SPECIFICATIONS

FOR MAGNETIC MEDIA FILING

OF

SUSPICIOUS ACTIVITY REPORTS (SAR)

(FORM TDF 90-22.47)

REVISED July 2004

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE

These Specifications for Magnetic Media Filing of Suspicious Activity Reports (Form TDF 90-22-47) were developed under the sponsorship of the following:

Department of the Treasury

Director, Financial Crimes Enforcement Network

Internal Revenue Service

Director, Detroit Computing Center

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Purpose

The purpose of this specification is to provide the requirements and conditions for filing Suspicious Activity Report (SAR), Form TDF 90-22.47 on magnetic media.

The magnetic media forwarded to the Detroit Computing Center (DCC) will be considered as a substitute for the paper document, provided the transaction is accepted by the DCC system. Receipt and acknowledgment of magnetic media is further discussed in a later section.

These specifications apply to the program for the filing of SARs submitted on magnetic cartridge, or diskette.

Approval to participate in the magnetic media reporting program is contingent upon the filer following these steps:

- Review specifications
- File application to participate
- Satisfy Acceptance Testing Procedures
- Receive formal DCC approval
- File reports every two to four weeks (as required)
- Monitor quality

Continued participation in the Magnetic Media Program is contingent upon maintenance of quality standards and timely reporting.

Application for Magnetic Media Reporting

For purposes of these specifications, the FILER is the organization responsible for filing the SAR. The Financial Institution and transmitter may be the same or different

organizations.

Filers are required to complete and send to the Internal Revenue Service Detroit Computing Center (DCC) an "Application for Magnetic Media Reporting of Currency Transactions" (Form DCC-4419).

The application should be filed with DCC as soon as possible after receipt of these specifications. DCC will act on the application and notify the applicant of authorization to file. Magnetic media may not be filed with DCC until the applicant has received approval.

Approval of applications to file SARs on magnetic media will be contingent upon the applicant satisfactorily passing an acceptance test.

Filing of Magnetic Media Reports General:

DCC will advise magnetic filers when they may begin to file using magnetic media. This will be as early as possible after receipt of the application. Until this notification has been issued, magnetic media will not be accepted.

If files are unreadable due to format errors, etc., we will contact the transmitter by telephone to send a replacement for the file.

Any filer whose error rates remain at a high level on a continuing basis may risk being discontinued as a magnetic media filer.

Filers are required to retain a copy of the SAR data and all original supporting documentation or business record equivalent for five years from the date of the suspicious activity report. All supporting documentation must be made available to appropriate authorities upon request.

Transmittal Process:

Magnetic media files and transmittals are submitted to DCC. Form(s) DCC-4804 and DCC-4802 (for multiple filers), must accompany magnetic submissions. **DO NOT MAIL THE MEDIA AND THE TRANSMITTAL SEPARATELY**. DCC encourages the use of a substitute computer generated Form 4804 and/or Form 4802, which includes all information requested on the actual form. Substitute forms should follow the format of the transmittal form.

All submitted magnetic media files, must include the following:

- A Form 4804 or computer generated substitute.
- The magnetic media with an external identifying label.
- A statement on the outside of the shipping container that says 'Attn: Tape Library Deliver unopened: SAR Magnetic Media. If there is only one container, mark the outside as 1 of 1. For multiple containers, include the sequence (e.g., 1 of 3, 2 of 3, etc.).
- DCC will not pay or accept 'Collect on Delivery' or 'Charged to IRS' shipments of SARs on magnetic media that an individual or organization is legally required to report.

Data Sequencing and Validation Criteria

The following data controls must be followed or the SAR magnetic media will be rejected. The data records must be in the following sequence:

• Transmitter (1A)

There can only be one of this record type and it must be the first record on the file.

• Financial Institution (2A)

There can be more than one of this record type depending on the number of different Financial Institutions, which are included on the file. This record type will immediately precede all records, which relate to the Financial Institution.

• Suspicious Activity (3A)

There can be more than one of this record type on the file depending on the number of suspicious activities being reported for Financial Institution.

• Suspect Information (4A)

There can be more than one of this record type dependent on the number of persons involved in this suspicious activity.

- <u>Narrative Description (6A)</u> There can be more than one of this record type depending on the length of the explanation given for the suspicious activity.
- Branch Summary (9A)

There should be one of these records on the file for each Financial Institution branch that is being reported.

• Financial Institution Summary (9B)

There must be one of this record type for each Financial Institution reporting. It must be the last record associated with the Institution.

- File Summary (9Z)
- There must be one of these records on the file and it must be the last record on the file.

Acceptance Procedures

The Filer will be asked to provide a test file to DCC that is consistent with these requirements. Final acceptance of the filer's test file will be as follows:

- The test data will consist of a set of reports, containing the data normally supplied by the filer.
- The test file should contain more than 25 reports.
- Upon receipt of the filer's test file DCC will test, review and provide feedback to the filer within ten working days.
- If 95% of the filer's test returns are errorfree and the file is correctly formatted, final acceptance will be issued by DCC allowing the filer to participate in the Magnetic Media Program.
- When a test file is found to be incorrectly formatted or more than 5% of the filer's test returns contain errors, DCC will identify to the filer the type of errors encountered. A new set of test data should be forwarded to DCC. The filer is responsible for correcting their software to eliminate the identified errors and any related errors.
- If, after three attempts, the filer's test file continues to be unacceptable, the filer must confer with the SAR Magnetic Media Coordinator and develop an acceptable plan for correcting deficiencies before any further tests are allowed.
- Filers granted acceptance will be notified.
- When several filers use the same service bureau system, only one test file of magnetic returns is required to cover the acceptance of all participating filers.
- DCC will issue a Transmitter Control Code (TCC) to be used with all submissions of SARs.

Filing Dates

Filing using magnetic media will be on a continuous basis. Magnetic media must be prepared and submitted to DCC for processing no later than 30 calendar days after the date of initial detection of facts that may constitute a basis for filing a SAR. If no suspect was identified on the date of detection of the incident requiring the filing, a Financial Institution may delay filing a SAR for an additional 30 calendar days to identify a Suspect. In no case shall reporting be delayed more than 60 calendar days after the date of initial detection of a reportable transaction.

Receipt and Acknowledgment of Magnetic Media Files

SARs **will not be acknowledged** to the transmitter. Cartridges will be returned **with** the original data removed.

Filing Corrected Reports

If a SAR that was prepared and submitted on magnetic media must be corrected, you must file a complete corrected SAR as soon as possible. All fields must be completed with the correct information, NOT JUST THE DATA FIELDS NEEDING CORRECTION. Corrected SARs will be accepted on magnetic media. Corrected and Supplemental magnetically filed SARs must include the appropriate code indicator

Magnetic Media Coordinator Contacts

Direct all requests for Magnetic Media related publications or information to the following address:

> SAR Magnetic Media Coordinator Internal Revenue Service 985 Michigan Ave. Detroit, MI 48226-2458 Phone Number (313) 234-2011 Fax Number (313) 234-1614

General Specifications

Cartridge Specifications:

These specifications define the file characteristics acceptable for magnetic media reporting. These characteristics must be adhered to unless specifically authorized by the DCC in writing.

All records should be fixed in length to the size specified for each record type. Usually DCC will be able to process a compatible cartridge file. The standard file characteristics are 18 or 36 track cartridges, EBCDIC, odd parity, 6250 BPI and standard labels. The standard data set name to be used on cartridges is **ITFMP.SARMAG.TDF9.**

Files must have the following attributes:

An external label must appear on each cartridge submitted for processing. The following information should appear on the label:

- The transmitters name
- Date of preparation
- A reel number assigned by the preparer that must match the reel number on the internal label (6 alpha numeric characters)

• Number of reels in file, including reel sequence number (i.e., 01 of 08)

Note: To allow better control processing of your files, uniquely numbered cartridge numbers must be transmitted when using multiple cartridges.

For the purposes of these specifications the following conventions must be used for internal labels:

• <u>Header Label</u>

Standard headers provided they begin with 1HDR, HDR1, VOL1, VOL2,

UHL1, or 'b LABEL'.

Consist of a maximum of 80 positions.

• <u>Trailer Label</u>

Standard trailer labels may be used provided that they begin with 1EOR, 1EOF, EOR1, EOF1, EOV1, or EOV2.

Consist of a maximum of 80 positions.

Diskette Specifications:

These specifications define the file characteristics acceptable for diskette media reporting. These characteristics must be adhered to unless specifically authorized by DCC in writing.

All records should be fixed in length to the size specified for each record type. Usually DCC will be able to process a compatible diskette file. The standard file characteristic is 3.5 inch diskette double sided/double density or double sided/high density. The standard data set name to be used on files is **SARMAG**.

All diskettes must be generated using MS-DOS on an IBM compatible personal computer in ASCII mode. All alphabetic characters must be in **upper case only.**

An external label must appear on each diskette submitted for processing. The following information should appear on the label:

- Transmitter's name
- Date of preparation
- Diskette sequence number (i.e., 01 of 03)
- Coverage beginning and ending dates
- Number of SAR records

The diskette records defined in these specifications should be unblocked 420 character records. The industry standard record delimiter for diskette data records is the two byte combination of 0D0A hexadecimal characters (carriage return, line feed).

Note: Diskettes will not be returned.

Overview of File

This file is an alternative to filing SARs on paper. If you file a transaction on MAGNETIC MEDIA DO NOT FILE a paper SAR for the same SAR.

All initial, corrected, supplemental and late report filings can be submitted on magnetic media.

SARs, which have missing or incomplete information, are considered original (initial) filings. When information becomes available they should be replaced on magnetic media, include the corrected or supplemental indicator code.

All dates are to be in the format of **century**, year, month, day with month and day both **being right justified and zero filled.**

Money amounts **should be right justified and zero filled.** Enter dollar amounts only, all cents should be rounded up to the next higher dollar amount (i.e., \$10,000.01 should be reported as \$10001).

All name, address, and city fields are to be **left justified and space filled.**

All Alphabetic characters must be in upper case.

All name and address fields relating to SAR data must follow the Name Editing Conventions specified in the attachments.

Account numbers must NOT contain leading zeroes unless they are part of the actual account number.

All entries must be:

Left justified and space filled.

Do not include lower case characters in the file.

All 'Filler' fields should be space filled.

Do not use low values as a substitute for spaces.

Blank fields must be space filled.

Record Types (Input)

Transmitter (1A) Record - Required

The first record on each file is to be the transmitter record, which will contain information identifying the transmitter (person or organization handling the data accumulation and formatting). There will be only one Transmitter Record on each magnetic media file. Include the following data elements in this record:

Field Pos.	Field Name	Length	Description and Remark	
1-2	Record Type	2	Required. Enter `1A`.	
3-37	Transmitter Name	35	Required. Enter the name of the individual or organization that is transmitting the transactions on this file.	
38-67	Transmitter Address	30	Required. Enter the street address of the transmitter.	
68-92	Transmitter City	25	Required. Enter the city of the transmitter.	
93-94	Transmitter State	2	Required. Enter the transmitter state in abbreviated form. Use the country and state standard abbreviations in the attachments.	
95-103	Transmitter Zip Code	9	Required. Enter the transmitter zip code.	
104-106	Transmitter Area Code	3	Required. Enter the transmitter area code.	
107–113	Transmitter	7	Required. Enter the telephone number.	
114–148	Transmitter Contact	35	Required. Enter the name of an official contact for the transmitter.	
149–157	Transmitter Employer Identification Number (EIN)	9	Required. This must be the valid nine-digit number assigned to the transmitter by IRS. Do not enter hyphens, slashes, ALPHA characters, all 9's, or all zeroes.	
158–165	Coverage Beginning Date	8	Required. This will be the date of the earliest original transaction on the file. It is to be a numeric 8-digit field in format century, year, month, and day (ccyymmdd).	

Field Pos.	Field Name	Length	Description and Remark
166–173	Coverage Ending Date	8	Required. This will be the date of the latest original transaction on the file. It is to be a numeric 8-digit field in format century, year, month, and day (ccyymmdd).
174–181	Transmitter Control Code	8	Required. This is the code assigned by the IRS. This code is also entered on Form 4804.
182-409	Filler	228	
410	New Format Indicator	1	Required. Enter '4'.
411–420	User Field	10	

Parent Financial Institution (2A) Record - Required

This record identifies information regarding the Parent Financial Institution. The number of Financial Institution records will depend on the number of different Financial Institutions that are included on the file. Include the following data elements in this record:

Field Pos	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter '2A'.
3-37	Financial Institution Name	35	Required. Enter the Financial Institution's full legal name.
38-67	Institution Address	30	Required. Enter the address of the Institution. Do not abbreviate.
68-92	Institution City	25	Required. Enter the city where the Institution is located.
93-94	Institution State	2	Required. Enter the two (2) character state code from the standard state code abbreviations in the attachments.
95-103	Institution Zip Code	9	Required. Enter the zip code for the Institution.
104	Primary Federal Regulator	1	Required. Enter the Primary Federal Regulator as follows: A – Federal Reserve B – FDIC C – NCUA D – OCC E – OTS
105-113	Institution EIN	9	Required. Enter the EIN of the Parent Financial Institution.
114-410	Filler	297	
411-420	User Field	10	

Financial Institution Branch (2B) Record - Required

This record identifies information regarding the Financial Institution Branch where the activity occurred. The number of Financial Institution records will depend on the number of branches the Financial Institution is reporting on the magnetic media file. Include the following data elements in this record:

Field Pos	Field Name	Length	Description and Remarks
1 -2	Record Type	2	Required. Enter '2B'.
3-9	Branch Code	7	Required. Enter branch number for the submitting Branch. Right justify and zero fill.
10-39	Branch Office Address	30	Required. Enter the branch office address.
40-64	Branch Office City	25	Required. Enter the city where the branch office city.
65-66	Branch Office State	2	Required. Enter the two (2) character state code from the standard state code abbreviations in the attachments.
67-75	Branch Office Zip Code	9	Required. Enter the zip code for the branch office (US only).
76-77	Branch Office Country Code	2	From the attachment, select the appropriate country code (if not the US).
78-85	Institution Closed Date	8	Required. Date Institution closed (if closed). It is to be a numeric eight (8) digit field in the format century, year, month, day (CCYYMMDD).
86-120	Contact Name	35	Name of the contact person.
121-160	Contact Title	40	Title of the contact person.
161-163	Contact Area Code	3	Area code of contact person.
164-170	Contact Phone Number	7	Phone number of contact person.
171-205	Contact Institution/Agency	35	Name of the Agency (if not filed by Financial institution).
206-410	Filler	205	
411-420	User Field	10	

Suspicious Activity (3A) Record - Required

This record identifies and describes the suspicious activity report. It occurs one time per suspicious activity. Include the following data elements in this record:

Field Pos	Field Name	Length	Description and Remarks	
1-2				
	Record Type	2	Required. Enter '3A'.	
3-9	Branch Code	7	Required. Enter the Branch Number for the submitting Branch. Right justify and zero fill.	
10-14	Transaction Sequence Number	5	Required. Enter a sequential number starting with 00001 and increment by 1 for each suspicious transaction (3A) record.	
15-36	Account Number 1	22	Account Number affected, if any.	
37	Account Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.	
38-59	Account Number 2	22	Additional account number affected.	
60	Account2 Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.	
61-82	Account Number 3	22	Additional account number affected.	
83	Account3 Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.	
84-105	Account Number 4	22	Additional account number affected.	

Field Pos	Field Name	Length	Description and Remarks	
106	Account4 Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.	
107-115	Law Enforcement Agencies Advised	9	Enter the appropriate codes from the list below of the Law Enforcement Agencies that have already been advised (maximum of 9). A = DEA B = FBI C = IRS D = Postal Inspection E = Secret Service F = US CUSTOMS G = Other Federal H = State I = Local	
116-150	Law Enforcement Agency Name	35	Enter the name of the Law Enforcement Agency already contacted (for G, H, or I Enforcement Agency Codes.	
151-185	Law Enforcement Contact Person 1	35 Enter the name of person 1 contacted at Law Enforcem Agency.		
186-188	Law Enforcement Agency Phone Number Area Code	3	Enter the area code of the enforcement agency contact person 1.	
189-195	Law Enforcement Agency Phone Number	7	Enter the phone number of the Enforcement Agency contact person 1.	
196-230	Law Enforcement Agency Contact Person 2	35	Enter the name of person 2 contacted at Law Enforceme Agency.	
231-233	Law Enforcement Agency Phone Number Area Code	3	Enter the area code of the enforcement agency contact person 2.	

Suspicious Activity (3A) Record - Continued

Field Pos	Field Name	Length	Description and Remarks	
234-240	Law Enforcement Agency Phone Number	7	Enter the phone number of the enforcement agency contact person 2.	
241-248	From Violation Date	8	Enter the from date of the violation, CCYYMMDD format. Only enter if a range of dates. If only one date, enter here.	
249-256	To Violation Date	8	Enter the to date of the violation. CCYYMMDD format. Only enter if a range of dates.	
257-266	Violation Amount	10	Enter the dollar amount involved in known or suspected violation.	
267-276	Violation Type	violation. 10 A maximum of 10 violation types as follows: A = BSA B = Bribery/Gratuity C = Check Fraud D = Check Kiting E = Commercial Loan Fraud F = Computer Intrusion G = Consumer Loan Fraud H = Counterfeit Check I = Counterfeit Credit/Debit Card J = Counterfeit Instrument K = Credit Card Fraud L = Debit Card Fraud M = Defalcation/Embezzlement N = False Statement O = Misuse of Position or Self-Dealing P = Mortgage Loan Fraud Q = Mysterious Disappearance R = Wire Transfer Fraud S = Other T = Terrorist Financing		
277-316	Violation Type Other	40	U = Identity Theft If other Violation Type indicated, describe the violation.	
317-326	Amount of Loss	10	Dollar Amount of Loss prior to recovery (if applicable).	
327-336	Amount of Recovery	10	Dollar Amount of Recovery (if applicable).	

Suspicious Activity (3A) Record - Continued

Field Pos	Field Name	Length	Description and Remarks
337	Material Impact Indicator	1	Has the suspected violation had a material impact on or otherwise affected the soundness of the institution:
			A = Yes
			B = No
338	Bonding Company Notified	1	Has the institution's bonding company been notified:
			A = Yes
			B = No
339-346	Prepared Date	8	Date Report Prepared. CCYYMMDD format.
347-348	Number of Suspects	2	Required. Number of Suspect Records. Must be equal to the number of Suspect 4A Records.
349-350	Number of Explanation/Descri ption Records	2	Required. Number of Explanation/Description Records. Must be equal to the number of Explanation/Description 6A Records.
351	Multiple Branch Code	1	If the suspicious activity took place at multiple branches, enter 'X'. Include the specific branch information in the narrative Part V.
352	Corrects Prior Report Indicator	1	Required. Enter 'X' if corrects prior report.
353	Suspect Information Unavailable	1	Enter 'X' if all the suspect information is unavailable. If this box is checked, there will be no 4A record.
354-410	Filler	57	
411-420	User Field	10	

Suspicious Activity (3A) Record - Continued

Suspect Information (4A) Record - Required

This record contains information related to the Suspect's identity. There can be more than one of these records if there are multiple Suspects for the same suspicious activity.

Field Pos	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter "4A".
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch.
10-14	Transaction Sequence Number	5	Required. Enter the transaction sequence number from the associated 3A Record.
15-49	Suspect's Name	35	Enter the name of the Suspect in the format last name/first name/middle initial. Left justified and space filled. Follow the Name Editing Conventions shown in the attachment.
50-79	Suspect's Address	30	Enter the street address of the suspect. Left justified and space filled.
80-104	Suspect's City	25	Enter the suspect's city. Left justified and space filled.
105-106	Suspect's State	2	From the attachment, select the appropriate state code for the suspect.
107-115	Suspect's Zip Code	9	Enter the zip code for the suspect.
116-117	Suspect's Country	2	From the attachment, select the appropriate country code.
118-126	Suspect's TIN	9	Enter the SSN/TIN of suspect.
127-134	Suspect's Date of Birth	8	Enter suspect's date of birth. It is to be a numeric eight-digit field in the format century, year, month, day (CCYYMMDD).
135-137	Suspect's Area Code	3	Enter suspect's residence area code.
138-144	Suspect's Phone Number	7	Enter suspect's residence telephone number.
145-147	Suspect's Work Area Code	3	Enter suspect's work area code.
148-154	Suspect's Work Phone No.	7	Enter suspect's work telephone number.
155-184	Suspect's Occupation	30	Enter the occupation, profession, or business of the suspect (i.e. attorney, securities broker, auto dealer, etc.).

Suspect Information (4A) Record - continued

Field Pos	Field Name	Length	Description and Remarks	
185	Suspect's Identification	1	Enter the appropriate code for the method by which the individual's identity was verified. A - Drivers' License/State Id B - Passport C - Alien Registration D - Other Identification	
186-225	Suspect's ID Other Description	40	If 'D - Other' enter the description of Identification.	
226-247	Suspect's Identification Number	22	Enter the number used for identification.	
248-249	Suspect Issuing Authority	2	Enter the appropriate code to designate the state/country where the identification was issued.	
250-253	Suspect's Relationship	4	Enter the appropriate code(s) from the list below of the suspect's relationship to the Financial Institution. Include only the first four (4) applicable items. Left justify and space fill if less than four (4) items. A - Accountant B - Agent C - Appraiser D - Attorney E - Borrower F - Broker G - Customer H - Director I - Employee J - Officer K - Shareholder L - Other	
254-293	Suspect's Relationship Other	40	If 'L – Other' indicated above, enter the description of relationship to Financial Institution.	
294	Suspect's Affiliation	1	Suspect's Relationship is an insider relationship. Enter the appropriate code from the list below: A – Yes B – No	
295	Suspect's Relationship	1	If Suspect Relationship is an insider, enter the appropriate code from the list below: C – Still Employed at Financial Institution D – Suspended E – Terminated F – Resigned	

Suspect Information (4A) Record - continued

Field Pos	Field Name	Length	Description and Remarks
296-303	Suspect Termination Date	8	If 'D, E, or F' indicated above, enter the date action taken. It is to be a numeric eight digit field in format century, year, month, day (i.e. 19970831)
304	Suspect Admission/Confession Indicator	1	Enter the appropriate code: A – Yes B – No
305-410	Filler	106	
411- 420	User Filed	10	

Information Explanation/Description (6A) Record - Required

This record contains a detailed Explanation/Description of known or suspected violation of law. This record may occur multiple times. Include the following data elements in this record:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter "6A".
3–9	Branch Code	7	Required. Enter the branch number for the submitting branch.
10-14	Transaction Sequence	5	Required. Enter the transaction sequence number from the associated 3A Record.
15-410	Explanation/Descript ion	396	Enter a detailed Explanation/Description of the Suspicious Activity. Upper case characters only. Do not use low values or special characters.
411-420	User Field	10	

Branch Summary (9A) Record - Required

This record is required. There should be one of these records on the file for each Financial Institution branch that is being reported. This record contains counts of the number of each type of record associated with the branch. Include the following data elements in these records:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter `9A'.
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch. Right justify and zero fill.
10-16	Suspicious Activity Count	7	Required. Enter a count of the number of Suspicious Activity Records (3A) for the branch.
17- 23	Suspect Record Count	7	Required. Enter the number of Suspect (4A) records for the branch.
24-30	Explanation/Description	7	Required. Enter the number of description/Explanation (6A) records for the branch.
31-410	Filler	380	
411-420	User Field	10	

Parent Financial Institution Summary (9B) Record - Required

There should only be one of these records on the file for each Financial institution that is being reported. This record is to follow the last reported Financial Institution (Branch) '9A' Summary Record for the Financial institution. This record contains counts of the number of each type record associated with the Financial institution. Include the following data elements for these records:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter `9B'.
3-9	Branch Record Count	7	Required. Enter count of Branch Records for the Financial Institution.
10-16	SAR count	7	Required. Enter count of SARs for the
			Financial Institution.
17-23	Suspect Record Count	7	Required. Enter count of Suspect Records for the Financial Institution.
24-30	Explanation/Description Count	7	Required. Enter count of explanation/description Records for the Financial Institution.
31-410	Filler	380	
411-420	User Field	10	

File Summary (9Z) Record - Required

There should only be one of these records on the file and it must be the very last record on the file. This record contains counts of the number of the various record types, which are on the file. These records should contain the following data elements:

Field Pos.	Field Name	Length	Description and Remarks
1-2	Record Type	2	Required. Enter `9Z'.
3-9	Parent Financial Institution Record Count	7	Required. Enter count of Parent Financial Institution Records.
10-16	Branch Transaction Records	7	Required. Enter count of Branch Financial Institution Records.
17-23	SAR Count	7	Required. Enter count of SARs.
24-30	Suspect Record Count	7	Required. Enter count of Suspect Records.
31-37	Explanation/Description Counts	7	Required. Enter count of Explanation/Description Records.
38-410	Filler	373	
411-420	User Field	10	

Attachments - Standard Country/State Abbreviations U.S. States Alabama AL Pennsylvania

	0.5	States	
Alabama	AL	Pennsylvania	PA
Alaska	AK	Rhode Island	RI
APO/FPO (ZIP 090xx - 098xx)	AE	South Carolina	SC
APO/FPO (ZIP 340xx)	AA	South Dakota	SD
APO/FPO (ZIP 962xx - 966xx)	AP	Tennessee	TN
Arizona	AZ	Texas	ΤX
Arkansas	AR	Unknown, Other State	UN
California	CA	Utah	UT
Colorado	CO	Vermont	VT
Connecticut	СТ	Virginia	VA
Delaware	DE	Washington	WA
District of Columbia	DC	West Virginia	WV
Florida	FL	Wisconsin	WI
Georgia	GA	Wyoming	WY
Hawaii	HI		
Idaho	ID	U.S. Territories	
Illinois	IL	American Samoa	AS
Indiana	IN	Guam	GU
lowa	IA	Marshall Islands	MH
Kansas	KS	Micronesia, Federated States	FM
Kentucky	KY	Northern Mariana Islands	MP
Louisiana	LA	Palau	PW
Maine	ME	Puerto Rico (USPS)	PR
Maryland	MD	U.S. Virgin Islands	VI
Massachusetts	MA		
Michigan	MI	Canada States/Territo	ries
Minnesota	MN	Alberta	AB
Mississippi	MS	British Columbia	BC
Missouri	MO	Manitoba	MB
Montana	MT	New Brunswick	NB
Nebraska	NE	Newfoundland and Labrador	NF
Nevada	NV	Northwest Territory	NT
New Hampshire	NH	Nova Scotia	NS
New Jersey	NJ	Nunavut	NU
New Mexico	NM	Ontario	ON
New York	NY	Prince Edward Island	PE
North Carolina	NC	Quebec	QC
North Dakota	ND	Saskatchewan	SK
Ohio	OH	Yukon Territory	ΥT
Oklahoma	OK	-	
Oregon	OR		

Mexico States/Territories	;
Aguascalientes	AG
Baja, California (Territory North)	ΒA
Baja, California (Territory South)	BJ
Campeche	CE
Chiapas	CI
Chihuahua	СН
Coahuila de Zaragoza	CU
Colima	CL
Destrito Federal	DF
Durango	DO
Guanajuato	GU
Guerrero	GR
Hidalgo	HL
Jalisco	JL
Michoacande Ocampo	MC
Morelos	MR
Nayarit	NA
Neuvo Leon	NL
Oaxaca	OA
Puebla	PB
Queretaro de Arteaga	QU
Quintana Roo	QR
San Luis Potosi	SL
Sinaloa	SI
Sonora	SO
Tabasco	ΤВ
Tamaulipas	ΤA
Tlaxcala	ΤL
Veracruz-Llave	VC
Yucatan	YU
Zacatecas	ZA
Country/Territory	

Afghanistan	AF
Albania	AL
Algeria	AG
Andorra	AN
Angola	AO
Anguilla	AV
Antarctica	AY
Antigua & Barbuda	AC
Argentina	AR
Armenia	AM
Aruba	AA
Ashmore & Cartier Islands	AT
Australia	AS

Austria	AU
Azerbaijan	AJ
Bahamas	BF
Bahrain	BA
Bangladesh	BG
Barbados	BB
Bassas Da India	BS
Belarus	BO
Belgium	BE
Belize	BH
Benin	BN
Bermuda	
	BD
Bhutan	BT
Bolivia	BL
Bosnia & Hercegovina	BK
Botswana	BC
Bouvet Island	BV
Brazil	BR
British Indian Ocean Territory	10
British Virgin Islands	VI
Brunei	BX
Bulgaria	BU
Burkina Faso	UV
Burma	BM
Burundi	BY
Cambodia	CB
Cameroon	CM
Canada	CA
Cape Verde	CV
Cayman Islands	CJ
-	CT
Central African Republic	
Chad	CD
Chile	CI
China (Mainland)	CH
China (Taiwan)	TW
Christmas Island	KT
Clipperton Island	IP
Cocos Islands	СК
Colombia	CO
Comoros	CN
Congo (Brazzaville)	CF
Congo (Kinshasa)	CG
Cook Islands	CW
Coral Sea Islands	CR
Costa Rica	CS
Cote d'Ivoire	IV
Croatia	HR
Cuba	CU

Cyprus	CY	Hungary	HU
Czech Republic	EZ	Iceland	IC
Denmark	DA	India	IN
Djibouti	DJ	Indonesia	ID
Dominica	DO	Iran	IR
Dominican Republic	DR	Iraq	IZ
East Timor	TT	Ireland	EI
Equador	EC	Isle of Man	IM
Egypt	EG	Israel	IS
El Salvador	ES	Italy	IT
England	UK	Ivory Coast (Cote d"Ivoire)	IV
Equatorial Guinea	EK	Jamaica	JM
Eritrea	ER		JN
Estonia	EN	Jan Mayen	JA
	ET	Japan	JE
Ethiopia	EU	Jersey	
Europa Island	E0 FA	Jordan Juan De Nova Island	JO
Falkland Islands (Islas Malvinas)			JU
Faroe Island	FO	Kazakhstan	ΚZ
Fiji	FJ	Kenya Kiribati	KE
Finland	FI	Kiribati	KR
France	FR	Korea, North	KN
French Guiana	FG	Korea, South	KS
French Polynesia	FP	Kuwait	KU
French Southern & Antarctic	FS	Kyrgyzstan	KG
Gabon	GB	Laos	LA
Gambia	GA	Latvia	LG
Gaza Strip	GZ	Lebanon	LE
Georgia	GG	Lesotho	LT
Germany	GM	Liberia	LI
Ghana	GH	Libya	LY
Gibraltar	GI	Liechtenstein	LS
Glorioso Islands	GO	Lithuania	LH
Golan Heights	SY	Luxembourg	LU
Great Britain	UK	Масао	MC
Greece	GR	Macedonia	MK
Greenland	GL	Madagascar	MA
Grenada	GJ	Malawi	MI
Guadeloupe	GP	Malaysia	MY
Guatemala	GT	Maldives	MV
Guernsey	GK	Mali	ML
Guinea	GV	Malta	MT
Guinea-Bissau	PU	Marshall Islands	RM
Guyana	GY	Martinique	MB
Haiti	HA	Mauritania	MR
Heard & McDonald Islands	HM	Mauritius	MP
Holy See (Vatican City)	VT	Mayotte	MF
Honduras	НО	Mexico	MX
Hong Kong	НК	Moldova	MD

Monaco	MN	Seychelles	SE
Mongolia	MG	Sierre Leone	SL
Montserrat	MH	Singapore	SN
Morocco	MO	Slovakia	LO
Mozambique	MZ	Slovenia	SI
Namibia	WA	Solomon Island	BP
Nauru	NR	Somalia	SO
Navassa Island	BQ	South Africa	SF
Nepal	NP	S. Georgia & S. Sandwich Islands	SX
Netherlands	NL	Spain	SP
Netherlands (Antilles)	NT	Spratley Islands	PG
New Caledonia	NC	Sri Lanka (Ceylon)	CE
New Zealand	NZ	Sudan	SU
Nicaragua	NU	Suriname	NS
Niger	NG	Svalbard	SV
Nigeria	NI	Swaziland	WZ
Niue	NE	Sweden	SW
Norfolk Island	NF	Switzerland	SZ
Norway	NO	Syria	SY
Oman (Muscat)	MU	Taiwan	ΤW
Pakistan	PK	Tajikistan	ΤI
Palau	PS	Tanzania	ΤZ
Panama	PM	Thailand	ΤH
Papua-New Guinea	PP	Тодо	то
Paracel Islands	PF	Tokelau Islands	TL
Paraguay	PA	Tonga	ΤN
Peru	PE	Trinidad & Tobago	TD
Philippines	RP	Tromelin Island	ΤE
Pitcairn Island	PC	Tunisia	TS
Poland	PL	Turkey	ΤU
Portugal	PO	Turkmenistan	ΤХ
Qatar	QA	Turks & Caicos Islands	ΤK
Reunion	RE	Tuvalu	ΤV
Romania	RO	Uganda	UG
Russia	RS	Ukraine	UP
Rwanda	RW	United Arab Emirates	AE
Saint Helena	SH	United Kingdom	UK
Saint Kitts & Nevis	SC	United States of America	US
Saint Lucia	ST	Uruguay	UY
Saint Pierre & Miquelon	SB	Uzbekistan	UZ
Saint Vincent & Grenadines	VC	Vanuatu	NH
Samoa	WS	Vatican City	VT
San Marino	SM	Venezuela	VE
Sao Tome & Principe	TP	Vietnam	NM
Saudi Arabia	SA	Virgin Islands (British)	VI
Scotland	UK	Wales	UK
Senegal	SG	Wallis & Futuna	WF
Serbia & Montenegro	ΥI	West Bank	WB

Western Sahara	WI
Yemen	ΥM
Zambia	ZA
Zimbabwe	ZI

Unknown	XX
Various (more than one)	XV

ZIP Code Validation Table

State <u>Code</u>	<u>State</u>	Valid <u>Range</u>
AL	Alabama	350 – 369
AK	Alaska	995 – 999
AS	American Samoa	967
AZ AR	Arizona Arkansas	850 – 865 716 – 729
	Airailsas	755
CA	California	900 – 966
CO	Colorado	800 – 816
СТ	Connecticut	060 – 069
DE	Delaware	197 – 199
DC	District of Columbia	
FM	Federated States of Micronesia	969
FL	Florida	320 – 349
GA	Georgia	300 – 319
<u></u>	•	398 – 399
GU	Guam	969
HI	Hawaii	967 – 968
ID IL	Idaho Illinois	832 – 838 600 – 629
IN	Indiana	460 - 479
IA	lowa	400 – 479 500 – 528
KS	Kansas	660 - 679
KY	Kentucky	400 – 427
LA	Louisiana	700 – 714
ME	Main	039 – 049
MH	Marshall Islands	969
MD	Maryland	206 – 219
MA	Massachusetts	010 – 027
N / I		055
MI MN	Michigan Minnesota	480 – 499 550 – 567
MS	Mississippi	386 – 397
MO	Missouri	630 - 658
MT	Montana	590 – 599
NE	Nebraska	680 - 693
NV	Nevada	889 - 898
NH	New Hampshire	030 - 038
NJ	New Jersey	070 – 089

State <u>Code</u>	<u>State</u>	Valid <u>Range</u>
NM NY	New Mexico New York	870 – 884 005 063 090 – 149
NC ND MP	North Carolina North Dakota Northern Mariana Islands	269 – 289 269 – 289 580 – 588 969
OH OK OR PW PA PR	Ohio Oklahoma Oregon Palau Island Pennsylvania Puerto Rico	430 - 459 730 - 749 970 - 979 969 150 - 196 006 - 009
RI SC SD TN TX	Rhode Island South Carolina South Dakota Tennessee Texas	028 - 029 290 - 299 570 - 577 370 - 385 750 - 799 885
UT VT VA	Utah Vermont Virginia	840 - 847 050 - 059 201 220 - 246
VI WA WI WV WY	Virgin Islands Washington Wisconsin West Virginia Wyoming	008 980 – 994 530 – 549 247 – 268 820 – 831

Military Post Offices

AA	Armed Forces	340
	Americas (Excep	t Canada)
AE	Armed Forces	090 – 098
	Africa, Canada	
	Europe, Middle East	
AP	Armed Forces	962 – 966
	Pacific	

Attachments – Standard Abbreviations

Word Abbreviation

Accounting ACCTG Accounts ACCTS Administration ADMIN Air Force Base AFB Apartment APT American AMER Associates ASSOC Association ASSN Avenue AVE Bank BK Banking BKG Branch BR Broadway BWY Building BLDG Casualty CASLTY Center CTR Certificate CERT Certificate of Deposit CD Circle CRL Commerce CMRC Commission COMM Company CO Comptroller COMPT Consolidated CONS Construction CONST Corporation CORP Cooperative COOP County CNTY Court CT Credit Union CU Department DEPT Deposit DEP Distributor, Distributing, DISTB District DIST **Division DIV** Drive DR East, Eastern E Electrical ELEC Exchange XCHG Federal FED Federal Credit Union FCU Finance FIN Financial FINCL First National Bank FNB Foreign FORGN

Word Abbreviation

General GEN Government GOVT Group GRP Headquarters HDQTRS Highway HWY Hospital HOSP Incorporated INC Industry(ies) INDUST Information INFO Institute, Casino or Card Club INST Insurance INS International INT Lane LN Limited LTD Management MGMT Manufacturers MFTRS Manufacturing MFG Market MKT Municipal MUN Mutual MUTL National NAT Northeast NE Northern, North NO Northwest NW Organization ORG Park PK Place PL Plaza PLZ Post Office PO Railroad RR Realty RLTY Road RD Room RM Route RT Savings SAV Savings and Loan SL Security SEC Service SERV Southeast SE Southern, South SO Southwest SW Street ST Suite STE Transportation TRANS Trust TR

Standard Abbreviations Continued

Word Abbreviation

University UNIV US Air Force USAF US Army USA US Coast Guard USCG US Marine Corps USMC US Navy USN Village VLGE Western, West W

Note: All abbreviations listed may be changed from singular to plural, and vice versa, by the addition or deletion of the letter 's'.

Attachments - Name Editing Instructions

- A. Delete any titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, or Trustee. Do not delete suffixes that distinguish family members such as Jr., Sr., III or IV. Suffixes should be edited to follow the middle initial (e.g. Doe\ John\L Jr).
- B. Delete all punctuation (e.g., 'JR.' would be submitted as 'JR').
- C. Do not use the following words in fields:
 - a. THE
 - b. SEE ABOVE
 - c. SAME AS ABOVE
 - d. SAME
 - e. COMPUTER GENERATED
 - f. SIGNATURE CARD
 - g. NONE
 - h. NON CUSTOMER
 - i. CUSTOMER
 - j. T/A
 - k. VARIOUS
 - I. OTHER
 - m. N/A
 - n. UNKNOWN
- D. Spanish surnames. Care must be taken in formatting Spanish surnames as the names are usually written in the order of first name, father's last name, and then mother's last name, i.e., Juan Vega Santiago. The father's last name, Vega would be used as the last name; however, both last names should be retained. Example: Vega/Santiago/Juan.
- E. Place a slash ('/') before each name (including suffixes) except the first surname (e.g., <u>White</u>/Elizabeth/A) but not between compound names such as 'Van Gogh'.
- F. If only the surname of an individual is present, then place a slash after it (e.g., Jones/).
- G. If a non-individual is listed, do not enter slashes between names. Delete the word, 'The' whenever it appears.
- H. If an organization has a separate "doing business as" (DBA) name, enter the organization's legal and business names (e.g., "Smith Enterprises, Inc., DBA Smith Casino Tours").

Attachments - Definition of Terms

*Account T*he customer's account *Number* as related to the transaction being reported, if any.

Corrected A report that is used to correct a **Report** that was previously filed.

Currency For SAR purposes, currency is the coin and paper money of the United States or any country, which is circulated and customarily used and accepted as money.

- **DBA** Doing Business As
- **DCC** The Detroit Computing Center
- EIN Employer Identification Number
- *File* For purposes of this procedure, a file consists of all magnetic cartridge or diskette records submitted by a transmitter.

Resolution Code Code which signifies who is to receive the correspondence relation to transactions.

SAR A Suspicious Activity Report by Financial Institution (Form TDF 90.22-47).

SSN Social Security Number

Suspect For SAR purposes, a suspect is a person with questionable/suspicious activities.

Transactor A person(s) who conducts a transaction.

Transmitter Person(s) or organization(s) who prepare the magnetic tape files.

Transmitter Control

Code (TCC) An eight-character number assigned by DCC to the transmitter prior to actual reporting on magnetic media. This code is inserted in most records of your files and must be present before the file can be processed. An Application for Magnetic Media Reporting must be filed with DCC to receive this number.