

CODE 1E – EMPLOYER RECORD
LENGTH=128

LOCATION	FIELD	LENGTH	SPECIFICATION
1-2	Record Identifier	2	Constant '1E'
3-6	Payment (tax) year	4	Enter last month and year for the calendar quarters for which this report applies. EX '0399'= JANUARY-MARCH
7-15	EMPLOYER IDENTIFICATION NUMBER (EIN)	9	NUMERIC DATA ONLY
16-24	STATE/LOCALE 69 NUMBER	9	NOT USED
25-74	EMPLOYER NAME	50	LEFT JUSTIFY AND FILL WITH BLANKS
75-114	STREET ADDRESS	40	LEFT JUSTIFY AND FILL WITH BLANKS
115-128	BLANK	14	NOT USED

CODE 2E – EMPLOYER RECORD
LENGTH=128

LOCATION	FIELD	LENGTH	SPECIFICATION
1-2	RECORD IDENTIFIER	2	CONSTANT '2E'
3-27	CITY	25	LEFT JUSTIFY AND FILL WITH BLANKS
28-29	STATE	2	USE STANDARD FIPS POSTAL ABBREVIATION
30-37	BLANK	8	NOT USED
38-42	ZIP CODE EXTENSION	5	4 DIGIT EXTENSION OF ZIP CODE. PLACE HYPHEN (-) IN POSITION 38. IF NOT AVAILABLE LEAVE BLANK
43-47	ZIP CODE/FOREIGN POSTAL CODE	5	ENTER A VALID ZIP CODE
48-57	BLANK	10	NOT USED
58-66	OTHER EIN	9	NOT USED
67-73	EMPLOYER'S ACCOUNT NUMBER	7	RIGHT JUSTIFY AND ZERO FILL. THIS REPRESENTS THE LAST 7 DIGITS OF BERKHEIMER – ASSIGNED ACCOUNT NUMBER. EX: 99999 NO 9999999 IN THIS EXAMPLE, 9999999 IS THE EMPLOYER'S ACCOUNT NUMBER
74-78	EMPLOYER'S TAXING JURISDICTION	5	RIGHT JUSTIFY AND ZERO FILL. FIRST 5 DIGITS OF BERKHEIMER- ASSIGNED ACCOUNT NUMBER. EX: 99999 NO 9999999 IN THIS EXAMPLE, 99999 IS THE EMPLOYER'S TAXING JURISDICTION
79-128	BLANK	50	NOT USED

CODE 1S – SUPPLEMENTAL RECORD
LENGTH = 128

LOCATION	FIELD	LENGTH	SPECIFICATION
1-2	RECORD IDENTIFIER	2	CONSTANT '1S'
3-11	SOCIAL SECURITY NUMBER	9	IF NOT AVAILABLE, ENTER LETTER '1' IN POSITION 3 AND LEAVE POSITION 4-11 BLANK
12-38	EMPLOYEE NAME	27	LEFT JUSTIFY AND FILL WITH BLANKS. FORMAT: LAST NAME FOLLOWED BY COMMA AND A SPACE THEN FIRST NAME. EX: SMITH, JOHN
39-78	STREET ADDRESS	40	LEFT JUSTIFY AND FILL WITH BLANKS
79-103	CITY	25	LEFT JUSTIFY AND FILL WITH BLANKS
104-105	STATE	2	USE STANDARD FIPS POSTAL ABBREVIATION
106-113	BLANK	8	NOT USED
114-118	ZIP CODE EXTENSION	5	4 DIGIT EXTENSION OF ZIP CODE. PLACE HYPHEN (-) IN POSITION 114. IF NOT AVAILABLE, LEAVE BLANK.
119-123	ZIP CODE	5	VALID ZIP CODE
124	BLANK	1	NOT USED
125-126	STATE CODE	2	NOT USED
127-128	OPTIONAL CODE	2	NOT USED

CODE 2S – SUPPLEMENTAL RECORD
LENGTH = 128

LOCATION	FIELD	LENGTH	SPECIFICATION
1-2	RECORD IDENTIFIER	2	CONSTANT '2S'
3-14	BLANK	12	NOT USED
15-18	REPORTING PERIOD	4	ENTER LAST MONTH AND YEAR FOR CALENDAR QUARTER FOR WHICH THIS REPORT APPLIES. EX: '0399' January – March
19-27	STATE QUARTERLY UNEMPLOYMENT INSURANCE TOTAL WAGES	9	NOT USED
28-36	STATE QUARTERLY UNEMPLOYMENT INSURANCE TOTAL TAXABLE WAGES	9	NOT USED
37-38	BLANK	2	NOT USED
39-42	BLANK	4	NOT USED
43-46	BLANK	4	NOT USED
47-51	TAXING ENTITY CODE	5	NOT USED
52-53	STATE CODE	2	NOT USED
54-62	STATE TAXABLE WAGES	9	NOT USED
63-70	STATE INCOME TAX WITHHELD	8	NOT USED
71-80	OTHER STATE DATA	10	NOT USED
81	TAX TYPE CODE	1	NOT USED
82-86	TAXING ENTITY CODE	5	NOT USED
87 - 95	LOCAL TAXABLE WAGES	9	RIGHT JUSTIFY AND ZERO FILL. NO COMMA'S – NO DECIMALS
96- 102	LOCAL INCOME TAX WITHHELD	7	RIGHT JUSTIFY AND ZERO FILL. NO COMMA'S – NO DECIMALS.
103-109	BLANK	7	NOT USED
110-114	LOCAL TAXING JURISDICTION	5	NOT USED
115-128	BLANK	14	NOT USED

FEDERAL INFORMATION PROCESSING STANDARD
(FIPS 5-2) POSTAL ABBREVIATIONS AND NUMERIC CODES

Abbreviation Numeric code Abbreviation Numeric code

Alabama	AL	01	Montana	MT	30
Alaska	AK	02	Nebraska	NE	31
Arizona	AZ	04	Nevada	NV	32
Arkansas	AR	05	New Hemisphere	NH	33
California	CA	06	New Jersey	NJ	34
Colorado	CO	08	New Mexico	NM	35
Connecticut	CT	09	New York	NY	36
Delaware	DE	10	North Carolina	NC	37
Dist of Columbia	DC	11	North Dakota	ND	38
Florida	FL	12	Ohio	OH	39
Georgia	GA	13	Oklahoma	OK	40
Hawaii	HI	15	Oregon	OR	41
Idaho	ID	16	Pennsylvania	PA	42
Illinois	IL	17	Rhode Island	RI	44
Indiana	IN	18	South Carolina	SC	45
Iowa	IA	19	South Dakota	SD	46
Kansas	KS	20	Tennessee	TN	47
Kentucky	KY	21	Texas	TX	48
Louisiana	LA	22	Utah	UT	49
Maine	ME	23	Vermont	VT	50
Maryland	MD	24	Virginia	VA	51
Massachusetts	MA	25	Washington	WA	53
Michigan	MI	26	West Virginia	WV	54
Minnesota	MN	27	Wisconsin	WI	55
Mississippi	MS	28	Wyoming	WY	56
Missouri	MO	29			

TERRITORIES AND POSSESSIONS

American Samoa	AS
Guam	GU
Puerto Rico	PR
Virgin Islands	VI
Northern Mariana Islands	MP

MILITARY POST OFFICES (APO AND FPO)

Canada, Europe, Africa and the Middle East	AE
Central America and South America	AA
Alaska and the Pacific	AP
Contingency Operations	AC



MAGNETIC FILING OF EMPLOYER'S QUARTERLY
EARNED INCOME TAX RETURN

Date: _____
Employer's account Number(s): _____
(List all account numbers for which _____
data is being submitted) _____

Employer's Federal Identification number: _____
Tax Year and Quarter of filing: Quarter _____ Year _____

Amount of Remittance: \$ _____
(If remitting for multiple employers, please list remittance amounts for each
employer)

Check Number: _____

Type of media Enclosed (please circle):

- E-mail
- CD ROM
- 3 1/2 Diskette

Number of records (if known): _____

Contact person and Telephone Number
(if questions) _____

Note!! Please include employer's Berkheimer account number, year and quarter for which the data is being submitted on the media label so that we may properly credit the account.

For office use only:

Date received: _____
Date loaded: _____

50 N. SEVENTH ST . BANGOR PA 18013 . 610-588-0965
