	account and filing period.	2446	2454
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros)	2446	2454
480.6B.1	RSNEMP	Change reason should not be populated for	2455	2494
		original or delete document types.		
480.6B.1	AMDARQ	Amended date is required for amended records.	2495	2500
480.6B.1	EMPFLD	Field should be empty (blank or filled with	2495	2500
		zeros)		
480.6B.1	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the	2495	2500
		future.		
480.6B.1	INVDAT	Date field is invalid.	2495	2500
480.6C	CONTN6	You can not sure the interval (900000000-	2	10
		99999999); it is reserved for control numbers automatically assigned in SURI.		
480.6C	EMPFLD	Field should be empty (blank or filled with	11	11
		zeros)		
480.6C	INVIDT	The Identification Number type is incorrect.	11	11
480.6C	INVIDT	The Identification Number type is incorrect.	11	11
480.6C	6CFORM	Form type must be 5 for 480.6C submission.	13	13
480.6C	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration	15	15
		or summary. Verify that, if the file type is 'A'		
		(Add), you cannot send amended documents;		
		only amend the reconciliation or summary		
		forms.		



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6C	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6C	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.6C	DUPREC	The payee has a duplicate registration.	15	15
480.6C	DUPREC	The payee has a duplicate registration.	15	15
480.6C	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.6C	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6C	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	31	31
480.6C	INVIDT	The Identification Number type is incorrect.	31	31
480.6C	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	32	40
480.6C	NAMREQ	Name is required.	41	70
480.6C	STRLEN	Address street must be at least 4 characters long	71	105
480.6C	STRREQ	Address street is required	71	105
480.6C	STRLEN	Address street must be at least 4 characters long	106	140
480.6C	STAREQ	Address state is required	154	155
480.6C	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.6C	ZIPREQ	Address zip is required.	156	160
480.6C	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.6C	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.6C	EIN2	Invalid EIN	167	175
480.6C	ID2	The Identification Number is not a valid SSN or EIN.	167	175



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
100.50	17161	1:1-7:0-7		
480.6C	ITIN	Invalid ITIN (Taxpayer's personal identification number)	167	175
480.6C	SSN2	Invalid SSN	167	175
480.6C	ACCLEN	Account number value must be at least 4 characters long.	176	195
480.6C	ACCNUM	Account number is required.	176	195
480.6C	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6C	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6C	NAMREQ	Name is required.	196	225
480.6C	NAMREQ	Name is required.	196	225
480.6C	NAMREQ	Name is required.	196	225
480.6C	CITLEN	Address city must be at least 2 characters long	296	308
480.6C	CITREQ	Address city is required	296	308
480.6C	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	296	308
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	321	332
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	333	342
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	333	342
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	333	342
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	343	354
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	343	354
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	355	364
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	355	364
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	355	364



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6C	WITH2	Amount withheld cannot be greater than the	355	364
480.6C	INVNUM	amount paid. Field must be numeric with no signs, decimals,	365	376
400.50	1513 (511 15 4	or commas	277	206
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	377	386
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	377	386
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	377	386
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	387	398
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	387	398
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	399	408
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	399	408
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	399	408
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	399	408
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	409	420
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	421	430
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	421	430
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	421	430
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	431	442
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	443	452
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	443	452
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	443	452
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	453	464
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	465	474



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	465	474
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	465	474
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	497	508
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	509	518
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	509	518
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	509	518
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	519	530
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	531	540
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	531	540
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	531	540
480.6C	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	541	552
480.6C	ID6	Alternate Payee ID is required if the Payee SSN or FEIN is blank or all zeros.	541	552
480.6C	ID8	Payee's Identification should be blank if an SSN or FEIN was provided in the first Payee ID field	541	552
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	641	652
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	653	662
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	653	662
480.6C	WITH11	The amount withheld for royalties subject to a special rate is incorrect. The value must be equal to the provided special rate percent multiplied by the amount paid for royalties subject to a special rate.	653	662
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	653	662



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	663	674
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	675	684
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	675	684
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	675	684
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	685	696
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	685	696
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	697	706
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	697	706
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	697	706
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	697	706
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	707	718
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	707	718
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	719	728
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	719	728
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	719	728
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	719	728
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	762	776
480.6C	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.6C	FNREQ	First name is required for individual ID types.	762	776
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.6C	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6C	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.6C	LNREQ2	Last name is required if first name is provided.	792	811
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	832	843
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	832	843
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	844	853
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	844	853
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	844	853
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	844	853
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	854	865
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	854	865
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	866	875
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	866	875
480.6C	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	866	875
480.6C	WITH2	Amount withheld cannot be greater than the amount paid.	866	875
480.6C	WITH3	The amount withheld for dividends subject to a preferential rate is incorrect. The value must be equal to the provided preferential rate percent multiplied by the amount paid for dividends subject to preferential rate.	866	875
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	876	878
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	876	878
480.6C	PRERAT	Invalid percentage of the preferential rate for dividends. The value must be greater than zero if the amount paid is greater than zero, and it cannot be greater than 100. Verify the percentage of the preferential rate is not blank or zero, since there is an amount paid for dividends subject to preferential rate under Special Act.	876	878



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	879	881
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	879	881
480.6C	SPERAT	The special rate percent for royalties is invalid. Value must be greater than 0 if amount paid is greater than 0 and cannot be greater than 100.	879	881
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	882	893
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	882	893
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	894	905
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas	894	905
480.6C	INVCH1	Code is invalid. Value must be "0" or " " when Payments Not Subject Withhold equal 0.	906	906
480.6C	INVCHK	Code is invalid. Use "1" to indicate "Yes", to indicate "NO" use "0" or leave blank.	906	906
480.6C	INVCHK	Code is invalid. Use "1" to indicate "Yes", to indicate "NO" use "0" or leave blank.	907	907
480.6C	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.6C	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.6C	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.6C	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6C	AMDARQ	Amended date is required for amended records.	2495	2500
480.6C	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.6C	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6C	INVDAT	Date field is invalid.	2495	2500
480.6D	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6D	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6D	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.6D	CONTN3	The control number must be numeric.	2	10
480.6D	CONTN4	The control number must be 9 digits in length.	2	10
480.6D	CONTN6	You can not sure the interval (900000000-99999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	11	11
480.6D	INVIDT	The Identification Number type is incorrect.	11	11
480.6D	6DFORM	Form type must be X for 480.6D submission.	13	13
480.6D	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.6D	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6D	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.6D	DUPREC	The payee has a duplicate registration.	15	15
480.6D	DUPREC	The payee has a duplicate registration.	15	15
480.6D	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.6D	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6D	ID12	Incorrect Payer ID type. If the beneficiary ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	31	31
480.6D	INVIDT	The Identification Number type is incorrect.	31	31
480.6D	NAMREQ	Name is required.	41	70



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6D	STRLEN	Address street must be at least 4 characters long	71	105
480.6D	STRREQ	Address street is required	71	105
480.6D	STRLEN	Address street must be at least 4 characters long	106	140
480.6D	CITLEN	Address city must be at least 2 characters long	141	153
480.6D	CITREQ	Address city is required	141	153
480.6D	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.6D	STAREQ	Address state is required	154	155
480.6D	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.6D	ZIPREQ	Address zip is required.	156	160
480.6D	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.6D	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.6D	EIN2	Invalid EIN	167	175
480.6D	EIN2	Invalid EIN	167	175
480.6D	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.6D	SSN2	Invalid SSN	167	175
480.6D	ACCLEN	Account number value must be at least 4 characters long.	176	195
480.6D	ACCNUM	Account number is required.	176	195
480.6D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.6D	NAMREQ	Name is required.	196	225
480.6D	NAMREQ	Name is required.	196	225
480.6D	NAMREQ	Name is required.	196	225



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6D	STRLEN	Address street must be at least 4 characters long	226	260
480.6D	STRREQ	Address street is required	226	260
480.6D	STRLEN	Address street must be at least 4 characters long	261	295
480.6D	STAREQ	Address state is required	309	310
480.6D	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	311	315
480.6D	ZIPREQ	Address zip is required.	311	315
480.6D	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	316	319
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	321	332
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	333	344
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	345	356
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	357	368
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	393	404
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	393	404
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	417	428
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	417	428
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	429	440
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	429	440
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	441	441
480.6D	INTCD1	Value for interest code field is invalid. The only values accepted in this field are "Y" for yes or "N" for no.	441	441
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	442	442
480.6D	INTCD1	Value for interest code field is invalid. The only values accepted in this field are "Y" for yes or "N" for no.	442	442
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	443	443



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6D	INTCD1	Value for interest code field is invalid. The only values accepted in this field are "Y" for yes or "N" for no.	443	443
480.6D	DISCD1	Value for dividends and distribution code field is invalid. The only values accepted in this field are "Y" for yes or "N" for no.	445	445
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	445	445
480.6D	DISCD1	Value for dividends and distribution code field is invalid. The only values accepted in this field are "Y" for yes or "N" for no.	446	446
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	446	446
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	449	460
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	473	484
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	497	508
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	497	508
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	509	520
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	509	520
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	521	532
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	521	532
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	533	544
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	533	544
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	545	556
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	545	556
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	557	568
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	557	568
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	569	580
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	569	580



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	581	592
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	581	592
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	593	604
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	593	604
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	762	776
480.6D	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.6D	FNREQ	First name is required for individual ID types.	762	776
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.6D	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.6D	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.6D	LNREQ2	Last name is required if first name is provided.	792	811
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	832	843
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	832	843
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	844	855
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	844	855
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	856	867
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	856	867
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	880	891
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	880	891
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	892	903
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	892	903
480.6D	EXCOD2	Exemption code is required if debt discharge amount is greater than 0.	904	906



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6D	EXCOD3	Exemption code is invalid. The only values accepted in this field are "A", "B", "C", "D" or a combination of those values.	904	906
480.6D	EXCOD3	Exemption code is invalid. The only values accepted in this field are "A", "B", "C", "D" or a combination of those values.	904	906
480.6D	EXCOD3	Exemption code is invalid. The only values accepted in this field are "A", "B", "C", "D" or a combination of those values.	904	906
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	907	918
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	907	918
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	919	930
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	919	930
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	931	942
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas	931	942
480.6D	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.6D	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.6D	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.6D	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.6D	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6D	AMDARQ	Amended date is required for amended records.	2495	2500
480.6D	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.6D	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6D	INVDAT	Date field is invalid.	2495	2500
480.6G	CONTN1	The Control Number is required. Make sure	2	10
		the field is not blank.		
480.6G	CONTN1	The Control Number is required. Make sure	2	10
400.66	CONTNIA	the field is not blank.	2	10
480.6G	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be	2	10
		unique for the employer, form type, and fiscal		
		year.		
480.6G	CONTN3	The control number must be numeric.	2	10
480.6G	CONTN4	The control number must be 9 digits in length.	2	10
480.6G	CONTN6	You can not sure the interval (900000000-	2	10
		99999999); it is reserved for control numbers		
		automatically assigned in SURI.		
480.6G	INVIDT	The Identification Number type is incorrect.	11	11
480.6G	6GFORM	Form type must be G for 480.6G submission.	13	13
480.6G	DOCT16	You cannot add amended documents to the	15	15
		request unless it is a reconciliation registration		
		or summary. Verify that, if the file type is 'A'		
		(Add), you cannot send amended documents; only amend the reconciliation or summary		
		forms.		
480.6G	DOCTY1	Invalid file type. The only values allowed in	15	15
		this field are 'O' (Original), 'A' (Amend), or 'X'		
		(Remove).		
480.6G	DOCTY2	You cannot use file type 'A' (Amended) or 'X'	15	15
		(Removed) when you are submitting an 'O' file type (Original or Add).		
480.6G	DUPREC	The payee has a duplicate registration.	15	15
480.6G	DUPREC	The payee has a duplicate registration.	15	15
480.6G	RECNF	There is no document with the indicated	15	15
100.00		Control Number. It cannot be removed. Verify	13	13
		that the Control Number is indicated for the		
		original document you want to remove.		
480.6G	INVTXY	Tax year is invalid or does not belong to the	18	21
		selected period.		
480.6G	PAYID	The Payer Identification Number must match	32	40
		the Identification Number in the 'PA' record.		
480.6G	NAMREQ	Name is required.	41	70
480.6G	STRLEN	Address street must be at least 4 characters	71	105
190.60	CTDDEO	long Address street is required	71	100
480.6G	STRREQ	Address street is required	71	105



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6G	STRLEN	Address street must be at least 4 characters long	106	140
480.6G	CITLEN	Address city must be at least 2 characters long	141	153
480.6G	CITREQ	Address city is required	141	153
480.6G	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.6G	STAREQ	Address state is required	154	155
480.6G	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.6G	ZIPREQ	Address zip is required.	156	160
480.6G	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.6G	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.6G	EIN2	Invalid EIN	167	175
480.6G	EIN2	Invalid EIN	167	175
480.6G	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.6G	SSN2	Invalid SSN	167	175
480.6G	NAMREQ	Name is required.	176	205
480.6G	FNBLK	First name should be blank for corporations (ID Type "1")	206	220
480.6G	FNREQ	First name is required for individual ID types.	206	220
480.6G	LNBLK	Last name should be blank for corporations (ID Type "1")	236	255
480.6G	LNREQ1	Last name is required for Individuals (ID Type "2")	236	255
480.6G	LNREQ2	Last name is required if first name is provided.	236	255
480.6G	STRLEN	Address street must be at least 4 characters long	276	310
480.6G	STRREQ	Address street is required	276	310
480.6G	STRLEN	Address street must be at least 4 characters long	311	345
480.6G	CITLEN	Address city must be at least 2 characters long	346	358
480.6G	CITREQ	Address city is required	346	358
480.6G	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	346	358



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6G	STAREQ	Address state is required	359	360
480.6G	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	361	365
480.6G	ZIPREQ	Address zip is required.	361	365
480.6G	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	366	369
480.6G	6GEMRQ	Participant Merchant's e-mail address is required.	370	419
480.6G	6GMER1	The Merchant Category Code must be 4 digits in length.	420	423
480.6G	6GMER2	The Merchant Category Code must be numeric.	420	423
480.6G	6GTBCO	The Business Account Indicator is invalid. Use "P" to indicate "Personal", or "B" for "Business".	424	424
480.6G	6GTYBU	Type of Business is required. Make sure the field is not blank.	424	424
480.6G	6GTRRQ	Number of Payment Transactions is required.	460	469
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	460	469
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	470	484
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	485	499
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	500	514
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	515	529
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	530	544
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	545	559
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	560	574
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	575	589
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	590	604
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	605	619
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	620	634
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas	635	649



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6G	6GTOCD	The total payments processed for credit or	650	664
		debit cards must equal the sum of amounts		
		for each month		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	650	664
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	665	679
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	680	694
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	695	709
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	710	724
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	725	739
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	740	754
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	755	769
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	770	784
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	785	799
		or commas		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	800	814
100.50		or commas	0.15	000
480.6G	INVNUM	Field must be numeric with no signs, decimals,	815	829
400.60	1819 (811 18 4	or commas	000	0.4.4
480.6G	INVNUM	Field must be numeric with no signs, decimals,	830	844
400.66	CCTOOT	or commas	0.45	050
480.6G	6GTOOT	The total payments processed for other	845	859
		transactions must equal the sum of amounts for each month		
480.6G	INVNUM	Field must be numeric with no signs, decimals,	845	859
480.00	IINVINOIVI	or commas	043	633
480.6G	OCNBLK	Original control number should not be	2446	2454
480.00	OCINDER	populated for original documents. Field	2440	2434
		should be empty (blank or filled with zeros)		
480.6G	OCNMTC	The Original Control Number value must	2446	2454
100.00	30.414110	match the Control Number value for the	2440	2-3-
		Removed document type. Verify that the		
		Original Control Number is indicated in the		
		document you want to remove.		
<u> </u>	<u> </u>		İ	



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6G	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.6G	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.6G	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6SP	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6SP	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6SP	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.6SP	CONTN3	The control number must be numeric.	2	10
480.6SP	CONTN4	The control number must be 9 digits in length.	2	10
480.6SP	CONTN6	You can not sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.6SP	INVIDT	The Identification Number type is incorrect.	11	11
480.6SP	SPFORM	Form type must be H for 480.6SP submission.	13	13
480.6SP	INVREG	The record type must be '1' for detail and '2' for summary.	14	14
480.6SP	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.6SP	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6SP	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.6SP	DUPREC	The payee has a duplicate registration.	15	15
480.6SP	DUPREC	The payee has a duplicate registration.	15	15
480.6SP	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6SP	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	32	40
480.6SP	NAMREQ	Name is required.	41	70
480.6SP	STRLEN	Address street must be at least 4 characters long	71	105
480.6SP	STRREQ	Address street is required	71	105
480.6SP	STRLEN	Address street must be at least 4 characters long	106	140
480.6SP	CITLEN	Address city must be at least 2 characters long	141	153
480.6SP	CITREQ	Address city is required	141	153
480.6SP	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.6SP	STAREQ	Address state is required	154	155
480.6SP	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.6SP	ZIPREQ	Address zip is required.	156	160
480.6SP	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.6SP	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.6SP	EIN2	Invalid EIN	167	175
480.6SP	EIN2	Invalid EIN	167	175
480.6SP	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.6SP	SSN2	Invalid SSN	167	175
480.6SP	NAMREQ	Name is required.	196	225
480.6SP	STRLEN	Address street must be at least 4 characters long	226	260
480.6SP	STRREQ	Address street is required	226	260
480.6SP	STRLEN	Address street must be at least 4 characters long	261	295
480.6SP	CITLEN	Address city must be at least 2 characters long	296	308
480.6SP	CITREQ	Address city is required	296	308



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	296	308
480.6SP	STAREQ	Address state is required	309	310
480.6SP	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	311	315
480.6SP	ZIPREQ	Address zip is required.	311	315
480.6SP	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	316	319
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	321	332
480.6SP	WITH01	Report only one type of payment, withholding payment or non-withholding payment	321	332
480.6SP	WITH03	Only report on line 1 or line 2	321	332
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	333	344
480.6SP	WITH01	Report only one type of payment, withholding payment or non-withholding payment	333	344
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	345	356
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	357	366
480.6SP	WITH03	Only report on line 1 or line 2	357	366
480.6SP	WITH04	Cannot be Great or equal than Amount Paid	357	366
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	367	378
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	379	388
480.6SP	WITH04	Cannot be Great or equal than Amount Paid	379	388
480.6SP	EXCOD2	Exemption code is required if debt discharge amount is greater than 0.	389	389
480.6SP	INVCOD	Exception code is invalid. Value must be "A", "B", "C", "D", "E", "F", "G", "H", "I", "J" or "K".	389	389
480.6SP	EXCOD2	Exemption code is required if debt discharge amount is greater than 0.	390	390
480.6SP	INVCOD	Exception code is invalid. Value must be "A", "B", "C", "D", "E", "F", "G", "H", "I", "J" or "K".	390	390
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	391	402
480.6SP	RESP01	If amount great 0 response required	391	402
480.6SP	RESP02	If response Yes amount required	391	402



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	403	414
480.6SP	RESP01	If amount great 0 response required	403	414
480.6SP	RESP02	If response Yes amount required	403	414
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas	415	426
480.6SP	SVC6	The indicator is invalid. Use "1" to indicate "Yes", or blank if "No".	427	427
480.6SP	SVC6	The indicator is invalid. Use "1" to indicate "Yes", or blank if "No".	428	428
480.6SP	SVC6	The indicator is invalid. Use "1" to indicate "Yes", or blank if "No".	429	429
480.6SP	SVC6	The indicator is invalid. Use "1" to indicate "Yes", or blank if "No".	430	430
480.6SP	SVC6	The indicator is invalid. Use "1" to indicate "Yes", or blank if "No".	431	431
480.6SP	SVC6	The indicator is invalid. Use "1" to indicate "Yes", or blank if "No".	432	432
480.6SP	INVWAV	Waiver type code is invalid. The only values accepted in this field are "P" for partial or "T" for total.	433	433
480.6SP	WCTBLK	The value for waiver certificate should be blank if the waiver type value is blank.	434	453
480.6SP	WCTREQ	A value for waiver certificate is required when a waiver type value is provided.	434	453
480.6SP	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.6SP	FNREQ	First name is required for individual ID types.	762	776
480.6SP	LNBLK	Last name should be blank for corporations (ID Type "1")	777	791
480.6SP	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.6SP	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.6SP	LNBLK	Last name should be blank for corporations (ID Type "1")	812	831
480.6SP	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.6SP	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.6SP	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.6SP	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6SP.2	P2FORM	Form type must be 8 for form 480.6SP.2 in 480.6SP submission.	13	13
480.6SP.2	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6SP.2	DOCTY5	The Reconciliation file type must be amended to add amended submissions.	15	15
480.6SP.2	DOCTY9	The Reconciliation file type must be original for the original submission.	15	15
480.6SP.2	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6SP.2	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	27	27
480.6SP.2	STRLEN	Address street must be at least 4 characters long	127	161
480.6SP.2	STRREQ	Address street is required	127	161
480.6SP.2	STRLEN	Address street must be at least 4 characters long	162	196
480.6SP.2	CITLEN	Address city must be at least 2 characters long	197	209
480.6SP.2	CITREQ	Address city is required	197	209
480.6SP.2	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	197	209
480.6SP.2	STAREQ	Address state is required	210	211
480.6SP.2	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	212	216
480.6SP.2	ZIPREQ	Address zip is required.	212	216



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP.2	ZEXLEN	Address zip code extension length is invalid. If	217	220
		provided it must be 4 digits long.		
480.6SP.2	STRLEN	Address street must be at least 4 characters	223	257
		long		
480.6SP.2	STRREQ	Address street is required	223	257
480.6SP.2	STRLEN	Address street must be at least 4 characters	258	292
		long		
480.6SP.2	CITLEN	Address city must be at least 2 characters long	293	305
480.6SP.2	CITREQ	Address city is required	293	305
480.6SP.2	INVCIT	City name is invalid. Value must contain	293	305
		alphanumeric characters only, no special		
		characters.		
480.6SP.2	STAREQ	Address state is required	306	307
480.6SP.2	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	308	312
480.6SP.2	ZIPREQ	Address zip is required.	308	312
480.6SP.2	ZEXLEN	Address zip code extension length is invalid. If	313	316
400.031 .2	ZEXELIV	provided it must be 4 digits long.	313	310
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals,	324	333
		or commas		
480.6SP.2	TOTFRM	The total form count does not match the	324	333
		number of informatives submitted for this		
		account and filing period.		
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals,	334	348
100 500 0	54154	or commas		
480.6SP.2	PAID4	The total amount paid in the reconciliation is	334	348
		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		paid from each informative. If adding informatives, the value must be equal to the		
		sum of the amount paid from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
		deleted records.		
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals,	349	363
		or commas		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	349	363
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	364	378
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	364	378
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	379	393
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	379	393
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	394	408



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	394	408
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	409	423
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	409	423
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	424	438
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	424	438
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	439	453



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	439	453
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	454	468
480.6SP.2	PAID4	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount paid from each informative. If adding informatives, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	454	468
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	469	483
480.6SP.2	PAIDSP	The total paid amount must equal the sum of amounts payments.	469	483
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas	484	498
480.6SP.2	WITHSP	The total Withheld amount must equal the sum of amounts Withheld.	484	498
480.7	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.7	CONTN3	The control number must be numeric.	2	10
480.7	CONTN4	The control number must be 9 digits in length.	2	10



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7	CONTN6	You can not sure the interval (900000000-99999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	11	11
480.7	INVIDT	The Identification Number type is incorrect.	11	11
480.7	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.7	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7	DUPREC	The payee has a duplicate registration.	15	15
480.7	DUPREC	The payee has a duplicate registration.	15	15
480.7	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.7	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	31	31
480.7	INVIDT	The Identification Number type is incorrect.	31	31
480.7	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	32	40
480.7	NAMREQ	Name is required.	41	70
480.7	STRLEN	Address street must be at least 4 characters long	71	105
480.7	STRREQ	Address street is required	71	105
480.7	STRLEN	Address street must be at least 4 characters long	106	140
480.7	CITLEN	Address city must be at least 2 characters long	141	153
480.7	CITREQ	Address city is required	141	153
480.7	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7	STAREQ	Address state is required	154	155
480.7	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7	ZIPREQ	Address zip is required.	156	160
480.7	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.7	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.7	EIN2	Invalid EIN	167	175
480.7	EIN2	Invalid EIN	167	175
480.7	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.7	SSN2	Invalid SSN	167	175
480.7	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.7	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	176	195
480.7	NAMREQ	Name is required.	196	225
480.7	NAMREQ	Name is required.	196	225
480.7	NAMREQ	Name is required.	196	225
480.7	STRLEN	Address street must be at least 4 characters long	226	260
480.7	STRREQ	Address street is required	226	260
480.7	STRLEN	Address street must be at least 4 characters long	261	295
480.7	CITLEN	Address city must be at least 2 characters long	296	308
480.7	CITREQ	Address city is required	296	308
480.7	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	296	308
480.7	STAREQ	Address state is required	309	310
480.7	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	311	315



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7	ZIPREQ	Address zip is required.	311	315
480.7	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	316	319
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	321	332
480.7	FTINVC	The financial type is invalid. The only values accepted for this field are "C" or "B".	333	344
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	333	344
480.7	FTINVC	The financial type is invalid. The only values accepted for this field are "C" or "B".	345	356
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	345	356
480.7	FTINVC	The financial type is invalid. The only values accepted for this field are "C" or "B".	357	368
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	357	368
480.7	FTINVC	The financial type is invalid. The only values accepted for this field are "C" or "B".	369	380
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	369	380
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	381	392
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	381	392
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	393	404
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	393	404
480.7	WITH10	The amount of tax withheld from income from sources within PR cannot be less than 17% of the amount distributed for income from sources within PR.	393	404
480.7	WITH2	Amount withheld cannot be greater than the amount paid.	393	404
480.7	WITH20	The amount of interest tax withheld cannot be less than 10% of the amount distributed for taxable interest.	393	404
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	405	416
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	405	416



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7	WITH10	The amount of tax withheld from income from sources within PR cannot be less than 17% of the amount distributed for income from sources within PR.	405	416
480.7	WITH10	The amount of tax withheld from income from sources within PR cannot be less than 17% of the amount distributed for income from sources within PR.	405	416
480.7	WITH19	The amount of tax withheld from income from sources within PR cannot be less than 10% of the amount distributed for income from sources within PR.	405	416
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	417	428
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	417	428
480.7	WITH10	The amount of tax withheld from income from sources within PR cannot be less than 17% of the amount distributed for income from sources within PR.	417	428
480.7	WITH2	Amount withheld cannot be greater than the amount paid.	417	428
480.7	WITH20	The amount of interest tax withheld cannot be less than 10% of the amount distributed for taxable interest.	417	428
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	453	464
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	453	464
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	465	476
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	465	476
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	477	488
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	477	488
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	489	500
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	489	500
480.7	DIST3	The amount distributed of taxable interest cannot be less than the amount withheld from interest.	501	512



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION
				ТО
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	501	512
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	501	512
480.7	DIST2	The amount distributed of income from sources within PR cannot be less than the amount of tax withheld for income from sources within PR	513	524
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	513	524
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	513	524
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	525	536
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	525	536
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	537	548
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	537	548
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	549	560
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	549	560
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	561	572
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	561	572
480.7	DIST4	The amount distributed for government pensioners cannot be less than the amount withheld from government pensioners.	573	584
480.7	DIST5	The total government pensioners distribution is incorrect. The value must equal the sum of the contributions, eligible interest, and other income distributions.	573	584
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	573	584
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	621	632
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	621	632



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7	DIST1	The total amount distributed must equal the sum of the individual distribution type amounts	633	644
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	633	644
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	705	716
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	705	716
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	762	776
480.7	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.7	FNREQ	First name is required for individual ID types.	762	776
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.7	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.7	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.7	LNREQ2	Last name is required if first name is provided.	792	811
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	812	831
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	832	843
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	832	843
480.7	WITH13	The amount of tax withheld from Hurricane Maria distributions cannot be less than 10% of the amount distributed for reason of extreme economic emergency due to Hurricane Maria	832	843
480.7	WITH2	Amount withheld cannot be greater than the amount paid.	832	843
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	844	855
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	844	855
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	856	867
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	856	867



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	868	879
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	868	879
480.7	DIST6	Total eligible distributions for reason of extreme economic emergency due to Hurricane Maria is incorrect. The value needs to equal the sum of individual distribution types for Hurricane Maria.	880	891
480.7	DIST7	The amount distributed for extreme economic emergency due to Hurricane Maria cannot be less than the amount withheld from eligible distributions for reasons of economic emergency.	880	891
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	880	891
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	880	891
480.7	FTREQ	Financial Type is required.	892	892
480.7	FTVAL	The financial type is invalid. The only values accepted in this field are "C", "D", or "B"	892	892
480.7	FTINVD	The financial type is invalid. The only values accepted for this field are "D" or "B".	2434	2445
480.7	INVNUM	Field must be numeric with no signs, decimals, or commas	2434	2445
480.7	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.7	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.7	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.7	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7	RSNREQ	Change reason is required for amended documents.	2455	2494
480.7	AMDARQ	Amended date is required for amended records.	2495	2500



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.7	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.7	INVDAT	Date field is invalid.	2495	2500
480.7A	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7A	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7A	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.7A	CONTN3	The control number must be numeric.	2	10
480.7A	CONTN4	The control number must be 9 digits in length.	2	10
480.7A	CONTN6	You can not sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	11	11
480.7A	INVIDT	The Identification Number type is incorrect.	11	11
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	12	12
480.7A	INVIDT	The Identification Number type is incorrect.	12	12
480.7A	7AFORM	Form type must be 6 for 480.7A submission.	13	13
480.7A	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.7A	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7A	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7A	DUPREC	The payee has a duplicate registration.	15	15
480.7A	DUPREC	The payee has a duplicate registration.	15	15
480.7A	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7A	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7A	ID14	The recipient ID type is incorrect. If recipient ID is FEIN the value should be '1' and if the recipient ID is an SSN the value should be '2'.	31	31
480.7A	INVIDT	The Identification Number type is incorrect.	31	31
480.7A	RECPID	The Recipient Identification Number must match the Identification Number in the 'PA' record.	32	40
480.7A	NAMREQ	Name is required.	41	70
480.7A	STRLEN	Address street must be at least 4 characters long	71	105
480.7A	STRREQ	Address street is required	71	105
480.7A	STRLEN	Address street must be at least 4 characters long	106	140
480.7A	CITLEN	Address city must be at least 2 characters long	141	153
480.7A	CITREQ	Address city is required	141	153
480.7A	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.7A	STAREQ	Address state is required	154	155
480.7A	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7A	ZIPREQ	Address zip is required.	156	160
480.7A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.7A	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.7A	EIN2	Invalid EIN	167	175
480.7A	EIN2	Invalid EIN	167	175
480.7A	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.7A	SSN2	Invalid SSN	167	175
480.7A	NAMREQ	Name is required.	176	205
480.7A	NAMREQ	Name is required.	176	205
480.7A	NAMREQ	Name is required.	176	205
480.7A	STRLEN	Address street must be at least 4 characters long	206	240



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7A	STRREQ	Address street is required	206	240
480.7A	STRLEN	Address street must be at least 4 characters long	241	275
480.7A	CITLEN	Address city must be at least 2 characters long	276	288
480.7A	CITREQ	Address city is required	276	288
480.7A	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	276	288
480.7A	STAREQ	Address state is required	289	290
480.7A	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	291	295
480.7A	ZIPREQ	Address zip is required.	291	295
480.7A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	296	299
480.7A	EIN2	Invalid EIN	300	308
480.7A	ID1	Identification number (ID) is required.	300	308
480.7A	ID2	The Identification Number is not a valid SSN or EIN.	300	308
480.7A	SSN2	Invalid SSN	300	308
480.7A	NAMREQ	Name is required.	309	338
480.7A	NAMREQ	Name is required.	309	338
480.7A	NAMREQ	Name is required.	309	338
480.7A	INVNUM	Field must be numeric with no signs, decimals, or commas	340	351
480.7A	INVNUM	Field must be numeric with no signs, decimals, or commas	352	363
480.7A	PAFIN2	Invalid value in the payment or loan fee- financing field. The only accepted values are 'P' (Paid) or 'F' (Financed).	364	364
480.7A	INVNUM	Field must be numeric with no signs, decimals, or commas	365	376
480.7A	PAFIN1	Invalid value in the discount or loan financing field. The only accepted values are 'P' (Paid) or 'F' (Financed).	377	377
480.7A	INVNUM	Field must be numeric with no signs, decimals, or commas	378	389
480.7A	INVNUM	Field must be numeric with no signs, decimals, or commas	390	401
480.7A	INVNUM	Field must be numeric with no signs, decimals, or commas	402	413
480.7A	ACCLEN	Account number value must be at least 4 characters long.	415	439
480.7A	ACCNUM	Account number is required.	415	439



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7A	INVNUM	Field must be numeric with no signs, decimals, or commas	440	442
480.7A	TRMREQ	Loan term is required.	440	442
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	762	776
480.7A	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.7A	FNREQ	First name is required for individual ID types.	762	776
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.7A	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.7A	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.7A	LNREQ2	Last name is required if first name is provided.	792	811
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	812	831
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	832	846
480.7A	FNBLK	First name should be blank for corporations (ID Type "1")	832	846
480.7A	FNREQ	First name is required for individual ID types.	832	846
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	847	861
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	862	881
480.7A	LNBLK	Last name should be blank for corporations (ID Type "1")	862	881
480.7A	LNREQ1	Last name is required for Individuals (ID Type "2")	862	881
480.7A	LNREQ2	Last name is required if first name is provided.	862	881
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	882	901
480.7A	STRLEN	Address street must be at least 4 characters long	902	936
480.7A	STRREQ	Address street is required	902	936
480.7A	STRLEN	Address street must be at least 4 characters long	937	971
480.7A	CITLEN	Address city must be at least 2 characters long	972	984
480.7A	CITREQ	Address city is required	972	984



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7A	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	972	984
480.7A	STAREQ	Address state is required	985	986
480.7A	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	987	991
480.7A	ZIPREQ	Address zip is required.	987	991
480.7A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	992	995
480.7A	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.7A	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.7A	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.7A	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7A	RSNREQ	Change reason is required for amended documents.	2455	2494
480.7A	AMDARQ	Amended date is required for amended records.	2495	2500
480.7A	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.7A	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.7A	INVDAT	Date field is invalid.	2495	2500
480.7B	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7B	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7B	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.7B	CONTN3	The control number must be numeric.	2	10
480.7B	CONTN4	The control number must be 9 digits in length.	2	10



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	11	11
480.7B	INVIDT	The Identification Number type is incorrect.	11	11
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	12	12
480.7B	INVIDT	The Identification Number type is incorrect.	12	12
480.7B	7BFORM	Form type must be 7 for 480.7B submission.	13	13
480.7B	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.7B	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7B	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	DUPREC	The payee has a duplicate registration.	15	15
480.7B	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.7B	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7B	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	22	22
480.7B	INVIDT	The Identification Number type is incorrect.	22	22
480.7B	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	23	31
480.7B	NAMREQ	Name is required.	32	61



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B	STRLEN	Address street must be at least 4 characters long	62	96
480.7B	STRREQ	Address street is required	62	96
480.7B	STRLEN	Address street must be at least 4 characters long	97	131
480.7B	CITLEN	Address city must be at least 2 characters long	132	144
480.7B	CITREQ	Address city is required	132	144
480.7B	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	132	144
480.7B	STAREQ	Address state is required	145	146
480.7B	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	147	151
480.7B	ZIPREQ	Address zip is required.	147	151
480.7B	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	153	161
480.7B	EIN2	Invalid EIN	153	161
480.7B	EIN2	Invalid EIN	153	161
480.7B	ID2	The Identification Number is not a valid SSN or EIN.	153	161
480.7B	SSN2	Invalid SSN	153	161
480.7B	DOB2	The combination of values for birth day is invalid. Date of birth must be a valid date not in the future.	162	165
480.7B	INVYEA	Birth year is invalid. Must be equal to or less than the current year.	162	165
480.7B	INVMON	Month value is invalid. Must be greater than 0 and less than 12.	166	167
480.7B	INVDAY	Day value is invalid. Must be greater than 0 and less than 31.	168	169
480.7B	NAMREQ	Name is required.	170	199
480.7B	NAMREQ	Name is required.	170	199
480.7B	NAMREQ	Name is required.	170	199
480.7B	STRLEN	Address street must be at least 4 characters long	200	234
480.7B	STRREQ	Address street is required	200	234
480.7B	STRLEN	Address street must be at least 4 characters long	235	269
480.7B	CITLEN	Address city must be at least 2 characters long	270	282



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7B	CITREQ	Address city is required	270	282
480.7B	INVCIT	City name is invalid. Value must contain	270	282
		alphanumeric characters only, no special characters.		
480.7B	STAREQ	Address state is required	283	284
480.7B	ZIPLEN	Address zip code length is invalid. Must be 5	285	289
400.75	ZII LLIN	digits long.	203	203
480.7B	ZIPREQ	Address zip is required.	285	289
480.7B	ACCLEN	Account number value must be at least 4	290	309
		characters long.		
480.7B	ACCNUM	Account number is required.	290	309
480.7B	AMNDID	You cannot change the Identification Number	311	319
		of an amended document. You must remove		
		the document with the incorrect Identification		
		Number and then submit an original document with the correct Identification		
		Number.		
480.7B	EIN2	Invalid EIN	311	319
480.7B	EIN2	Invalid EIN	311	319
480.7B	ID1	Identification number (ID) is required.	311	319
480.7B	ID2	The Identification Number is not a valid SSN or	311	319
10017 2	.52	EIN.	311	513
480.7B	SSN2	Invalid SSN	311	319
480.7B	NAMREQ	Name is required.	330	359
480.7B	NAMREQ	Name is required.	330	359
480.7B	NAMREQ	Name is required.	330	359
480.7B	STRLEN	Address street must be at least 4 characters	360	394
400 7D	CTRREO	long	200	204
480.7B	STRREQ	Address street is required	360	394
480.7B	STRLEN	Address street must be at least 4 characters long	395	429
480.7B	CITLEN	Address city must be at least 2 characters long	430	442
480.7B	CITREQ	Address city is required	430	442
480.7B	INVCIT	City name is invalid. Value must contain	430	442
		alphanumeric characters only, no special		
		characters.		
480.7B	STAREQ	Address state is required	443	444
480.7B	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	445	449
480.7B	ZIPREQ	Address zip is required.	445	449
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	450	456



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B	CONT1	Contributions amount cannot be greater than \$500 for the tax year.	457	463
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	457	463
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	464	470
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	471	477
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	478	484
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	485	491
480.7B	WITH9	The amount of interest tax withheld cannot be less than 17% of the amount distributed for taxable interest.	485	491
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	492	498
480.7B	WITH10	The amount of tax withheld from income from sources within PR cannot be less than 17% of the amount distributed for income from sources within PR.	492	498
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	499	505
480.7B	DIST3	The amount distributed of taxable interest cannot be less than the amount withheld from interest.	506	512
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	506	512
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	513	519
480.7B	DIST2	The amount distributed of income from sources within PR cannot be less than the amount of tax withheld for income from sources within PR	520	526
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	520	526
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	527	533
480.7B	DIST1	The total amount distributed must equal the sum of the individual distribution type amounts	534	540
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	534	540
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	541	547



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas	541	547
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	762	776
480.7B	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.7B	FNREQ	First name is required for individual ID types.	762	776
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.7B	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.7B	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.7B	LNREQ2	Last name is required if first name is provided.	792	811
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	812	831
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	832	846
480.7B	FNBLK	First name should be blank for corporations (ID Type "1")	832	846
480.7B	FNREQ	First name is required for individual ID types.	832	846
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	847	861
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	862	881
480.7B	LNBLK	Last name should be blank for corporations (ID Type "1")	862	881
480.7B	LNREQ1	Last name is required for Individuals (ID Type "2")	862	881
480.7B	LNREQ2	Last name is required if first name is provided.	862	881
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	882	901
480.7B	FTREQ	Financial Type is required.	902	902
480.7B	FTVAL	The financial type is invalid. The only values accepted in this field are "C", "D", or "B"	902	902
480.7B	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.7B	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.7B	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7B	RSNREQ	Change reason is required for amended documents.	2455	2494
480.7B	AMDARQ	Amended date is required for amended records.	2495	2500
480.7B	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.7B	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.7B	INVDAT	Date field is invalid.	2495	2500
480.7B.1 (480.7)	71FORM	Form type must be A for form 480.7.1 in 480.7 submission.	13	13
480.7B.1 (480.7)	DOCT10	The reconciliation (480.7.1) document type must be amended for adding or amending file types.	15	15
480.7B.1 (480.7)	DOCT11	The reconciliation (480.7.1) document type must be original for original filing.	15	15
480.7B.1 (480.7)	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7B.1 (480.7)	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7B.1 (480.7)	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	27	27
480.7B.1 (480.7)	INVIDT	The Identification Number type is incorrect.	27	27
480.7B.1 (480.7)	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	48	56
480.7B.1 (480.7)	NAMREQ	Name is required.	87	116



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1	PHOREQ	Phone number is required.	117	126
(480.7)	11101124	Thomas namber is required.	11,	120
480.7B.1	STRLEN	Address street must be at least 4 characters	127	161
(480.7)	J T T T T T T T T T T T T T T T T T T T	long	12,	101
480.7B.1	STRREQ	Address street is required	127	161
(480.7)	31111124	, taaress street is required	12,	101
480.7B.1	STRLEN	Address street must be at least 4 characters	162	196
(480.7)	J T T T T T T T T T T T T T T T T T T T	long	102	130
480.7B.1	CITLEN	Address city must be at least 2 characters long	197	209
(480.7)	0	The second of th		
480.7B.1	CITREQ	Address city is required	197	209
(480.7)	0	7.00.000 0.0 7 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.		
480.7B.1	INVCIT	City name is invalid. Value must contain	197	209
(480.7)		alphanumeric characters only, no special		
(12011)		characters.		
480.7B.1	STAREQ	Address state is required	210	211
(480.7)				
480.7B.1	ZIPLEN	Address zip code length is invalid. Must be 5	212	216
(480.7)		digits long.		
480.7B.1	ZIPREQ	Address zip is required.	212	216
(480.7)	,	·		
480.7B.1	ZEXLEN	Address zip code extension length is invalid. If	217	220
(480.7)		provided it must be 4 digits long.		
480.7B.1	STRLEN	Address street must be at least 4 characters	223	257
(480.7)		long		
480.7B.1	STRREQ	Address street is required	223	257
(480.7)				
480.7B.1	STRLEN	Address street must be at least 4 characters	258	292
(480.7)		long		
480.7B.1	CITLEN	Address city must be at least 2 characters long	293	305
(480.7)				
480.7B.1	CITREQ	Address city is required	293	305
(480.7)				
480.7B.1	INVCIT	City name is invalid. Value must contain	293	305
(480.7)		alphanumeric characters only, no special		
		characters.		
480.7B.1	STAREQ	Address state is required	306	307
(480.7)				
480.7B.1	ZIPLEN	Address zip code length is invalid. Must be 5	308	312
(480.7)		digits long.		
480.7B.1	ZIPREQ	Address zip is required.	308	312
(480.7)				
480.7B.1	ZEXLEN	Address zip code extension length is invalid. If	313	316
(480.7)		provided it must be 4 digits long.		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	368	379
(480.7)		or commas		
480.7B.1	WITH7	The total amount paid in the reconciliation is	368	379
(480.7)		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		withheld from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount withheld from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
400 70 4	1818/81118/4	deleted records.	200	204
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	380	391
(480.7) 480.7B.1	WITH7	Or commas The total amount paid in the reconciliation is	380	391
(480.7)	VVIIII/	The total amount paid in the reconciliation is incorrect. If this is the original submission the	380	391
(460.7)		value must be equal to the sum of the amount		
		withheld from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount withheld from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
		deleted records.		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	392	403
(480.7)		or commas		
480.7B.1	WITH7	The total amount paid in the reconciliation is	392	403
(480.7)		incorrect. If this is the original submission the		
		value must be equal to the sum of the amount		
		withheld from each informative. If adding		
		informatives, the value must be equal to the		
		sum of the amount withheld from each added		
		informative plus the total from the original		
		submission. If amending it must equal the		
		value from the original submission plus or		
		minus the difference from amended or		
400 70 4	101/01/104	deleted records.	404	445
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	404	415
(480.7)		or commas		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1 (480.7)	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	404	415
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	416	427
(480.7) 480.7B.1 (480.7)	WITH7	or commas The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	416	427
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas	428	439
480.7B.1 (480.7)	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	428	439
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	440	451
(480.7)	\A/ITI 117	or commas The total tax withheld value is incorrect. It	440	454
480.7B.1 (480.7)	WITH17	must be equal to the sum of all types of tax withheld.	440	451
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas	452	461



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1	TOTFRM	The total form count does not match the	452	461
(480.7)		number of informatives submitted for this		
		account and filing period.		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	462	473
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	462	473
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	474	485
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	474	485
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	486	497
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	486	497
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	498	509
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	498	509
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	510	521
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	510	521
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	522	533
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	522	533
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	534	545
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	534	545
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	546	557
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	546	557
(480.7)	51.4051.0	or commas	550	5.00
480.7B.1	EMPFLD	Field should be empty (blank or filled with	558	569
(480.7)	1813 /811 18 4	zeros)	550	5.00
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	558	569
(480.7)	ENADEL D	or commas	F.70	F04
480.7B.1	EMPFLD	Field should be empty (blank or filled with	570	581
(480.7)	1017/011/10/2	zeros)	F.70	F04
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	570	581
(480.7)		or commas	500	500
480.7B.1	EMPFLD	Field should be empty (blank or filled with	582	593
(480.7)		zeros)		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	582	593
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	594	605
(480.7)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	594	605
(480.7)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	606	617
(480.7)	1815 /811 18 4	zeros)	505	647
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	606	617
(480.7) 480.7B.1	WITH5	or commas The total withheld amount for Part 2 must	606	617
(480.7)	WIIHS	equal the sum of amounts withheld for each	606	617
(460.7)		month.		
480.7B.1	WITH6	The total withheld amount in Part 2 must	606	617
(480.7)		match the total withheld amount from Part 1.		
480.7B.1	WITH6	The total withheld amount in Part 2 must	606	617
(480.7)		match the total withheld amount from Part 1.		
480.7B.1	7B1FRM	Form type must be B for form 480.7B.1 in	13	13
(480.7B)	75211111	480.7B submission.	10	13
480.7B.1	DOCT12	The reconciliation (480.7B.1) document type	15	15
(480.7B)		must be amended for adding or amending file		
		types.		
480.7B.1	DOCT13	The reconciliation (480.7B.1) document type	15	15
(480.7B)		must be original for original filing.		
480.7B.1	DOCTY1	Invalid file type. The only values allowed in	15	15
(480.7B)		this field are 'O' (Original), 'A' (Amend), or 'X'		
		(Remove).		
480.7B.1	INVTXY	Tax year is invalid or does not belong to the	18	21
(480.7B)		selected period.		
480.7B.1	ID13	Incorrect Withholding Agent ID type. If the ID	27	27
(480.7B)		is a FEIN, the value must be '1'. If it is a SSN,		
480.7B.1	INVIDT	the value must be '2'. The Identification Number type is incorrect.	27	27
(480.7B.1	וטוטוו	The identification Number type is incorrect.	27	27
480.7B)	WITHID	The Withholding Agent Identification Number	48	56
(480.7B)	VVIIIID	must match the Identification Number in the	40	30
(400.75)		'PA' record.		
480.7B.1	NAMREQ	Name is required.	87	116
(480.7B)				
480.7B.1	PHOREQ	Phone number is required.	117	126
(480.7B)		·		
480.7B.1	STRLEN	Address street must be at least 4 characters	127	161
(480.7B)		long		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1 (480.7B)	STRREQ	Address street is required	127	161
480.7B.1	STRLEN	Address street must be at least 4 characters	162	196
(480.7B)		long		
480.7B.1 (480.7B)	CITLEN	Address city must be at least 2 characters long	197	209
480.7B.1 (480.7B)	CITREQ	Address city is required	197	209
480.7B.1 (480.7B)	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	197	209
480.7B.1 (480.7B)	STAREQ	Address state is required	210	211
480.7B.1 (480.7B)	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	212	216
480.7B.1 (480.7B)	ZIPREQ	Address zip is required.	212	216
480.7B.1 (480.7B)	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	217	220
480.7B.1 (480.7B)	STRLEN	Address street must be at least 4 characters long	223	257
480.7B.1 (480.7B)	STRREQ	Address street is required	223	257
480.7B.1 (480.7B)	STRLEN	Address street must be at least 4 characters long	258	292
480.7B.1 (480.7B)	CITLEN	Address city must be at least 2 characters long	293	305
480.7B.1 (480.7B)	CITREQ	Address city is required	293	305
480.7B.1 (480.7B)	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	293	305
480.7B.1 (480.7B)	STAREQ	Address state is required	306	307
480.7B.1 (480.7B)	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	308	312
480.7B.1 (480.7B)	ZIPREQ	Address zip is required.	308	312
480.7B.1 (480.7B)	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	313	316
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas	368	379



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1 (480.7B)	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	368	379
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	380	391
(480.7B) 480.7B.1 (480.7B)	WITH7	or commas The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	380	391
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas	392	403
480.7B.1 (480.7B)	WITH17	The total tax withheld value is incorrect. It must be equal to the sum of all types of tax withheld.	392	403
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas	404	413
480.7B.1 (480.7B)	TOTFRM	The total form count does not match the number of informatives submitted for this account and filing period.	404	413
480.7B.1 (480.7B)	EMPFLD	Field should be empty (blank or filled with zeros)	414	425
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas	414	425
480.7B.1 (480.7B)	EMPFLD	Field should be empty (blank or filled with zeros)	426	437
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas	426	437
480.7B.1 (480.7B)	EMPFLD	Field should be empty (blank or filled with zeros)	438	449



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	438	449
(480.7B)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	450	461
(480.7B)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	450	461
(480.7B)	51 4D51 D	or commas	460	470
480.7B.1	EMPFLD	Field should be empty (blank or filled with	462	473
(480.7B)	1813/81118/4	zeros)	162	170
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	462	473
(480.7B)	EN ADEL D	or commas	474	405
480.7B.1	EMPFLD	Field should be empty (blank or filled with	474	485
(480.7B)	1813 /811 18 4	zeros)	474	405
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	474	485
(480.7B)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	486	497
(480.7B)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	486	497
(480.7B)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	498	509
(480.7B)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	498	509
(480.7B)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	510	521
(480.7B)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	510	521
(480.7B)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	522	533
(480.7B)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	522	533
(480.7B)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	534	545
(480.7B)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	534	545
(480.7B)		or commas		
480.7B.1	EMPFLD	Field should be empty (blank or filled with	546	557
(480.7B)		zeros)		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	546	557
(480.7B)		or commas		
480.7B.1	INVNUM	Field must be numeric with no signs, decimals,	558	569
(480.7B)		or commas		
480.7B.1	WITH5	The total withheld amount for Part 2 must	558	569
(480.7B)		equal the sum of amounts withheld for each		
		month.		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7B.1 (480.7B)	WITH6	The total withheld amount in Part 2 must match the total withheld amount from Part 1.	558	569
480.7C	CONTN1	The Control Number is required. Make sure	2	10
480.7C	CONTN1	the field is not blank. The Control Number is required. Make sure the field is not blank.	2	10
480.7C	CONTN2	You must provide a unique control number. Control numbers must have 9 digits and be unique for the employer, form type, and fiscal year.	2	10
480.7C	CONTN3	The control number must be numeric.	2	10
480.7C	CONTN4	The control number must be 9 digits in length.	2	10
480.7C	CONTN6	You can not sure the interval (900000000-99999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	11	11
480.7C	INVIDT	The Identification Number type is incorrect.	11	11
480.7C	INVIDT	The Identification Number type is incorrect.	11	11
480.7C	7CRESI	At least one 480.7C detail record (Resident Type 1, 2 or 3) is required for submission.	12	12
480.7C	7CFORM	Form type must be Y for 480.7C submission.	13	13
480.7C	DOCT16	You cannot add amended documents to the request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send amended documents; only amend the reconciliation or summary forms.	15	15
480.7C	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7C	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7C	DUPREC	The payee has a duplicate registration.	15	15
480.7C	DUPREC	The payee has a duplicate registration.	15	15
480.7C	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.7C	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7C	ID11	Incorrect Employer ID type. If the Employer ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	31	31
480.7C	INVIDT	The Identification Number type is incorrect.	31	31
480.7C	PAYID	The Payer Identification Number must match the Identification Number in the 'PA' record.	32	40
480.7C	NAMREQ	Name is required.	41	70
480.7C	STRLEN	Address street must be at least 4 characters long	71	105
480.7C	STRREQ	Address street is required	71	105
480.7C	STRLEN	Address street must be at least 4 characters long	106	140
480.7C	CITLEN	Address city must be at least 2 characters long	141	153
480.7C	CITREQ	Address city is required	141	153
480.7C	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.7C	STAREQ	Address state is required	154	155
480.7C	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7C	ZIPREQ	Address zip is required.	156	160
480.7C	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.7C	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.7C	EIN2	Invalid EIN	167	175
480.7C	EIN2	Invalid EIN	167	175
480.7C	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.7C	ITIN	Invalid ITIN (Taxpayer's personal identification number)	167	175
480.7C	SSN2	Invalid SSN	167	175
480.7C	NAMREQ	Name is required.	196	225
480.7C	NAMREQ	Name is required.	196	225
480.7C	NAMREQ	Name is required.	196	225
480.7C	STRLEN	Address street must be at least 4 characters long	226	260
480.7C	STRREQ	Address street is required	226	260



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C	STRLEN	Address street must be at least 4 characters long	261	295
480.7C	STAREQ	Address state is required	309	310
480.7C	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	311	315
480.7C	ZIPREQ	Address zip is required.	311	315
480.7C	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	316	319
480.7C	DIST11	The form of distribution is required.	321	321
480.7C	DIST12	The form of distribution is invalid. The only values accepted in this field are "L", "A", or "P"	321	321
480.7C	DIST13	The form of distribution is invalid. The only values accepted in this field are "L", "E", or "P"	321	321
480.7C	PLTY1	Plan type is invalid. The only values accepted in this field are "G", "P", or "N".	322	322
480.7C	PLTY2	Plan type is invalid. The only values accepted in this field are "G", "A", "P", or "N".	322	322
480.7C	PLTY3	Plan type is invalid. The only values accepted in this field are "G", "A", "V", "P", or "N".	322	322
480.7C	PLTYRQ	Plan type is required.	322	322
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	323	334
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	335	346
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	347	358
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	359	370
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	371	382
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	383	394
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	395	406
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	407	418
480.7C	DIST1	The total amount distributed must equal the sum of the individual distribution type amounts	419	430
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	419	430



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C	INVNUM	Field must be numeric with no signs, decimals,	431	442
		or commas		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	443	454
		or commas		
480.7C	EMPFLD	Field should be empty (blank or filled with	479	490
		zeros)		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	479	490
		or commas		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	491	502
		or commas		
480.7C	EMPFLD	Field should be empty (blank or filled with	503	514
		zeros)		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	503	514
	51074	or commas		
480.7C	DIST1	The total amount distributed must equal the	515	526
		sum of the individual distribution type		
400.70	ENABELD	amounts	F4F	F26
480.7C	EMPFLD	Field should be empty (blank or filled with	515	526
480.7C	INVNUM	zeros)	515	526
460.70	IINVINOIVI	Field must be numeric with no signs, decimals, or commas	313	320
480.7C	DIST10	The distribution code is invalid. The only	527	527
480.70	013110	values accepted in this field are A, B, C, D, E, F,	327	327
		G, H, I, J, K, L, M, or N.		
480.7C	DIST8	The distribution code is required.	527	527
480.7C	DIST9	The distribution code is invalid. The only	527	527
400.70	DISTS	values accepted in this field are A, B, C, D, E, F,	327	327
		G, H, I, J, K, or L		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	528	539
		or commas	3 - 3	
480.7C	INVNUM	Field must be numeric with no signs, decimals,	540	551
		or commas		
480.7C	EMPFLD	Field should be empty (blank or filled with	552	563
		zeros)		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	552	563
		or commas		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	564	575
		or commas		
480.7C	EMPFLD	Field should be empty (blank or filled with	576	587
		zeros)		
480.7C	INVNUM	Field must be numeric with no signs, decimals,	576	587
		or commas		
480.7C	EMPFLD	Field should be empty (blank or filled with	588	599
		zeros)		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	588	599
480.7C	DIST14	The other distribution code is invalid. The only values accepted in this field are A, B, C, D, E, F, G, H, I, J, K, L, or M.	600	600
480.7C	DIST15	The other distribution code must be 'N'.	600	600
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	600	600
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.7C	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.7C	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.7C	LNREQ2	Last name is required if first name is provided.	792	811
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	812	831
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	832	843
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	832	843
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	844	855
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	844	855
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	856	864
480.7C	ID2	The Identification Number is not a valid SSN or EIN.	856	864
480.7C	ID5	Employer ID is required.	856	864
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	865	904
480.7C	PLNARQ	Plan name is required.	865	904
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	905	944
480.7C	SPNARQ	Sponsor name is required.	905	944
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	945	956
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	945	956
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	957	968



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	957	968
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	969	980
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	969	980
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	981	992
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	981	992
480.7C	DIST6	Total eligible distributions for reason of extreme economic emergency due to Hurricane Maria is incorrect. The value needs to equal the sum of individual distribution types for Hurricane Maria.	993	1004
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	993	1004
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	993	1004
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	1005	1016
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	1005	1016
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	1017	1028
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	1017	1028
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	2414	2425
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas	2426	2437
480.7C	INVDA3	Invalid pension start date. Date must be greater than 1/1/1900 and cannot be after the end of the filing tax year.	2438	2445
480.7C	INVDAT	Date field is invalid.	2438	2445
480.7C	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.7C	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.7C	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7C	RSNREQ	Change reason is required for amended documents.	2455	2494
480.7C	AMDARQ	Amended date is required for amended records.	2495	2500
480.7C	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.7C	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.7C	INVDAT	Date field is invalid.	2495	2500
480.7C.1	7C1FRM	Form type must be R for form 480.7C.1 in 480.7C submission.	13	13
480.7C.1	DOCT14	The reconciliation (480.7C.1) document type must be amended for adding or amending file types.	15	15
480.7C.1	DOCT15	The reconciliation (480.7C.1) document type must be original for original filing.	15	15
480.7C.1	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7C.1	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7C.1	ID13	Incorrect Withholding Agent ID type. If the ID is a FEIN, the value must be '1'. If it is a SSN, the value must be '2'.	27	27
480.7C.1	INVIDT	The Identification Number type is incorrect.	27	27
480.7C.1	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	48	56
480.7C.1	NAMREQ	Name is required.	87	116
480.7C.1	PHOREQ	Phone number is required.	117	126
480.7C.1	STRLEN	Address street must be at least 4 characters long	127	161
480.7C.1	STRREQ	Address street is required	127	161
480.7C.1	STRLEN	Address street must be at least 4 characters long	162	196



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C.1	CITLEN	Address city must be at least 2 characters long	197	209
480.7C.1	CITREQ	Address city is required	197	209
480.7C.1	INVCIT	City name is invalid. Value must contain	197	209
		alphanumeric characters only, no special		
		characters.		
480.7C.1	STAREQ	Address state is required	210	211
480.7C.1	ZIPLEN	Address zip code length is invalid. Must be 5	212	216
400.76.4	710050	digits long.	242	216
480.7C.1	ZIPREQ	Address zip is required.	212	216
480.7C.1	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	217	220
480.7C.1	STRLEN	Address street must be at least 4 characters	223	257
		long		
480.7C.1	STRREQ	Address street is required	223	257
480.7C.1	STRLEN	Address street must be at least 4 characters long	258	292
480.7C.1	CITLEN	Address city must be at least 2 characters long	293	305
480.7C.1	CITREQ	Address city is required	293	305
480.7C.1	INVCIT	City name is invalid. Value must contain	293	305
		alphanumeric characters only, no special characters.		
480.7C.1	STAREQ	Address state is required	306	307
480.7C.1	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	308	312
480.7C.1	ZIPREQ	Address zip is required.	308	312
480.7C.1	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	313	316
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	368	379
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	368	379
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	380	391



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	380	391
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	392	403
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	392	403
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	404	415
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	404	415
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	416	427



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	416	427
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	428	439
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	428	439
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	440	451
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	440	451
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	452	463



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	452	463
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	464	475
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	464	475
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	476	487
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	476	487
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	488	499



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	488	499
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	500	511
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be equal to the sum of the amount withheld from each informative. If adding informatives, the value must be equal to the sum of the amount withheld from each added informative plus the total from the original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.	500	511
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	512	523
480.7C.1	WITH17	The total tax withheld value is incorrect. It must be equal to the sum of all types of tax withheld.	512	523
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	524	533
480.7C.1	TOTFRM	The total form count does not match the number of informatives submitted for this account and filing period.	524	533
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	534	545
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	546	557
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	558	569
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	570	581
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	582	593



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7C.1	INVNUM	Field must be numeric with no signs, decimals,	594	605
		or commas		
480.7C.1	INVNUM	Field must be numeric with no signs, decimals,	606	617
		or commas		
480.7C.1	INVNUM	Field must be numeric with no signs, decimals,	618	629
		or commas		
480.7C.1	INVNUM	Field must be numeric with no signs, decimals,	630	641
		or commas		
480.7C.1	INVNUM	Field must be numeric with no signs, decimals,	642	653
100 70 1		or commas		
480.7C.1	INVNUM	Field must be numeric with no signs, decimals,	654	665
400.76.4	1815/81118/4	or commas		677
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas	666	677
480.7C.1	EMPFLD	Field should be empty (blank or filled with	678	689
460.70.1	CIVIFFLD	zeros)	078	009
480.7C.1	INVNUM	Field must be numeric with no signs, decimals,	678	689
400.7 C.1	1144140141	or commas	070	003
480.7C.1	WITH5	The total withheld amount for Part 2 must	678	689
1		equal the sum of amounts withheld for each		
		month.		
480.7C.1	WITH6	The total withheld amount in Part 2 must	678	689
		match the total withheld amount from Part 1.		
480.7D	CONTN1	The Control Number is required. Make sure	2	10
		the field is not blank.		
480.7D	CONTN1	The Control Number is required. Make sure	2	10
		the field is not blank.		
480.7D	CONTN2	You must provide a unique control number.	2	10
		Control numbers must have 9 digits and be		
		unique for the employer, form type, and fiscal		
400 75	CONTNIC	year.		10
480.7D	CONTN3	The control number must be numeric.	2	10
480.7D	CONTN4	The control number must be 9 digits in length.	2	10
480.7D	CONTN6	You can not sure the interval (900000000-	2	10
		99999999); it is reserved for control numbers		
400.75	EN ADEL D	automatically assigned in SURI.	4.4	4.4
480.7D	EMPFLD	Field should be empty (blank or filled with	11	11
480.7D	INVID1	zeros) The payer ID type must be "2" if the payer	11	11
400.70	דחואווו	type is "I" (individual).		11
480.7D	INVID2	The payer ID type must be "1" if the payer	11	11
700.70	1144102	type is "P" (partnership), "C" (corporation), or		
		"O" (other).		
480.7D	7DFORM	Form type must be Z for 480.7D submission.	13	13



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7D	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7D	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7D	DUPREC	The payee has a duplicate registration.	15	15
480.7D	DUPREC	The payee has a duplicate registration.	15	15
480.7D	RECNF	There is no document with the indicated Control Number. It cannot be removed. Verify that the Control Number is indicated for the original document you want to remove.	15	15
480.7D	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7D	ID15	The payee ID type is incorrect. If payee ID is FEIN the value should be '1' and if the payee ID is an SSN the value should be '2'.	31	31
480.7D	INVIDT	The Identification Number type is incorrect.	31	31
480.7D	PAYID	The Payer Identification Number must match the Identification Number in the 'PA' record.	32	40
480.7D	NAMREQ	Name is required.	41	70
480.7D	STRLEN	Address street must be at least 4 characters long	71	105
480.7D	STRREQ	Address street is required	71	105
480.7D	STRLEN	Address street must be at least 4 characters long	106	140
480.7D	STAREQ	Address state is required	154	155
480.7D	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7D	ZIPREQ	Address zip is required.	156	160
480.7D	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.7D	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number and then submit an original document with the correct Identification Number.	167	175
480.7D	EIN2	Invalid EIN	167	175
480.7D	EIN2	Invalid EIN	167	175
480.7D	SSN2	Invalid SSN	167	175
480.7D	PAYTY1	Payer type is required.	176	176



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7D	PAYTY2	Payer type is invalid. The only values accepted in this field are "I" (individual), "P" (partnership), "C" (corporation), "O" (other)	176	176
480.7D	PAYTY3	The payer type must be "I" Individual) if the payer ID type is "2" (individual).	176	176
480.7D	PAYTY4	The payer type can't be "I" (individual) if the payer ID type is "1" (corporation).	176	176
480.7D	NAMREQ	Name is required.	197	226
480.7D	NAMREQ	Name is required.	197	226
480.7D	NAMREQ	Name is required.	197	226
480.7D	STRLEN	Address street must be at least 4 characters long	227	261
480.7D	STRREQ	Address street is required	227	261
480.7D	STRLEN	Address street must be at least 4 characters long	262	296
480.7D	CITLEN	Address city must be at least 2 characters long	297	309
480.7D	CITREQ	Address city is required	297	309
480.7D	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	297	309
480.7D	STAREQ	Address state is required	310	311
480.7D	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	312	316
480.7D	ZIPREQ	Address zip is required.	312	316
480.7D	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	317	320
480.7D	ACCNUM	Account number is required.	322	341
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	322	341
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	322	341
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	342	353
480.7D	PAYRC1	Payment received value must be greater than 0	342	353
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	354	365



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	354	365
480.7D	ACCNUM	Account number is required.	366	385
480.7D	DUPACC	Duplicate account number found. The account	366	385
		number must be unique for every informative in the submission. If adding more informatives		
		the account number cannot be a duplicate of one already submitted.		
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	366	385
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	386	397
480.7D	PAYRC1	Payment received value must be greater than 0	386	397
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	398	409
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	398	409
480.7D	ACCNUM	Account number is required.	410	429
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	410	429
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	410	429
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	430	441
480.7D	PAYRC1	Payment received value must be greater than 0	430	441
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	442	453
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	442	453
480.7D	ACCNUM	Account number is required.	454	473



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION
				ТО
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	454	473
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	454	473
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	474	485
480.7D	PAYRC1	Payment received value must be greater than 0	474	485
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	486	497
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	486	497
480.7D	ACCNUM	Account number is required.	498	517
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	498	517
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	498	517
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	518	529
480.7D	PAYRC1	Payment received value must be greater than 0	518	529
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	530	541
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	530	541
480.7D	ACCNUM	Account number is required.	542	561
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	542	561



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	542	561
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	562	573
480.7D	PAYRC1	Payment received value must be greater than 0	562	573
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	574	585
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	574	585
480.7D	ACCNUM	Account number is required.	586	605
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	586	605
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	586	605
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	606	617
480.7D	PAYRC1	Payment received value must be greater than 0	606	617
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	618	629
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	618	629
480.7D	ACCNUM	Account number is required.	630	649
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	630	649
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	630	649



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	650	661
480.7D	PAYRC1	Payment received value must be greater than 0	650	661
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	662	673
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	662	673
480.7D	ACCNUM	Account number is required.	674	693
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	674	693
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	674	693
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	694	705
480.7D	PAYRC1	Payment received value must be greater than 0	694	705
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	706	717
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	706	717
480.7D	ACCNUM	Account number is required.	718	737
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	718	737
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informatives the account number cannot be a duplicate of one already submitted.	718	737
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	738	749
480.7D	PAYRC1	Payment received value must be greater than 0	738	749
480.7D	INTPA1	Value for payment that constitutes interest must be greater than 0	750	761



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas	750	761
480.7D	EMPFLD	Field should be empty (blank or filled with zeros)	762	776
480.7D	FNBLK	First name should be blank for corporations (ID Type "1")	762	776
480.7D	FNREQ	First name is required for individual ID types.	762	776
480.7D	EMPFLD	Field should be empty (blank or filled with zeros)	777	791
480.7D	EMPFLD	Field should be empty (blank or filled with zeros)	792	811
480.7D	LNBLK	Last name should be blank for corporations (ID Type "1")	792	811
480.7D	LNREQ1	Last name is required for Individuals (ID Type "2")	792	811
480.7D	LNREQ2	Last name is required if first name is provided.	792	811
480.7D	EMPFLD	Field should be empty (blank or filled with zeros)	812	831
480.7D	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.7D	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.7D	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.7D	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7D	RSNREQ	Change reason is required for amended documents.	2455	2494
480.7D	AMDARQ	Amended date is required for amended records.	2495	2500
480.7D	EMPFLD	Field should be empty (blank or filled with zeros)	2495	2500
480.7D	INVDA2	Amending date is invalid. Date must be greater than 1/1/1900 and cannot be in the future.	2495	2500
480.7D	INVDAT	Date field is invalid.	2495	2500



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7E	CONTN1	The Control Number is required. Make sure	2	10
		the field is not blank.		
480.7E	CONTN1	The Control Number is required. Make sure	2	10
		the field is not blank.		
480.7E	CONTN2	You must provide a unique control number.	2	10
		Control numbers must have 9 digits and be unique for the employer, form type, and fiscal		
		year.		
480.7E	CONTN3	The control number must be numeric.	2	10
480.7E	CONTN4	The control number must be 9 digits in length.	2	10
480.7E	CONTN6	You can not sure the interval (900000000-	2	10
100.72	CONTINO	99999999); it is reserved for control numbers	_	10
		automatically assigned in SURI.		
480.7E	INVIDT	The Identification Number type is incorrect.	11	11
480.7E	7EFORM	Form type must be K for 480.7E submission.	13	13
480.7E	DOCT16	You cannot add amended documents to the	15	15
		request unless it is a reconciliation registration		
		or summary. Verify that, if the file type is 'A'		
		(Add), you cannot send amended documents;		
		only amend the reconciliation or summary		
480.7E	DOCTY1	forms.	1.5	15
480.7E	DOCIYI	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X'	15	15
		(Remove).		
480.7E	DOCTY2	You cannot use file type 'A' (Amended) or 'X'	15	15
		(Removed) when you are submitting an 'O' file		
		type (Original or Add).		
480.7E	DUPREC	The payee has a duplicate registration.	15	15
480.7E	DUPREC	The payee has a duplicate registration.	15	15
480.7E	RECNF	There is no document with the indicated	15	15
		Control Number. It cannot be removed. Verify		
		that the Control Number is indicated for the		
100.75	1813 (T) (A)	original document you want to remove.	40	24
480.7E	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7E	PAYID	The Payer Identification Number must match	32	40
400.72	IAIID	the Identification Number in the 'PA' record.	32	40
480.7E	NAMREQ	Name is required.	41	70
480.7E	STRLEN	Address street must be at least 4 characters	71	105
700.7L	JINLLIN	long	, ,	103
480.7E	STRREQ	Address street is required	71	105
480.7E	STRLEN	Address street must be at least 4 characters	106	140
		long		



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.7E	CITLEN	Address city must be at least 2 characters long	141	153
480.7E	CITREQ	Address city is required	141	153
480.7E	INVCIT	City name is invalid. Value must contain	141	153
		alphanumeric characters only, no special		
		characters.		
480.7E	STAREQ	Address state is required	154	155
480.7E	ZIPLEN	Address zip code length is invalid. Must be 5	156	160
		digits long.		
480.7E	ZIPREQ	Address zip is required.	156	160
480.7E	ZEXLEN	Address zip code extension length is invalid. If	161	164
		provided it must be 4 digits long.		
480.7E	AMNDID	You cannot change the Identification Number	167	175
		of an amended document. You must remove		
		the document with the incorrect Identification		
		Number and then submit an original document with the correct Identification		
		Number.		
480.7E	EIN2	Invalid EIN	167	175
480.7E	EIN2	Invalid EIN	167	175
480.7E	ID2	The Identification Number is not a valid SSN or	167	175
		EIN.		
480.7E	SSN2	Invalid SSN	167	175
480.7E	NAMREQ	Name is required.	176	205
480.7E	STRLEN	Address street must be at least 4 characters	206	240
		long		
480.7E	STRREQ	Address street is required	206	240
480.7E	STRLEN	Address street must be at least 4 characters	241	275
		long		
480.7E	CITLEN	Address city must be at least 2 characters long	276	288
480.7E	CITREQ	Address city is required	276	288
480.7E	INVCIT	City name is invalid. Value must contain	276	288
		alphanumeric characters only, no special		
480.7E	STAREQ	characters. Address state is required	289	290
480.7E	ZIPLEN	Address zip code length is invalid. Must be 5		295
400.76	ZIPLEIN	digits long.	291	295
480.7E	ZIPREQ	Address zip is required.	291	295
480.7E	ZEXLEN	Address zip code extension length is invalid. If	296	299
100.7		provided it must be 4 digits long.	250	233
480.7E	FNBLK	First name should be blank for corporations	300	314
100.7	. NOLK	(ID Type "1")		314
480.7E	FNREQ	First name is required for individual ID types.	300	314



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
			_	
480.7E	LNBLK	Last name should be blank for corporations (ID Type "1")	330	349
480.7E	LNREQ1	Last name is required for Individuals (ID Type "2")	330	349
480.7E	LNREQ2	Last name is required if first name is provided.	330	349
480.7E	INVNUM	Field must be numeric with no signs, decimals, or commas	370	384
480.7E	INVNUM	Field must be numeric with no signs, decimals, or commas	385	399
480.7E	INVNUM	Field must be numeric with no signs, decimals, or commas	400	414
480.7E	INVNUM	Field must be numeric with no signs, decimals, or commas	415	429
480.7E	INVNUM	Field must be numeric with no signs, decimals, or commas	430	444
480.7E	INVNUM	Field must be numeric with no signs, decimals, or commas	445	459
480.7E	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros)	2446	2454
480.7E	OCNMTC	The Original Control Number value must match the Control Number value for the Removed document type. Verify that the Original Control Number is indicated in the document you want to remove.	2446	2454
480.7E	OCNREQ	Original Control Number required. This must be different from the Control Number for amended documents. Verify that the Control Number is indicated for the original document that is being amended.	2446	2454
480.7E	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7E	RSNREQ	Change reason is required for amended documents.	2455	2494
480.PA	INVTXY	Tax year is invalid or does not belong to the	3	6
(Payer)		selected period.		
480.PA	ID1	Identification number (ID) is required.	8	16
(Payer)	IDO	The Islandification Number of the IDAL or		4.0
480.PA (Payer)	ID3	The Identification Number in the 'PA' record must match the Identification Number in SURI for the taxpayer and account.	8	16
480.PA (Payer)	6AFORM	Form type must be 2 for 480.6A submission.	17	17



RECORD	CODE	DESCRIPTION	POSITION	POSITION
			FROM	ТО
480.PA	6BFORM	Form type must be 3 for 480.6B submission.	17	17
(Payer)				
480.PA	6CFORM	Form type must be 5 for 480.6C submission.	17	17
(Payer)				
480.PA	6DFORM	Form type must be X for 480.6D submission.	17	17
(Payer)				
480.PA	7AFORM	Form type must be 6 for 480.7A submission.	17	17
(Payer)				
480.PA	7AFORM	Form type must be 6 for 480.7A submission.	17	17
(Payer)				
480.PA	7BFORM	Form type must be 7 for 480.7B submission.	17	17
(Payer)				
480.PA	7CFORM	Form type must be Y for 480.7C submission.	17	17
(Payer)				
480.PA	7DFORM	Form type must be Z for 480.7D submission.	17	17
(Payer)				
480.PA	7DFORM	Form type must be Z for 480.7D submission.	17	17
(Payer)				
480.PA	7FORM	Form type must be 4 for 480.7 submission.	17	17
(Payer)				
480.PA	ESTNUM	The establishment number in the Employer	18	21
(Payer)		Record (PA or RE) does not match the agency		
		ID in SURI for this account.		
480.PA	FILTY1	The file type must be 'O' (Original), 'E'	22	22
(Payer)		(Amended), or 'A'(Add).		
480.PA	FILTY3	An original submission for this employer, filing	22	22
(Payer)		period, and informative type has already been		
		submitted. Any additional files must be type		
		"A" for adding informatives or type "E" for		
		amending.		
480.PA	FILTY4	There is no original submission for this	22	22
(Payer)		employer, filing period, and informative type.		
		Submit an original file before adding or		
		amending one.		
480.PA	NAMREQ	Name is required.	40	96
(Payer)				
480.PA	STRLEN	Address street must be at least 4 characters	97	118
(Payer)		long		
480.PA	STRREQ	Address street is required	97	118
(Payer)				
480.PA	STRLEN	Address street must be at least 4 characters	119	140
(Payer)		long		
480.PA	CITLEN	Address city must be at least 2 characters long	141	162
(Payer)				



RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
400 DA	CITREO	Address site is assuited		
480.PA	CITREQ	Address city is required	141	162
(Payer) 480.PA	INVCIT	City name is invalid. Value must contain	141	162
	INVCII	alphanumeric characters only, no special	141	162
(Payer)		characters.		
480.PA	STAREQ	Address state is required	163	164
(Payer)	SITTLE	Tradicas state is required	103	104
480.PA	ZIPLEN	Address zip code length is invalid. Must be 5	165	169
(Payer)		digits long.	103	103
480.PA	ZIPREQ	Address zip is required.	165	169
(Payer)				
480.PA	ZEXLEN	Address zip code extension length is invalid. If	170	173
(Payer)		provided it must be 4 digits long.		
480.PA	EMLREQ	Contact e-mail address is required.	219	258
(Payer)				
480.PA	ID11	Incorrect Employer ID type. If the Employer ID	259	259
(Payer)		is a FEIN, the value must be '1'. If it is a SSN,		
		the value must be '2'.		
480.PA	INVIDT	The Identification Number type is incorrect.	259	259
(Payer)				
480.SU	ID7	The filer's ID does not match the ID in SURI or	3	11
(Submitter)		there is no active Employer-Representative		
		relationship. Access the SURI homepage		
		(https://suri.hacienda.pr.gov) and select the		
		"Wages Withholding" account. Under the "I		
		Want To" section, select "More options" and		
		then, under the "Services" section, select		
400 CLI	ENAL DE O	"Add Power of Attorney".	425	474
480.SU	EMLREQ	Contact e-mail address is required.	435	474
(Submitter) 480.SU	ID10	The submitter ID type is incorrect. If submitter	490	490
(Submitter)	טוטו	ID is FEIN the value should be '1' and if the	490	490
(Jubililitel)		submitter ID is an SSN the value should be '2'.		
400.511	INDUST		400	400
480.SU	INVIDT	The Identification Number type is incorrect.	490	490
(Submitter)]			

