Government of Puerto Rico

Department of the Treasury

Publication 21-06

Reference Guide
Informative Return Errors
Year 2021

Analysis and Programming Division

Rev. January 21, 2022

Introduction

This guide contains a reference table with the description of possible errors that may occur during the filing process of Informative Returns (Forms 480), according to Publication 21-03, *Developer Guide Informative Returns Electronic Filing Requirements for Tax Year 2021*.

The purpose of this document is to:

- provide 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; and

- 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 Returns can be filed through the Internal Revenue Integrated System ("SURI", for its Spanish acronym) 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 Returns filed through <u>SURI</u>

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

Codigo de error	Mensaje de error	Número de línea	Posición
CONTN3	El Número Control debe ser numérico.	11	356-364
EXCO11	El código de exención A o B para salarios exentos es inválido. Los únicos valores aceptados en este campo	14	243-244
CONTN2	Tiene que proveer un número de control único.	14	356-364
CONTN2	Tiene que proveer un número de control único.	17	356-364

Errores en el anejo — Filtro

4 Filas

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 Returns filed through <u>SFTP</u>

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:

```
Error Detail:
Error Num-Line Error-From to Field-Field and Description of the Error

     1. 477      132  133  STAREQ   Address state is required
     2. 477      134  138  ZIPREQ   Address zip is required.
     3. 479      139  140  STAREQ   Address state is required
     4. 479      141  145  ZIPREQ   Address zip is required.
     5. 681      132  133  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 Returns)

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
480.5	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	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	6GFORM	Form type must be G for 480.6G 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	7EFORM	Form type must be K for 480.7E submission.	13	13
480.5	7FFORM	Form type must be L for 480.7F submission.	13	13
480.5	7FORM	Form type must be 4 for 480.7 submission.	13	13

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.5	7GFORM	Form type must be N for 480.7G submission.	13	13
480.5	SPFORM	Form type must be H for 480.6SP 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 informative included in the submission. If you are adding or amending informative the document count must equal the original document count plus the number of informative being added, and minus	159	168

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		the number of informative being deleted.		
480.5	INVNUM	Field must be numeric with no signs, decimals, or commas.	159	168
480.5	INVNUM	Field must be numeric with no signs, decimals, or commas.	169	183
480.5	WITH18	The total tax withheld in the summary (480.5) must be 0.	169	183
480.5	WITH8	The total amount withheld in the summary must match the sum of the amounts withheld from each informative.	169	183
480.5	INVNUM	Field must be numeric with no signs, decimals, or commas.	184	198
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.5	EMPFLD	Field should be empty (blank or filled with zeros).	2495	2500
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code is required.	182	186
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 code is required.	278	282

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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 informative, 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
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	362	373

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	374	385
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	386	397
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	422	433
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	434	445
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	446	457
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	458	469
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	470	481
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	482	493
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	494	505
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	506	517
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 informative, the value must be equal to the sum of the amount paid from each added informative plus the total from the original submission. If	506	517

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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, or commas.	518	529
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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	542	553
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	554	565
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	590	601
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	602	613

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	614	625
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	626	637
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	638	649
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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 informative, 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.	674	685
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 informative, the value must be equal to the sum of the amount withheld from each added	686	697

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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	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.	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 informative, 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
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 informative, 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	770	781

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		difference from amended or deleted records.		
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	782	793
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	794	805
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	806	817
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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 informative, 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
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	854	865
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 informative, the value must	854	865

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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.		
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	866	877
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	878	889
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	890	901
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	902	913
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	914	925
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	926	937
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 informative, 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.	926	937
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	938	949

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	962	973
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	974	985
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	1010	1021
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 informative, 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	1010	1021

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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, 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 informative, 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.	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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	1106	1117
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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	1130	1141
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	1142	1153
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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.	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	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.	1262	1273
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	1274	1285
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1274	1285
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	1286	1297
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	1334	1345
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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	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.	1406	1417
480.30	INVNUM	Field must be numeric with no signs, decimals, or commas.	1418	1429
480.30	WITH2	Amount withheld cannot be greater than the amount paid.	1418	1429
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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	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.	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	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.	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	1646	1657
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	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.	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	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.	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	1790	1801
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	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.	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.	1862	1873

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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
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 informative, 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.	1874	1885
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	EMPFLD	Field should be empty (blank or filled with zeros).	1910	1921

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	1922	1933
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	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.	1958	1969
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 informative, 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 informative, 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	1970	1981

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		difference from amended or deleted records.		
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	EMPFLD	Field should be empty (blank or filled with zeros).	2006	2017
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	2018	2029
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	2030	2041
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.	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 informative, 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	2210	2221

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		equal to the sum of the amount withheld from each informative. If adding informative, 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.		
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	2234	2245
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	2246	2257
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	2258	2269
480.30	EMPFLD	Field should be empty (blank or filled with zeros).	2270	2281
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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative 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 informative, 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	INVNUM	Field must be numeric with no signs, decimals, or commas.	2316	2327
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 informative, 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.	2316	2327

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	EMPFLD	Field should be empty (blank or filled with zeros).	2495	2500
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 cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
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
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code is required.	156	160
480.6A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
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 Number.	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	MRCCON	There can only be one ID per informative return.	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 informative the	176	195

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		account number cannot be a duplicate of one already submitted.		
480.6A	PNBLK	Company Name should be blank for Individuals (ID Type "2").	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 code is required.	311	315
480.6A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	316	319
480.6A	SVC1	The amount paid for services rendered by individuals cannot be greater than 0 if the payee ID type is "1" (Corporation).	321	332
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	345	356
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	357	368

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	369	380
480.6A	EMPFLD	Field should be empty (blank or filled with zeros).	381	392
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	393	404
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	417	428
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	429	440
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	441	452
480.6A	FNBLK	First name should be blank for corporations (ID Type "1").	762	776
480.6A	FNREQ	First name is required for individual ID types.	762	776
480.6A	LNBLK	Last name should be blank for corporations (ID Type "1").	792	811
480.6A	LNREQ1	Last name is required for Individuals (ID Type "2").	792	811
480.6A	LNBLK	Last name should be blank for corporations (ID Type "1").	812	831
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	EMPFLD	Field should be empty (blank or filled with zeros).	845	845
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	846	857

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	944	955
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	956	967
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	968	979
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	980	991
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	992	1003
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	1004	1015
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	1016	1027
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	1028	1039
480.6A	INVIDT	The Identification Number type is incorrect.	2353	2353
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 Number.	2354	2364
480.6A	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2354	2364
480.6A	EIN2	Invalid EIN.	2354	2364

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6A	ID2	The Identification Number is not a valid SSN or EIN.	2354	2364
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	2354	2364
480.6A	MRCCON	There can only be one ID per informative return.	2354	2364
480.6A	SSN2	Invalid SSN.	2354	2364
480.6A	INVNUM	Field must be numeric with no signs, decimals, or commas.	2365	2375
480.6A	EMLINV	Contact e-mail address is invalid.	2376	2425
480.6A	EMLREQ	Contact e-mail address is required.	2376	2425
480.6A	PHOINV	Invalid phone number combination.	2426	2445
480.6A	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.6A	PHONUM	Phone number must be numerical only.	2426	2445
480.6A	PHOREQ	Phone number is required.	2426	2445
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	2446	2454

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		Number is indicated for the original document that is being amended.		
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	EMPFLD	Field should be empty (blank or filled with zeros).	2495	2500
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 cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.6B	6BFORM	Form type must be 3 for 480.6B submission.	13	13
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code is required.	156	160
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	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 informative the account number cannot be a duplicate of one already submitted.	176	195
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code is required.	311	315
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	EMPFLD	Field should be empty (blank or filled with zeros).	333	342
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	399	408
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
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	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	WCTBLK	The value for waiver certificate should be blank if the waiver type value is blank.	564	583

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B	WCTREQ	A value for waiver certificate is required when a waiver type value is provided.	564	583
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	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	INVNUM	Field must be numeric with no signs, decimals, or commas.	832	843
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	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	854	856

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		not blank or zero, since there is an amount paid for dividends subject to preferential rate under Special Act.		
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	857	868
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	869	880
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas.	881	892
480.6B	INVNUM	Field must be numeric with no signs, decimals, or commas.	893	902
480.6B	WITH1	Amount withheld cannot be 0 if the amount paid is greater than 0.	893	902
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	903	914
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	927	927
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	928	928
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	929	929
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	930	930
480.6B	INVIDT	The Identification Number type is incorrect.	2364	2364
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.	2365	2375

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B	EIN2	Invalid EIN.	2365	2375
480.6B	ID2	The Identification Number is not a valid SSN or EIN.	2365	2375
480.6B	SSN2	Invalid SSN.	2365	2375
480.6B	EMLINV	Contact e-mail address is invalid.	2376	2425
480.6B	EMLREQ	Contact e-mail address is required.	2376	2425
480.6B	PHOINV	Invalid phone number combination.	2426	2445
480.6B	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.6B	PHONUM	Phone number must be numerical only.	2426	2445
480.6B	PHOREQ	Phone number is required.	2426	2445
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6B	EMPFLD	Field should be empty (blank or filled with zeros).	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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code 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 code is required.	308	312

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	EMPFLD	Field should be empty (blank or filled with zeros).	380	391
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	392	403
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	404	415
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	416	427
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	428	439
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	440	451
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	452	463
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	464	475
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	476	487
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	488	499
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	500	511
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	512	523
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	524	535

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	572	583

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	584	595
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	596	607
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	608	619
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	620	631
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	632	643
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	644	655
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	656	667
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	668	679
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	680	691
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	692	703
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	704	715
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	716	727
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	728	739
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	740	751
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	752	763

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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 informative, 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
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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	812	823
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	824	835
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	836	847
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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 informative, 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
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	884	895
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 informative, the value must be equal to the sum of the amount withheld from each added	884	895

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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 zeros).	896	907
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	908	919
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	920	931
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	932	943
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	944	955
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	956	967
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 informative, 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.	956	967
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	968	979

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		original submission the value must be equal to the sum of the amount withheld from each informative. If adding informative, 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 zeros).	980	991
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	992	1003
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	1004	1015
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	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.	1040	1051
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 informative, 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	1040	1051

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		minus the difference from amended or deleted records.		
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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	1076	1087
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	1088	1099
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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	1124	1135

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		informative, 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	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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	1160	1171
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	1172	1183
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	1184	1195
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	1196	1207

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	1244	1255

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	1256	1267
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	1268	1279
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.	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	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.	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	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.	1376	1387

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	EMPFLD	Field should be empty (blank or filled with zeros).	1412	1423
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	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.	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	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.	1520	1531

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	EMPFLD	Field should be empty (blank or filled with zeros).	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	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.	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	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.	1664	1675

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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.	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	EMPFLD	Field should be empty (blank or filled with zeros).	1748	1759
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	1760	1771
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	1772	1783
480.6B.1	WITH2	Amount withheld cannot be greater than the amount paid.	1772	1783
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	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.	1808	1819

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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.	1856	1867
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	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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	EMPFLD	Field should be empty (blank or filled with zeros).	1928	1939

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	1976	1987
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	1988	1999
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 informative, 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.	1988	1999
480.6B.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	2000	2011
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 informative, the value must be equal to the sum of the amount withheld from each added informative plus the total from the	2000	2011

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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 zeros).	2012	2023
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2024	2035
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2036	2047
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2048	2059
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2060	2071
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	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.	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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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	EMPFLD	Field should be empty (blank or filled with zeros).	2132	2143
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2144	2155
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2156	2167
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2168	2179
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	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.	2204	2213

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6B.1	TOTFRM	The total form count does not match the number of informative submitted for this account and filing period.	2204	2213
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 original or delete document types.	2455	2494
480.6B.1	EMPFLD	Field should be empty (blank or filled with zeros).	2495	2500
480.6C	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.6C	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
480.6C	CONTN3	The control number must be numeric.	2	10
480.6C	CONTN4	The control number must be 9 digits in length.	2	10
480.6C	CONTN6	You cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
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 or summary. Verify that, if the file type is 'A' (Add), you cannot send	15	15

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		amended documents; only amend the reconciliation or summary forms.		
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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code 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	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 informative the account number cannot be a duplicate of one already submitted.	176	195
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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.	365	376
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	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.	409	420
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas.	421	430

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	685	696
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	707	718
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	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	LNBLK	Last name should be blank for corporations (ID Type "1").	792	811

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	832	843
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	854	865
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	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	876	878

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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.		
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	882	893
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.	907	907
480.6C	INVNUM	Field must be numeric with no signs, decimals, or commas.	908	919
480.6C	INVIDT	The Identification Number type is incorrect.	2364	2364
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.	2365	2375
480.6C	AMNID	The original Identification Number of an eliminated document has not	2365	2375

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		been found. The original Identification Number must match the Identification Number of the eliminated document.		
480.6C	EIN2	Invalid EIN.	2365	2375
480.6C	ID2	The Identification Number is not a valid SSN or EIN.	2365	2375
480.6C	ITIN	Invalid ITIN (Taxpayer's personal identification number).	2365	2375
480.6C	SSN2	Invalid SSN.	2365	2375
480.6C	EMLINV	Contact e-mail address is invalid.	2376	2425
480.6C	EMLREQ	Contact e-mail address is required.	2376	2425
480.6C	PHOINV	Invalid phone number combination.	2426	2445
480.6C	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.6C	PHONUM	Phone number must be numerical only.	2426	2445
480.6C	PHOREQ	Phone number is required.	2426	2445
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	2446	2454

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		documents. Verify that the Control Number is indicated for the original document that is being amended.		
480.6C	RSNREQ	Change reason is required for amended documents.	2455	2494
480.6C	EMPFLD	Field should be empty (blank or filled with zeros).	2495	2500
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 cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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	NAMREQ	Name is required.	41	70
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6D	ZIPREQ	Address zip code 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	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 informative the account number cannot be a duplicate of one already submitted.	176	195
480.6D	NAMREQ	Name is required.	196	225
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6D	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	311	315
480.6D	ZIPREQ	Address zip code 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	EMPFLD	Field should be empty (blank or filled with zeros).	429	440
480.6D	EMPFLD	Field should be empty (blank or filled with zeros).	441	441
480.6D	EMPFLD	Field should be empty (blank or filled with zeros).	442	442
480.6D	EMPFLD	Field should be empty (blank or filled with zeros).	443	443
480.6D	EMPFLD	Field should be empty (blank or filled with zeros).	445	445

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	497	508
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	509	520
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	521	532
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.	557	568
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	569	580
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.	593	604
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	832	843

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	844	855
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	856	867
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	880	891
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
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	907	918
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	919	930
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	931	942
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	943	954
480.6D	INVNUM	Field must be numeric with no signs, decimals, or commas.	955	966
480.6D	INVIDT	The Identification Number type is incorrect.	2364	2364
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.	2365	2375

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6D	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2365	2375
480.6D	EIN2	Invalid EIN.	2365	2375
480.6D	ID2	The Identification Number is not a valid SSN or EIN.	2365	2375
480.6D	MRCCON	There can only be one ID per informative return.	2365	2375
480.6D	SSN2	Invalid SSN.	2365	2375
480.6D	EMLINV	Contact e-mail address is invalid.	2376	2425
480.6D	EMLREQ	Contact e-mail address is required.	2376	2425
480.6D	PHOINV	Invalid phone number combination.	2426	2445
480.6D	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.6D	PHONUM	Phone number must be numerical only.	2426	2445
480.6D	PHOREQ	Phone number is required.	2426	2445
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
480.6G	CONTN1	The Control Number is required. Make sure 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 unique for the employer, form type, and fiscal year.	2	10
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 cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
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 request unless it is a reconciliation registration or summary. Verify that, if the file type is 'A' (Add), you cannot send	15	15

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		amended documents; only amend the reconciliation or summary forms.		
480.6G	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.6G	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.6G	DUPREC	The payee has a duplicate registration.	15	15
480.6G	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
480.6G	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.6G	PAYID	The Payer Identification Number must match the Identification Number in the 'PA' record.	32	40
480.6G	NAMREQ	Name is required.	41	70
480.6G	STRLEN	Address street must be at least 4 characters long.	71	105
480.6G	STRREQ	Address street is required.	71	105
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code 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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
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 code 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
480.6G	6GTOCD	The total payments processed for credit or debit cards must equal the sum of amounts for each month	650	664

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	650	664
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	665	679
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	680	694
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	695	709
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	710	724
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	725	739
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	740	754
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	755	769
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	770	784
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	785	799
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	800	814
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	815	829
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	830	844
480.6G	6GTOOT	The total payments processed for other transactions must equal the sum of amounts for each month.	845	859
480.6G	INVNUM	Field must be numeric with no signs, decimals, or commas.	845	859

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6G	INVIDT	The Identification Number type is incorrect.	2364	2364
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.	2365	2375
480.6G	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2365	2375
480.6G	EIN2	Invalid EIN.	2365	2375
480.6G	ID2	The Identification Number is not a valid SSN or EIN.	2365	2375
480.6G	MRCCON	There can only be one ID per informative return.	2365	2375
480.6G	SSN2	Invalid SSN.	2365	2375
480.6G	EMLINV	Contact e-mail address is invalid.	2376	2425
480.6G	EMLREQ	Contact e-mail address is required.	2376	2425
480.6G	PHOINV	Invalid phone number combination.	2426	2445
480.6G	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.6G	PHONUM	Phone number must be numerical only.	2426	2445
480.6G	PHOREQ	Phone number is required.	2426	2445
480.6G	OCNBLK	Original control number should not be populated for original documents.	2446	2454

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		Field should be empty (blank or filled with zeros).		
480.6G	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
480.6G	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	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 cannot 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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
480.6SP	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code 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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
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 code 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	INVPAY	ID Type not Valid for type Payment (EIN - Corporation, SSN - Individual)	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	INVPAY	ID Type not Valid for type Payment (EIN - Corporation, SSN - Individual).	333	344
480.6SP	WITH01	Report only one type of payment, withholding payment or non-withholding payment.	333	344

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6SP	WITH05	Only report pay on Corporation or Individual.	333	344
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas.	345	356
480.6SP	INVPAY	ID Type not Valid for type Payment (EIN - Corporation, SSN - Individual).	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 Greater or equal than Amount Paid.	357	366
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas.	367	378
480.6SP	INVPAY	ID Type not Valid for type Payment (EIN - Corporation, SSN - Individual).	367	378
480.6SP	WITH05	Only report pay on Corporation or Individual.	367	378
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas.	379	388
480.6SP	WITH04	Cannot be Greater or equal than Amount Paid.	379	388
480.6SP	EXCO20	Exemption code is invalid. If payment for services rendered by individuals/corporations is Zero.	389	389
480.6SP	EXCOD2	Exemption code is required if debt discharge amount is greater than 0.	389	389
480.6SP	INVCOD	Exemption code is invalid. Value must be "A", "B", "C", "D", "E", "F", "G", "H", "I", "J" or "K".	389	389

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6SP	EXCO20	Exemption code is invalid if payment for services rendered by individuals/corporations is zero.	390	390
480.6SP	EXCOD2	Exemption code is required if debt discharge amount is greater than zero.	390	390
480.6SP	INVCOD	Exemption 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 greater than 0 response required.	391	402
480.6SP	RESP02	If response "Yes" amount required.	391	402
480.6SP	INVNUM	Field must be numeric with no signs, decimals, or commas.	403	414
480.6SP	RESP01	If amount greater than 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	WAILEN	The Waiver Number must be 11 digits in length or more.	434	453
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	SVC6	The indicator is invalid. Use "1" to indicate "Yes", or blank if "No".	454	454
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	INVIDT	The Identification Number type is incorrect.	2364	2364
480.6SP	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with	2365	2375

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		the incorrect Identification Number and then submit an original document with the correct Identification Number.		
480.6SP	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2365	2375
480.6SP	EIN2	Invalid EIN.	2365	2375
480.6SP	ID2	The Identification Number is not a valid SSN or EIN.	2365	2375
480.6SP	SSN2	Invalid SSN.	2365	2375
480.6SP	EMLINV	Contact e-mail address is invalid.	2376	2425
480.6SP	EMLREQ	Contact e-mail address is required.	2376	2425
480.6SP	PHOINV	Invalid phone number combination.	2426	2445
480.6SP	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.6SP	PHONUM	Phone number must be numerical only.	2426	2445
480.6SP	PHOREQ	Phone number is required.	2426	2445
480.6SP	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros).	2446	2454
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code is required.	212	216
480.6SP.2	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	217	220
480.6SP.2	STRLEN	Address street must be at least 4 characters long.	223	257
480.6SP.2	STRREQ	Address street is required.	223	257
480.6SP.2	STRLEN	Address street must be at least 4 characters long.	258	292
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 alphanumeric characters only, no special characters.	293	305
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 code is required.	308	312
480.6SP.2	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	313	316

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas.	324	333
480.6SP.2	TOTFRM	The total form count does not match the number of informative submitted for this account and filing period.	324	333
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas.	334	348
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 informative, 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.	334	348
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas.	349	363
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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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 informative, 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
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	394	408

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		informative, 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, 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 informative, 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 informative, 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	424	438

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		minus the difference from amended or deleted records.		
480.6SP.2	INVNUM	Field must be numeric with no signs, decimals, or commas.	439	453
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 informative, 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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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
480.7	CONTN6	You cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.7	7RESI	At least one 480.7 detail record (Resident Type 1, 2 or 3) is required for submission.	12	12
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
480.7	STAREQ	Address state is required.	154	155

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7	ZIPREQ	Address zip code 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	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 informative the account number cannot be a duplicate of one already submitted.	176	195
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
480.7	ZIPREQ	Address zip code 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	WITH2	Amount withheld cannot be greater than the amount paid.	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
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	WITH2	Amount withheld cannot be greater than the amount paid.	453	464
480.7	WITH20	The amount of interest tax withheld cannot be less than 10% of the amount distributed for taxable interest.	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7	DIST3	The amount distributed of taxable interest cannot be less than the amount withheld from interest.	501	512
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
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).	832	843

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7	EMPFLD	Field should be empty (blank or filled with zeros).	844	855
480.7	EMPFLD	Field should be empty (blank or filled with zeros).	856	867
480.7	EMPFLD	Field should be empty (blank or filled with zeros).	868	879
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	INVIDT	The Identification Number type is incorrect.	2352	2352
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.	2353	2363
480.7	EIN2	Invalid EIN.	2353	2363
480.7	ID2	The Identification Number is not a valid SSN or EIN.	2353	2363
480.7	SSN2	Invalid SSN.	2353	2363
480.7	EMLINV	Contact e-mail address is invalid.	2364	2413
480.7	EMLREQ	Contact e-mail address is required.	2364	2413
480.7	PHOINV	Invalid phone number combination.	2414	2433
480.7	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2414	2433
480.7	PHONUM	Phone number must be numerical only.	2414	2433

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7	PHOREQ	Phone number is required.	2414	2433
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
480.7A	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7A	CONTN4	The control number must be 9 digits in length.	2	10
480.7A	CONTN6	You cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.7A	INVIDT	The Identification Number type is incorrect.	11	11
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	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 FROM	POSITION TO
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 code is required.	156	160
480.7A	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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	STRLEN	Address street must be at least 4 characters long.	206	240
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 code 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	340	351
480.7A	INVSEL	Invalid option, an amount greater than zero is required to validate the selected option.	364	364
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	INVSEL	Invalid option, an amount greater than zero is required to validate the selected option.	377	377
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 FROM	POSITION TO
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	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	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	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	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	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 FROM	POSITION TO
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 code 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	INVIDT	The Identification Number type is incorrect.	2364	2364
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.	2365	2375
480.7A	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2365	2375
480.7A	EIN2	Invalid EIN.	2365	2375
480.7A	ID2	The Identification Number is not a valid SSN or EIN.	2365	2375
480.7A	SSN2	Invalid SSN.	2365	2375
480.7A	EMLINV	Contact e-mail address is invalid.	2376	2425
480.7A	EMLREQ	Contact e-mail address is required.	2376	2425
480.7A	PHOINV	Invalid phone number combination.	2426	2445

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7A	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.7A	PHONUM	Phone number must be numerical only.	2426	2445
480.7A	PHOREQ	Phone number is required.	2426	2445
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	EMPFLD	Field should be empty (blank or filled with zeros).	2495	2500
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	2	10

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		9 digits and be unique for the employer, form type, and fiscal year.		
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
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	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	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	23	31

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7B	NAMREQ	Name is required.	32	61
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 code 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	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 birthday is invalid. Date of birth must be a valid date not in the future.	162	165

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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
480.7B	CITREQ	Address city is required.	270	282
480.7B	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	270	282
480.7B	STAREQ	Address state is required.	283	284
480.7B	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	285	289
480.7B	ZIPREQ	Address zip code is required.	285	289
480.7B	ACCLEN	Account number value must be at least 4 characters long.	290	309
480.7B	ACCNUM	Account number is required.	290	309
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.	311	319

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 EIN.	311	319
480.7B	SSN2	Invalid SSN.	311	319
480.7B	STRLEN	Address street must be at least 4 characters long.	360	394
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 alphanumeric characters only, no special characters.	430	442
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 code is required.	445	449
480.7B	INVNUM	Field must be numeric with no signs, decimals, or commas.	450	456
480.7B	CONT1	Contribution's 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	541	547
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	INVIDT	The Identification Number type is incorrect.	2364	2364
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.	2365	2375
480.7B	EIN2	Invalid EIN.	2365	2375
480.7B	EMLINV	Contact e-mail address is invalid.	2376	2425
480.7B	EMLREQ	Contact e-mail address is required.	2376	2425
480.7B	PHOINV	Invalid phone number combination.	2426	2445
480.7B	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.7B	PHONUM	Phone number must be numerical only.	2426	2445
480.7B	PHOREQ	Phone number is required.	2426	2445
480.7B	OCNBLK	Original control number should not be populated for original documents.	2446	2454

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		Field should be empty (blank or filled with zeros).		
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.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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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
480.7B.1 (480.7)	PHOREQ	Phone number is required.	117	126
480.7B.1 (480.7)	STRLEN	Address street must be at least 4 characters long.	127	161
480.7B.1 (480.7)	STRREQ	Address street is required.	127	161
480.7B.1 (480.7)	STRLEN	Address street must be at least 4 characters long.	162	196
480.7B.1 (480.7)	CITLEN	Address city must be at least 2 characters long.	197	209
480.7B.1 (480.7)	CITREQ	Address city is required.	197	209
480.7B.1 (480.7)	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	197	209
480.7B.1 (480.7)	STAREQ	Address state is required.	210	211
480.7B.1 (480.7)	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	212	216
480.7B.1 (480.7)	ZIPREQ	Address zip code is required.	212	216

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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	380	391
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 informative, 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 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	392	403
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 informative, 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	392	403

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		difference from amended or deleted records.		
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	404	415
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 informative, 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 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	416	427
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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	440	451
480.7B.1 (480.7)	WITH17	The total tax withheld value is incorrect. It 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
480.7B.1 (480.7)	TOTFRM	The total form count does not match the number of informative submitted for this account and filing period.	452	461
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	462	473
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	474	485
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	486	497
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	498	509
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	510	521

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	522	533
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	534	545
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	546	557
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	558	569
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	570	581
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	582	593
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	594	605
480.7B.1 (480.7)	INVNUM	Field must be numeric with no signs, decimals, or commas.	606	617
480.7B.1 (480.7)	WITH5	The total withheld amount for Part 2 must equal the sum of amounts withheld for each month.	606	617
480.7B.1 (480.7)	WITH6	The total withheld amount in Part 2 must match the total withheld amount from Part 1.	606	617
480.7B.1 (480.7B)	7B1FRM	Form type must be B for form 480.7B.1 in 480.7B submission.	13	13
480.7B.1 (480.7B)	DOCT12	The reconciliation (480.7B.1) document type must be amended for adding or amending file types.	15	15
480.7B.1 (480.7B)	DOCT13	The reconciliation (480.7B.1) document type must be original for original filing.	15	15

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7B.1 (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.1 (480.7B)	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7B.1 (480.7B)	WITHID	The Withholding Agent Identification Number must match the Identification Number in the 'PA' record.	48	56
480.7B.1 (480.7B)	NAMREQ	Name is required.	87	116
480.7B.1 (480.7B)	PHOREQ	Phone number is required.	117	126
480.7B.1 (480.7B)	STRLEN	Address street must be at least 4 characters long.	127	161
480.7B.1 (480.7B)	STRREQ	Address street is required.	127	161
480.7B.1 (480.7B)	STRLEN	Address street must be at least 4 characters long.	162	196
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 code is required.	212	216

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code 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
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 informative, the value must	368	379

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	380	391
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 informative, 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 informative submitted for this account and filing period.	404	413

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	414	425
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	426	437
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	438	449
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	450	461
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	462	473
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	474	485
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	486	497
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	498	509
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	510	521
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	522	533
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	534	545
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	546	557
480.7B.1 (480.7B)	INVNUM	Field must be numeric with no signs, decimals, or commas.	558	569
480.7B.1 (480.7B)	WITH5	The total withheld amount for Part 2 must equal the sum of amounts withheld for each month.	558	569

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 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 cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code 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	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	STRLEN	Address street must be at least 4 characters long.	226	260
480.7C	STRREQ	Address street is required.	226	260
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7C	ZIPREQ	Address zip code 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	DIST13	The form of distribution is invalid. The only values accepted in this field are "L", "E", or "P"	321	321
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 FROM	POSITION TO
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	431	442
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	443	454
480.7C	EMPFLD	Field should be empty (blank or filled with zeros).	479	490
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	491	502
480.7C	EMPFLD	Field should be empty (blank or filled with zeros).	515	526
480.7C	DIST10	The distribution code is invalid. The only values accepted in this field are A, B, C, D, E, F, G, H, I, J, K, L, M, or N.	527	527
480.7C	DIST8	The distribution code is required.	527	527
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	528	539
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	540	551
480.7C	EMPFLD	Field should be empty (blank or filled with zeros).	552	563
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	564	575
480.7C	EMPFLD	Field should be empty (blank or filled with zeros).	576	587
480.7C	EMPFLD	Field should be empty (blank or filled with zeros).	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	832	843
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	844	855
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	945	956
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	957	968
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	969	980
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	981	992
480.7C	DIST6	Total distributions for reason of a disaster declared by the Governor of Puerto Rico is incorrect. The value needs to equal the sum of individual distribution types for disaster declared by the Governor of Puerto Rico.	993	1004
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	993	1004
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	1005	1016
480.7C	INVNUM	Field must be numeric with no signs, decimals, or commas.	1017	1028

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7C	FNTY1	Finance type is invalid. The only values accepted in this field are "B", "C", or "D".	1042	1042
480.7C	FNTYRQ	Financial type is required.	1042	1042
480.7C	INVIDT	The Identification Number type is incorrect.	2331	2331
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.	2332	2342
480.7C	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2332	2342
480.7C	EIN2	Invalid EIN.	2332	2342
480.7C	ID2	The Identification Number is not a valid SSN or EIN.	2332	2342
480.7C	ITIN	Invalid ITIN (Taxpayer's personal identification number).	2332	2342
480.7C	SSN2	Invalid SSN.	2332	2342
480.7C	EMLINV	Contact e-mail address is invalid.	2343	2392
480.7C	EMLREQ	Contact e-mail address is required.	2343	2392
480.7C	PHOINV	Invalid phone number combination.	2393	2412
480.7C	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2393	2412

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7C	PHONUM	Phone number must be numerical only.	2393	2412
480.7C	PHOREQ	Phone number is required.	2393	2412
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 pensions 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
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7C	EMPFLD	Field should be empty (blank or filled with zeros).	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 FROM	POSITION TO
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 alphanumeric characters only, no special characters.	197	209
480.7C.1	STAREQ	Address state is required.	210	211
480.7C.1	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	212	216
480.7C.1	ZIPREQ	Address zip code 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 long.	223	257
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 alphanumeric characters only, no special characters.	293	305
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 code is required.	308	312

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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
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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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 informative, 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
480.7C.1	WITH7	The total amount paid in the reconciliation is incorrect. If this is the original submission the value must be	416	427

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		equal to the sum of the amount withheld from each informative. If adding informative, 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.		
480.7C.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 informative, 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 informative, the value must be equal to the sum of the amount withheld from each added informative plus the total from the	440	451

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		original submission. If amending it must equal the value from the original submission plus or minus the difference from amended or deleted records.		
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	452	463
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 informative, 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 informative, 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative, 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
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 informative, 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	500	511

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		equal to the sum of the amount withheld from each informative. If adding informative, 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.		
480.7C.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 informative 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
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	594	605

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	606	617
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	618	629
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	630	641
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	642	653
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	654	665
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	666	677
480.7C.1	INVNUM	Field must be numeric with no signs, decimals, or commas.	678	689
480.7C.1	WITH5	The total withheld amount for Part 2 must equal the sum of amounts withheld for each month.	678	689
480.7C.1	WITH6	The total withheld amount in Part 2 must match the total withheld amount from Part 1.	678	689
480.7D	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7D	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
480.7D	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 cannot sure the interval (900000000-999999999); it is	2	10

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		reserved for control numbers automatically assigned in SURI.		
480.7D	7DFORM	Form type must be Z for 480.7D submission.	13	13
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	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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7D	ZIPREQ	Address zip code 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	SSN2	Invalid SSN.	167	175
480.7D	PAYTY1	Payer type is required.	176	176
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	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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 code 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 informative 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
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 number must be unique for every informative in the submission. If adding more informative the account number cannot be a duplicate of one already submitted.	366	385

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative 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
480.7D	DUPACC	Duplicate account number found. The account number must be unique for every informative in the submission. If adding more informative 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative 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 informative 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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative 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 informative the account number cannot be a duplicate of one already submitted.	630	649
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 informative 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 informative 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
480.7D	INVNUM	Field must be numeric with no signs, decimals, or commas.	750	761

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	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	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2365	2375
480.7D	EIN2	Invalid EIN.	2365	2375
480.7D	SSN2	Invalid SSN.	2365	2375
480.7D	EMLINV	Contact e-mail address is invalid.	2376	2425
480.7D	EMLREQ	Contact e-mail address is required.	2376	2425
480.7D	PHOINV	Invalid phone number combination.	2426	2445
480.7D	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	2426	2445
480.7D	PHONUM	Phone number must be numerical only.	2426	2445
480.7D	PHOREQ	Phone number is required.	2426	2445
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	2446	2454

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		type. Verify that the Original Control Number is indicated in the document you want to remove.		
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	EMPFLD	Field should be empty (blank or filled with zeros).	2495	2500
480.7E	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7E	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
480.7E	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 cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7E	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
480.7E	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7E	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7E	DUPREC	The payee has a duplicate registration.	15	15
480.7E	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
480.7E	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7E	PAYID	The Payer Identification Number must match 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 long.	71	105
480.7E	STRREQ	Address street is required.	71	105
480.7E	STRLEN	Address street must be at least 4 characters long.	106	140

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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 alphanumeric characters only, no special characters.	141	153
480.7E	STAREQ	Address state is required.	154	155
480.7E	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7E	ZIPREQ	Address zip code is required.	156	160
480.7E	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.7E	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
480.7E	EIN2	Invalid EIN.	167	175
480.7E	ID2	The Identification Number is not a valid SSN or EIN.	167	175
480.7E	MRCCON	There can only be one ID per informative return.	167	175
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 long.	206	240
480.7E	STRREQ	Address street is required.	206	240

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7E	STRLEN	Address street must be at least 4 characters long.	241	275
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 alphanumeric characters only, no special characters.	276	288
480.7E	STAREQ	Address state is required.	289	290
480.7E	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	291	295
480.7E	ZIPREQ	Address zip code is required.	291	295
480.7E	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	296	299
480.7E	FNBLK	First name should be blank for corporations (ID Type "1")	300	314
480.7E	FNREQ	First name is required for individual ID types.	300	314
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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
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	INVNUM	Field must be numeric with no signs, decimals, or commas.	460	474
480.7E	INVIDT	The Identification Number type is incorrect.	2333	2333
480.7E	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.	2334	2344
480.7E	EIN2	Invalid EIN.	2334	2344
480.7E	ID2	The Identification Number is not a valid SSN or EIN.	2334	2344
480.7E	MRCCON	There can only be one ID per informative return.	2334	2344
480.7E	SSN2	Invalid SSN.	2334	2344
480.7E	INVNUM	Field must be numeric with no signs, decimals, or commas.	2345	2355
480.7E	ACCLEN	Account number value must be at least 4 characters long.	2356	2375
480.7E	INVLEN	Invalid Account Number Length.	2356	2375
480.7E	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 FROM	POSITION TO
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
480.7F	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7F	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
480.7F	CONTN3	The control number must be numeric.	2	10
480.7F	CONTN4	The control number must be 9 digits in length.	2	10
480.7F	CONTN6	You cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.7F	7FFORM	Form type must be L for 480.7F submission.	13	13
480.7F	DOCT16	You cannot add amended documents to the request unless it is a	15	15

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		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.		
480.7F	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7F	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7F	DUPREC	The payee has a duplicate registration.	15	15
480.7F	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
480.7F	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21
480.7F	INVIDT	The Identification Number type is incorrect.	31	31
480.7F	PAYID	The Payer Identification Number must match the Identification Number in the 'PA' record.	32	40
480.7F	NAMREQ	Name is required.	41	70
480.7F	STRLEN	Address street must be at least 4 characters long.	71	105
480.7F	STRREQ	Address street is required.	71	105
480.7F	STRLEN	Address street must be at least 4 characters long.	106	140

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7F	CITLEN	Address city must be at least 2 characters long.	141	153
480.7F	CITREQ	Address city is required.	141	153
480.7F	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.7F	STAREQ	Address state is required.	154	155
480.7F	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7F	ZIPREQ	Address zip code is required.	156	160
480.7F	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.7F	EMLINV	Contact e-mail address is invalid.	165	214
480.7F	EMLREQ	Contact e-mail address is required.	165	214
480.7F	PHOINV	Invalid phone number combination.	215	234
480.7F	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	215	234
480.7F	PHONUM	Phone number must be numerical only.	215	234
480.7F	PHOREQ	Phone number is required.	215	234
480.7F	INVIDT	The Identification Number type is incorrect.	237	237
480.7F	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.	238	248

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7F	EIN2	Invalid EIN.	238	248
480.7F	ID2	The Identification Number is not a valid SSN or EIN.	238	248
480.7F	SSN2	Invalid SSN.	238	248
480.7F	NAMREQ	Name is required.	249	278
480.7F	FNBLK	First name should be blank for corporations (ID Type "1").	279	293
480.7F	FNREQ	First name is required for individual ID types.	279	293
480.7F	LNBLK	Last name should be blank for corporations (ID Type "1").	309	328
480.7F	LNREQ1	Last name is required for Individuals (ID Type "2").	309	328
480.7F	LNREQ2	Last name is required if first name is provided.	309	328
480.7F	STRLEN	Address street must be at least 4 characters long.	349	383
480.7F	STRREQ	Address street is required.	349	383
480.7F	STRLEN	Address street must be at least 4 characters long.	384	418
480.7F	CITLEN	Address city must be at least 2 characters long.	419	431
480.7F	CITREQ	Address city is required.	419	431
480.7F	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	419	431
480.7F	STAREQ	Address state is required.	432	433
480.7F	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	434	438
480.7F	ZIPREQ	Address zip code is required.	434	438

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7F	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	439	442
480.7F	FLAG03	Invalid Flag.	443	443
480.7F	FLAG05	Report only one type of Client.	443	443
480.7F	FLAG06	The indicator is required.	443	443
480.7F	FLAG03	Invalid Flag.	444	444
480.7F	FLAG05	Report only one type of Client.	444	444
480.7F	FLAG06	The indicator is required.	444	444
480.7F	FLAG03	Invalid Flag.	475	475
480.7F	IDTYPE	Identification number Type is required.	476	476
480.7F	INVIDT	The Identification Number type is incorrect.	476	476
480.7F	EIN2	Invalid EIN.	477	485
480.7F	ID1	Identification number (ID) is required.	477	485
480.7F	SSN2	Invalid SSN.	477	485
480.7F	NAMREQ	Name is required.	486	535
480.7F	FLAG03	Invalid Flag.	546	560
480.7F	INVNUM	Field must be numeric with no signs, decimals, or commas.	546	560
480.7F	FLAG03	Invalid Flag.	561	561
480.7F	FLAG03	Invalid Flag.	562	576
480.7F	INVNUM	Field must be numeric with no signs, decimals, or commas.	562	576
480.7F	FLAG03	Invalid Flag.	577	577
480.7F	INVNUM	Field must be numeric with no signs, decimals, or commas.	578	592

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7F	INVNUM	Field must be numeric with no signs, decimals, or commas.	593	607
480.7F	INVNUM	Field must be numeric with no signs, decimals, or commas.	608	622
480.7F	INVNUM	Field must be numeric with no signs, decimals, or commas.	623	637
480.7F	INVNUM	Field must be numeric with no signs, decimals, or commas.	638	652
480.7F	FLAG03	Invalid Flag.	653	653
480.7F	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros).	2446	2454
480.7F	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
480.7F	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
480.7F	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7F	RSNREQ	Change reason is required for amended documents.	2455	2494
480.7G	CONTN1	The Control Number is required. Make sure the field is not blank.	2	10
480.7G	CONTN2	You must provide a unique control number. Control numbers must have	2	10

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		9 digits and be unique for the employer, form type, and fiscal year.		
480.7G	CONTN3	The control number must be numeric.	2	10
480.7G	CONTN4	The control number must be 9 digits in length.	2	10
480.7G	CONTN6	You cannot sure the interval (900000000-999999999); it is reserved for control numbers automatically assigned in SURI.	2	10
480.7G	7GFORM	Form type must be N for 480.7G submission.	13	13
480.7G	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
480.7G	DOCTY1	Invalid file type. The only values allowed in this field are 'O' (Original), 'A' (Amend), or 'X' (Remove).	15	15
480.7G	DOCTY2	You cannot use file type 'A' (Amended) or 'X' (Removed) when you are submitting an 'O' file type (Original or Add).	15	15
480.7G	DUPREC	The payee has a duplicate registration.	15	15
480.7G	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
480.7G	INVTXY	Tax year is invalid or does not belong to the selected period.	18	21

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7G	PAYID	The Payer Identification Number must match the Identification Number in the 'PA' record.	32	40
480.7G	NAMREQ	Name is required.	41	70
480.7G	STRLEN	Address street must be at least 4 characters long.	71	105
480.7G	STRREQ	Address street is required.	71	105
480.7G	STRLEN	Address street must be at least 4 characters long.	106	140
480.7G	CITLEN	Address city must be at least 2 characters long.	141	153
480.7G	CITREQ	Address city is required.	141	153
480.7G	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	153
480.7G	STAREQ	Address state is required.	154	155
480.7G	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	156	160
480.7G	ZIPREQ	Address zip code is required.	156	160
480.7G	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	161	164
480.7G	EMLINV	Contact e-mail address is invalid.	165	214
480.7G	EMLREQ	Contact e-mail address is required.	165	214
480.7G	PHOINV	Invalid phone number combination.	215	234
480.7G	PHOLEN	Phone Numbers must have 10 characters and they should include the area code.	215	234
480.7G	PHONUM	Phone number must be numerical only.	215	234

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7G	PHOREQ	Phone number is required.	215	234
480.7G	INVIDT	The Identification Number type is incorrect.	237	237
480.7G	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.	238	248
480.7G	EIN2	Invalid EIN.	238	248
480.7G	ID2	The Identification Number is not a valid SSN or EIN.	238	248
480.7G	SSN2	Invalid SSN.	238	248
480.7G	NAMREQ	Name is required.	249	278
480.7G	FNBLK	First name should be blank for corporations (ID Type "1").	279	293
480.7G	FNREQ	First name is required for individual ID types.	279	293
480.7G	LNBLK	Last name should be blank for corporations (ID Type "1").	309	328
480.7G	LNREQ1	Last name is required for Individuals (ID Type "2").	309	328
480.7G	LNREQ2	Last name is required if first name is provided.	309	328
480.7G	STRLEN	Address street must be at least 4 characters long.	349	383
480.7G	STRREQ	Address street is required.	349	383
480.7G	STRLEN	Address street must be at least 4 characters long.	384	418

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.7G	CITLEN	Address city must be at least 2 characters long.	419	431
480.7G	CITREQ	Address city is required.	419	431
480.7G	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	419	431
480.7G	STAREQ	Address state is required.	432	433
480.7G	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	434	438
480.7G	ZIPREQ	Address zip code is required.	434	438
480.7G	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	439	442
480.7G	FLAG03	Invalid Flag.	443	443
480.7G	TYPEF2	Type Financial code is invalid. Value must be "A", "B", "C" or "D".	444	444
480.7G	TYREQ1	Type Financial is Required.	444	444
480.7G	TYFREQ	Other Type Financial is Required.	445	464
480.7G	FLAG03	Invalid Flag.	465	465
480.7G	INVNUM	Field must be numeric with no signs, decimals, or commas.	466	480
480.7G	INVNUM	Field must be numeric with no signs, decimals, or commas.	481	495
480.7G	INVNUM	Field must be numeric with no signs, decimals, or commas.	496	510
480.7G	INVIDT	The Identification Number type is incorrect.	2434	2434
480.7G	AMNDID	You cannot change the Identification Number of an amended document. You must remove the document with the incorrect Identification Number	2435	2445

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
		and then submit an original document with the correct Identification Number.		
480.7G	AMNID	The original Identification Number of an eliminated document has not been found. The original Identification Number must match the Identification Number of the eliminated document.	2435	2445
480.7G	EIN2	Invalid EIN.	2435	2445
480.7G	ID2	The Identification Number is not a valid SSN or EIN.	2435	2445
480.7G	SSN2	Invalid SSN.	2435	2445
480.7G	OCNBLK	Original control number should not be populated for original documents. Field should be empty (blank or filled with zeros).	2446	2454
480.7G	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
480.7G	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
480.7G	RSNEMP	Change reason should not be populated for original or delete document types.	2455	2494
480.7G	RSNREQ	Change reason is required for amended documents.	2455	2494

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.PA (Payer)	INVTXY	Tax year is invalid or does not belong to the selected period.	3	6
480.PA (Payer)	ID1	Identification number (ID) is required.	8	16
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
480.PA (Payer)	6BFORM	Form type must be 3 for 480.6B submission.	17	17
480.PA (Payer)	6CFORM	Form type must be 5 for 480.6C submission.	17	17
480.PA (Payer)	6DFORM	Form type must be X for 480.6D submission.	17	17
480.PA (Payer)	6GFORM	Form type must be G for 480.6G submission.	17	17
480.PA (Payer)	7AFORM	Form type must be 6 for 480.7A submission.	17	17
480.PA (Payer)	7BFORM	Form type must be 7 for 480.7B submission.	17	17
480.PA (Payer)	7CFORM	Form type must be Y for 480.7C submission.	17	17
480.PA (Payer)	7DFORM	Form type must be Z for 480.7D submission.	17	17
480.PA (Payer)	7EFORM	Form type must be K for 480.7E submission.	17	17
480.PA (Payer)	7FFORM	Form type must be L for 480.7F submission.	17	17

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

RECORD	CODE	DESCRIPTION	POSITION FROM	POSITION TO
480.PA (Payer)	CITREQ	Address city is required.	141	162
480.PA (Payer)	INVCIT	City name is invalid. Value must contain alphanumeric characters only, no special characters.	141	162
480.PA (Payer)	STAREQ	Address state is required.	163	164
480.PA (Payer)	ZIPLEN	Address zip code length is invalid. Must be 5 digits long.	165	169
480.PA (Payer)	ZIPREQ	Address zip code is required.	165	169
480.PA (Payer)	ZEXLEN	Address zip code extension length is invalid. If provided it must be 4 digits long.	170	173
480.PA (Payer)	EMLREQ	Contact e-mail address is required.	219	258
480.SU (Submitter)	ID7	The filer's ID does not match the ID in SURI or 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 "Add Power of Attorney".	3	11
480.SU (Submitter)	EMLREQ	Contact e-mail address is required.	435	474
480.SU (Submitter)	ID10	The submitter ID type is incorrect. If submitter ID is FEIN the value should be '1' and if the submitter ID is an SSN the value should be '2'.	490	490