

South Carolina

Interface Specifications: SUITS - Wage Report and Payment File Specifications

Version 1.7

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Interface Specification:
SUITS - Wage Report and Payment File Specifications

1 INTRODUCTION – TAX AND WAGE REPORTING

The system allows employers and agents to report wages earned and to submit their required reports online. Employers and agents will be able to submit the reports using manual entry, copy from a previous quarter or they can upload an electronic file containing the wage information. This document will describe the different file types that are available and the specific data layouts for each file type. This document also provides instructions on how to format, read, and use each file that is used for uploading data into the system. The individual chapters contain data upload file and the corresponding record layouts.

1.1 Project Scope

The system includes the following project scope:

1.1.1 Processing and Adjusting Wage and Tax Reports

- Submit quarterly created by:
  - Direct data entry of wage records
  - Submitting of no wage(s) report
  - Resuming submission of previously started wage and tax report
  - Data upload in standard file formats (ICESA, EFW2, XML, and CSV)
- Adjust wage and tax detail via the ‘Amend Prior Report’ option
- View history of wage and tax reports submissions

1.2 System Functionalities

This use case includes the following system functionalities:

1.2.1 Employer Functions

The system will include necessary functionalities for employers to submit and review information related to tax and wage reporting:

- View and maintain account tax and wage information
- View history of wage and tax report submissions for an employer's account
- Submit quarterly wage reports
    - Single employer filings by data upload in standard data format (ICESA, EFW2, XML, and CSV)
- Amend quarterly wage reports

1.2.2 Staff Functions

The system will include necessary functionalities for agency staff to review information related to recent portal activities on employer accounts:

- View recent portal activities related to reporting submissions
- Perform quarterly wage report functions on behalf of the employer
- Perform communication functions with employers and agents
- View employer accounts and account activities performed by an employer or an agent

1.2.3 Agent Functions

The system will include the following functionalities for agents:

- View and maintain employer tax and wage information within the agent's authorization
- View history of wage and tax report submissions for an employer's account
- Submit quarterly wage reports
    - Single employer or multiple employer filings by data upload in standard data format (ICESA, EFW2, XML, and CSV)
- Amend quarterly wage reports

1.3 Interface File Definitions

1.3.1 Employer Filing of Wage Reports

Employers can file original or amended wage reports using one of the four file formats. Detailed information describing formatting rules, field positions, and content is in the following chapters:

- Chapter 2: Employer ICESA Interface File Definition
- Chapter 4: Employer EFW2 Interface File Definition
- Chapter 6: Employer XML Interface File Definition
- Chapter 8: Employer CSV Interface File Definition

Each file may only contain the information for the submitter and for one (1) quarter.

All file types can be submitted via the employer wage file upload processor.

1.3.2 Agent Filing of Wage Reports

Agents, authorized by employers, can submit wage information for multiple employers and / or reporting periods, using the same file formats. Detailed information describing formatting rules, field positions, and content is in the following chapters:

- Chapter 3: Agent ICESA Interface File Definition
- Chapter 5: Agent EFW2 Interface File Definition
- Chapter 7: Agent XML Interface File Definition
- Chapter 9: Agent CSV Interface File Definition

The file can contain original filings and adjustments, however, an original and amendment for the same employer and reporting period cannot be included in the same file.

All file types can be submitted via the agent wage file upload processor.

1.4 Wage file processing and confirmation

This section outlines how the wages file received will be processed in SUITS and how to view and download the confirmation reports.

1.4.1 Employer Wage File Validation

When an employer uploads the wage file, system will perform the following validations before accepting the file.

a. File type selected match the extension of the uploaded file.

i. ICESA file should have a file extension of .txt
ii. EFW2 file should have a file extension of .txt
iii. CSV file should have a file extension of .csv
iv. XML file should have a file extension of .xml

b. Record length for the selected file type is correct.
   i. For ICESA, the length of the records should be 256.
   ii. For EFW2, the length of the records should be 512.
   iii. For CSV, all the columns defined are populated.
   iv. For XML, all the tags defined are provided.
c. File layout for the selected file type is correct.
   i. For ICESA, the order of the records should be A, E, S, T, F
   ii. For EFW2, the order of the records should be RA, RE, RW, RT, RF
   iii. For CSV, the order of the records should be type 0, type 1, type, type 3
   iv. For XML, the order of the records should be <submitter><wage><totals>
d. The wages reported are for the quarter selected
e. No wages indicator is set to 1 if there are wage records in the file or no wage indicator is set to 0 if there are no wages in the file
f. Adjustment Reason is set to 0 if the wages reported are original wages. Adjustment Reason is set greater than 0 if the wages report are an amendment
g. Validate all the required fields are populated in correct format and length

After the file is accepted, and if the number of employee records (SSN records) are less than 50, then system will read and populate the wage data into the manual wage entry screen. Employers can continue to review and submit the wages online. If the number of employee records (SSN records) are equal to or more than 50, then system will accept the file and provide a confirmation number. System will also send a confirmation email to the email address provided during wage file upload with the confirmation number.

1.4.2 Employer Wage File Confirmation Report

After the file is accepted and processed, system will send a processing email with the confirmation number, status of file processed and instruction on how to view the processing report. *System will either process the file or reject the file. There is no partial processing of wage records*. If the file was rejected, please fix the errors and upload the file again. Please follow the instructions below to view the status of the files uploaded and to view individual records with the details of errors.

To view a file upload summary report:

1) Login to your SUITS account.
2) Select the ‘Reports’ link from the left navigation bar.
3) Select “Employer File Submission Report” from the select report dropdown.
4) Enter the confirmation number and click view.
5) The search shows the details of the file and the status of each record from the file.
6) This report can be downloaded to Excel, Word or PDF from the report toolbar at the top the report.

To search by individual records:

1) Login to your SCDEW UI account.
2) Select the 'Wage Summary' link in the left navigation bar.
3) Select the 'File Details' tab.
4) Enter the confirmation number in the search criteria and click 'Search'.
5) From the search results displayed, click on the 'Confirmation Number' link.
7) A list of employers who were included in the file appears with processing results for each employer.
8) Click the 'Employer ID' for a detailed list of processing results for all the employee records.

1.4.3 Agent Wage File Validation

When an agent uploads the wage file, system will perform the following validations before accepting the file.

h. File type selected match the extension of the uploaded file.
   i. ICESA file should have a file extension of .txt
   ii. EFW2 file should have a file extension of .txt
   iii. CSV file should have a file extension of .csv
   iv. XML file should have a file extension of .xml
i. Record length for the selected file type is correct.
   i. For ICESA, the length of the records should be 256.
   ii. For EFW2, the length of the records should be 512.
   iii. For CSV, all the columns defined are populated.
   iv. For XML, all the tags defined are provided.
j. File layout for the selected file type is correct.
   i. For ICESA, the order of the records should be A, E, S, T, F
   ii. For EFW2, the order of the records should be RA, RE, RW, RT, RF
   iii. For CSV, the order of the records should be type 0, type 1, type, type 3
   iv. For XML, the order of the records should be <submitter><wage><totals>

After the file is accepted, system will provide a confirmation number on the screen and also send a confirmation email to the email address provided during wage file upload with the confirmation number. The file will be processed via batch. In the batch system will perform the following validation for each of the employer sets provided in the file

a. No wages indicator is set to 1 if there are wage records in the file or no wage indicator is set to 0 if there are no wages in the file
b. Adjustment Reason is set to 0 if the wages reported are original wages. Adjustment Reason is set greater than 0 if the wages report are an amendment
c. Validate all the required fields are populated in correct format and length

1.4.4 Agent Wage File Confirmation Report

After the file is processed, system will send a processing email with the confirmation number, status of file processed and instruction on how to view the processing report. Agent files can have one of the following 3 status.

Processed – All the employers submitted in the file are processed

Partially Processed – Some employers submitted in the file are processed and some are rejected. Please fix the employers that are rejected and upload a new file only with these employers.

Rejected – All the employers submitted in the file are rejected. All the employer records has to be fixed and uploaded again.

Please follow the instructions below to view the status of the files uploaded and to view individual records with the details of errors.

To view a file upload summary report:

1) Login to your SUITS account.
2) Select the 'Reports' link from the left navigation bar.
3) Select "Employer File Submission Report" from the select report dropdown.
4) Enter the confirmation number and click view.
5) The search shows the details of the file and the status of each record from the file.
6) This report can be downloaded to Excel, Word or PDF from the report toolbar at the top the report.

To search by individual records:

1) Login to your SCDEW UI account.
2) Select the 'Wage Summary' link in the left navigation bar.
3) Select the 'File Details' tab.
4) Enter the confirmation number in the search criteria and click 'Search'.
5) From the search results displayed, click on the 'Confirmation Number' link.
7) A list of employers who were included in the file appears with processing results for each employer.
8) Click the 'Employer ID' for a detailed list of processing results for all the employee records.

2 EMPLOYER ICESA INTERFACE REQUIREMENTS

2.1 General Information

Employers can file original or amended wage reports using this file format, however, each file should only contain the information for one (1) quarter. The following records should be included in each file:

- There should be one (1) record type A in the file
- There can be multiple type 'S' records in the file
    - There can only be one (1) record type 'S' for a SSN / employer / reporting period
- There should be only one (1) type 'T' record for employers
    - If the employer paid no wages during the quarter, include a type 'T' record and no type 'S' records
- There should be one (1) record type 'E' in the file
- There should be one (1) record type 'F' in the file

Report the actual wages paid for amended wage records. Do not report the difference between the amended and original wages.

2.2 Employer ICESA Record Layouts

2.2.1 Record Type A

The record type 'A' record will contain information about who is submitting the file. Information contained in this record includes:

- Name and address for the submitter
- Contact information for the submitter

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required
1- 1	Record Identifier	1	Should always be A	Yes
2 – 5	Blank	4	Fill with spaces	Fill with spaces
6 – 14	Submitters FEIN	9	The business FEIN; numbers only, do not include the hyphen	Yes
15 – 23	Blanks	9	Fill with spaces	Fill with spaces
24 – 73	Business Name	50	The legal name of the business submitting the file Left justify the name and fill with spaces if it is less than fifty (50) characters	Yes
74 – 113	Business Address	40	The mailing address of the business submitting the file Left justify the address and fill with spaces if it is less than forty (40) characters	No
114 – 138	Business City	25	The mailing address city of the business submitting the file Left justify the city and fill with spaces if it is less than twenty-five (25) characters	No
139 - 140	Business State FIPS code	2	The two character FIPS code for the business submitting the file. 45 for South Carolina	Yes

Location	Contents of Field	Field Length	Description	Required
141 - 153	Blanks	13	Fill with spaces	Fill with spaces
154 - 158	Transmitter Zip Code	5	The mailing address ZIP Code of the business submitting the file Include leading zeros (0)	No
159 - 163	Transmitter ZIP code extension (+4)	5	The mailing address ZIP Code extension of the business submitting the file If you include this, you must include the hyphen in position one-hundred and fifty-nine (159) If unknown, fill with spaces	No, fill with spaces if you do not include the + four (4)
164 - 193	Transmitter Contact Full Name	30	The first and last name of individual from submitting business who is responsible for the accuracy and completeness of the wage report Format the names as: First name<space>last name Left justify the name and fill with spaces if less than thirty (30) characters	Yes
194 - 203	Transmitter Contact Telephone Number	10	Contact telephone number, include the area code Numbers only, no special characters	No
204 - 207	Transmitter Contact Telephone Extension	4	Contact telephone number extension (if any) If there is no extension, fill with spaces	No, fill with spaces if there is no extension
208- 247	Transmitter Email Address	40	Contact Email Address	Yes
248 - 275	Blanks	28	Fill with spaces	Fill with spaces

2.2.2 Record Type E

The record type 'E' record should contain information about the employer for whom the report is being submitted. Information contained in this record includes:

- FEIN of the employer
- Employer's name and address
- State unemployment insurance account number
- Number of employee records

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Should always be E	Yes
2 – 5	Report Year	4	Year for which the report is being filed Format as YYYY	Yes
6 – 14	Federal EIN (FEIN)	9	The business FEIN; numbers only, do not include the hyphen	Yes
15 – 23	Blanks	9	Fill with spaces	Fill with spaces
24 – 73	Employer's Legal Name	50	The first fifty (50) characters of the employer's legal name Left justify and fill with spaces if the name is less than fifty (50) characters	Yes
74 – 113	Address where work is performed in state	40	The address where work is performed in the state Left justify and fill with spaces if the address is less than forty (40) characters	Yes
114 – 138	City	25	Contains <'STATE CITY"> followed by fifteen (15) spaces	Yes
139-140	Employer State	2	Must be 'STATE'	Yes
141 – 148	Blanks	8	Fill with spaces	Fill with spaces
149 – 153	Zip Code	5	The business ZIP Code	Yes

Location	Contents of Field	Field Length	Description	Required?
154 – 158	Zip Code Extension	5	Four (4) digit extension of ZIP Code, being sure to include the hyphen in position one-hundred and fifty-four (154)	No
159 – 166	Blank	8	Fill with spaces	Fill with spaces
167 - 170	Taxing Entity Code	4	Contains 'UTAX'	Yes
171 - 172	State Identifier Code	2	Will be 45 always	No
173 - 187	State Unemployment Insurance Account Number	15	The state UI employer account number Left justify and fill with spaces	Yes
188 - 189	Report quarter	2	The last month of the calendar quarter to which the report applies. "03" = First quarter "06" = Second quarter "09" = Third quarter "12" = Fourth quarter	Yes
190 - 190	No wage report indicator	1	If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1) There should never be a one (1) where there are not type S records in the file, and there should never be a zero (0) when there are type S records in the file	Yes
191 - 275	Blanks	85	Fill with spaces	Fill with spaces

2.2.3 Record Type S

The record type 'S' record is used to report wage and tax data for an individual employee. Information contained in this record includes:

- SSN
- Wages paid
- Name
- Employer account number
- Number of hours worked

There should be one (1) record for each SSN / employer and account ID / year and quarter.

Do not generate a record type 'S' if there were no wages paid to the employee during the quarter.

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Should always be S	Yes
2 – 10	Social Security Number	9	Employee's Social Security Number (SSN)	Yes
11 – 30	Employee Last Name	20	Employee's last name Left justify and fill with spaces if it is less than twenty (20) characters	Yes
31 – 42	Employee First Name	12	Employee's first name Left justify and fill with spaces if it is less than twelve (12) characters	Yes
43 – 43	Employee Middle Initial	1	Employee's middle initial If no middle initial, fill with spaces	No

Location	Contents of Field	Field Length	Description	Required?
44 – 45	State FIPS Code	2	The state FIPS postal numeric code for the state to which wages are being reported. 45 for South Carolina	Yes
46 – 63	Blanks	18	Fill with spaces	Fill with spaces
64 – 77	State QTR Unemployment Insurance Total Wages	14	Employee's UI covered wages Include the cents but no decimal Right justify and pad with zeros (0) For example 25.64 should be included as: 00000000002564	Yes
78 - 131	Blanks	54	Fill with spaces	Fill with spaces
132 - 134	Number of Hours Worked	3	The number of hours the employee worked in the reporting period Right justify if the number is less than three (3) characters and pad with zeros (0)	No
135-141	SOC Code	7	SOC code of the employee Ex. 11-0000	No
142 - 146	Blanks	5	Fill with spaces	Fill with spaces
147 - 161	State Unemployment Insurance Account Number	15	Employer account number Left justify and fill with spaces	Yes

Location	Contents of Field	Field Length	Description	Required?
162-164	Location/Unit	3	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location	No
165 - 209	Blanks	45	Fill with spaces	Fill with spaces
210 - 210	Owner/Officer Relationship	1	Include the owner/officer relationship of the worker Zero (0) for Employee One (1) for Officer	Yes
211 - 211	Blanks	1	Fill with spaces	Fill with spaces
212-212	Employed on payroll for on 12th of month, Month 1	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No
213-213	Employed on payroll for on 12th of month, Month 2	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No

Location	Contents of Field	Field Length	Description	Required?
214-214	Employed on payroll for on 12th of month, Month 3	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter0=No 1=Yes	No
215 - 220	Reporting Quarter and Year	6	The last month and year for the calendar quarter for which this report applies, e.g., "032014" for Jan-Mar of 2014	Yes
221 - 226	Month the employee was first employed	6	The month and year when the employee was first employed , e.g., "031997"	No, fill with spaces if there is no data
227 - 232	Month the employee became separated from employment	6	The month and year when the employee was separated, e.g., "031997"	No, fill with spaces if there is no data
233-247	Out of State QTR Unemployment Insurance Taxable Wages	15	Employee's Out of State UI taxable wages Include the cents but no decimal Right justify and pad with zeros (0) For example 25.64 should be included as: 000000002564	Yes, if Out of State Wages – State Code is provided
248-249	Adjustment Reason	2	Numeric - Reason code for adjustment to employee wages Zero (0) means original filing Valid adjustment reason codes are one (1) through ten (10) Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Yes

Location	Contents of Field	Field Length	Description	Required?
250 - 251	Out of State Wages – State Code	2	State code/abbreviation associated with Out of State wages reported for employee	Yes, if Out of State Wages are provided
252 - 275	Blanks	24	Fill with spaces	Fill with spaces

2.2.4 Record Type T

The record type 'T' record should contain the totals for all record type 'S' records reported for the employer / reporting period. Information contained in this record includes:

- Total number of employees
- Total wages paid
- Total taxable wages
- Total non-taxable wages
- Total employment on the 12th of each month during the reporting period

Report the total number of employees that were on the payroll for the payroll period that includes the 12th of the month for each month of the quarter.

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Should always be T	Yes
2 - 8	Total Number of Employees	7	The total number of "S" records in the file Right justify and pad with zeros (0)	Yes
9 - 26	Blank	18	Fill with spaces	Fill with spaces

Location	Contents of Field	Field Length	Description	Required?
27 - 40	State QTR Unemployment Insurance Total Wages For Employer	14	Quarterly gross wages subject to UI taxes - total of all gross wages. Include the cents but no decimal Right justify and pad with zeros (0) For example 25.64 should be included as: 00000000002564	Yes
41 - 54	State QTR Unemployment Insurance Excess Wages for Employer	14	Quarterly excess UI wages for the employer Include the cents but no decimal Right justify and pad with zeros (0) For example 25.64 should be included as: 00000000002564	Yes
55 - 68	State QTR Unemployment Insurance Taxable Wages For Employer	14	Quarterly taxable UI wages for the employer Include the cents but no decimal Right justify and pad with zeros (0) For example 25.64 should be included as: 00000000002564	Yes
69 - 81	Blank	13	Fill with spaces	Fill with spaces
82 -87	Reporting Quarter and Year	6	The last month and year for the calendar quarter for which this report applies, e.g., "032014" for Jan-Mar of 2014	Yes
88 - 226	Blank	139	Fill with spaces	Fill with spaces
227 - 233	Month 1 Employment for Employer	7	Total employees for the employer/period who were on the payroll for the payroll period that includes the 12th of the Month for the first month of the quarter Right justify and pad with zeros (0)	Yes

Location	Contents of Field	Field Length	Description	Required?
234 - 240	Month 2 Employment for Employer	7	Total employees for the employer/period who were on the payroll for the payroll period that includes the 12th of the month for the second month of the quarter Right justify and pad with zeros (0)	Yes
241 - 247	Month 3 Employment for Employer	7	Total employees for the employer/period who were on the payroll for the payroll period that includes the 12th of the month for the third month of the Quarter Right justify and pad with zeros (0)	Yes
248 - 275	Blanks	28	Fill with spaces	Fill with spaces

2.2.5 Record Type F

The record type ‘F’ indicates the end of the file and must be the last data record on each file submitted. Information contained in this record includes:

- Total number of record type ‘S’ records in the file
- Total gross wages
- Total employment

The record type ‘F’ must appear only once on each file.

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Should always be F	Yes

Location	Contents of Field	Field Length	Description	Required?
2 - 11	Total Number of Employees in File	10	The total number of "S" records in the entire file Right justify and pad with zeros (0)	Yes
12 – 40	Blank	29	Fill with spaces	Fill with spaces
41 - 55	Quarterly State Unemployment Insurance Total Wages in File	15	Total of quarterly gross wages subject to U.I. tax in this field on all "S" records in the file Right justify and pad with zeros (0) Include the cents but no decimal For example $25.64 should be included as: 000000000002564	Yes
56 – 275	Blank	220	Fill with spaces	Fill with spaces

2.3 Download Sample File for Employer ICESA File Layout

2.3.1 Original Submission

See Section 12.4 for a sample employer ICESA file layout.

2.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN at position 177. A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with the proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample employer ICESA file layout for amendment.

3 AGENT ICESA INTERFACE REQUIREMENTS

3.1 General Information

Agents can submit wage information for multiple employers and reporting periods in the file. There is no need to generate a separate file for each employer and reporting period. The file can also contain original filings and adjustments in the same file, however, an original and amendment for the same employer and reporting period cannot be included in the same file. The following rules for individual record types apply:

- There should be only one (1) record type ‘A’ in the file
- There can be multiple record type ‘E’ records in the file
  - There should be a record type ‘E’ for each employer / reporting period
  - If the employer had no wages to report in the quarter, then include a record type ‘E’ record for the period, but no record type ‘S’ records
- There can be multiple record type ‘S’ records in the file
  - There can only be one (1) record type ‘S’ for an SSN / employer / reporting period
- There can be multiple record type ‘T’ records in the file
  - There should be a record type ‘T’ for each employer / reporting period
  - If the employer had no wages to report in the quarter, then include a record type ‘T’ record for the period, but no record type ‘S’ records

- There should be one (1) record type ‘F’ in the file

Report the actual wages paid for amended wage records. Do not report the difference between the amended and original wages.

If a SSN record is rejected for any reason, then the entire employer record associated with that SSN will be rejected.

3.2 Agent ICESA Record Layouts

3.2.1 Record Type A

The record type ‘A’ record will contain information about who is submitting the file. Information contained in this record includes:

- Name and address for the submitter
- Contact information for the submitter

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Should always be A	Yes
2 – 5	Blank	4	Fill with spaces	Fill with spaces
6 – 14	Submitters FEIN	9	The business FEIN; numbers only, do not include the hyphen	Yes
15 – 23	Blanks	9	Fill with spaces	Fill with spaces
24 – 73	Business Name	50	The legal name of the business submitting the file Left justify the name and fill with spaces if it is less than fifty (50) characters	Yes
74 – 113	Business Address	40	The mailing address of the business submitting the file Left justify the address and fill with spaces if it is less than forty (40) characters	No
114 – 138	City	25	The mailing address city of the business submitting the file Left justify the city and fill with spaces if it is less than twenty-five (25) characters	No
139-140	Business State FIPS code	2	The two character FIPS code for the business submitting the file. 45 for South Carolina	Yes
141 - 153	Blanks	13	Fill with spaces	Fill with spaces
154 - 158	Transmitter Zip Code	5	The mailing address ZIP Code of the business submitting the file Include leading zeros (0)	No
159 - 163	Transmitter ZIP Code extension (+ Four (4)	5	The mailing address ZIP Code extension of the business submitting the file If you include this, you must include the hyphen in position one-hundred and fifty-nine (159) If unknown, fill with spaces	No, fill with spaces if you do not include the + four (4)

Location	Contents of Field	Field Length	Description	No
164 - 193	Transmitter Contact Full Name	30	The first and last name of individual from submitting business who is responsible for the accuracy and completeness of the wage report Format the names as: First name<space>last name Left justify the name and fill with spaces if less than thirty (30) characters	Yes
194 - 203	Transmitter Contact Telephone Number	10	Contact telephone number, include the area code Numbers only, no special characters	No, fill with spaces if not available
204 - 207	Transmitter Contact Telephone Extension	4	Contact telephone number extension (if any) If there is no extension, fill with spaces	No, fill with spaces if not available
208- 247	Transmitter Email	40	Contact Email Address	Yes
248 - 275	Blanks	28	Fill with spaces	Fill with spaces

3.2.2 Record Type E

The record type ‘E’ record should contain information about the employer for whom the report is being submitted. Information contained in this record includes:

- The FEIN of the employer
- The employer’s name and address
- The state unemployment insurance account number
- The number of employee records

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Will always be E	Yes
2 – 5	Report Year	4	Year for which the report was filed Formatted as YYYY	Yes
6 – 14	Federal EIN (FEIN)	9	The business FEIN; numbers only, will not include the hyphen	Yes
15 – 23	Blanks	9	Will be filled with spaces	Fill with spaces
24 - 73	Employer's Legal Name	50	The first fifty (50) characters of the employer's legal name Will be left justified and filled with spaces if the name is less than fifty (50) characters	Yes
74 - 113	Address where work is performed in the state	40	The address where work is performed in the state Will be left justified and filled with spaces if the address is less than forty (40) characters	No
114 - 138	City	25	Will be <'STATE CITY"> followed by fifteen (15) spaces	Yes
139-140	Employer State	2	Will be 'STATE'	Yes
141 - 148	Blanks	8	Will be filled with spaces	Fill with spaces
149 - 153	Zip Code	5	The business ZIP Code	Yes
154 - 158	ZIP Code Extension	5	Four digit extension of ZIP Code, being sure to include the hyphen in position one-hundred and fifty-four (154) Fill with spaces if there is no extension	No
159 - 166	Blank	8	Will be filled with spaces	Fill with spaces
167 - 170	Taxing Entity Code	4	Will be UTAX	Yes

Location	Contents of Field	Field Length	Description	Required?
171 - 172	State Identifier Code	2	45 for South Carolina	No
173 - 187	State Unemployment Insurance Account Number	15	Will be the state UI employer account number from original file Will be left justified and filled with spaces	Yes
188 - 189	Report quarter	2	Will be the last month of the calendar quarter to which the report was filed. "03" = First quarter "06" = Second quarter "09" = Third quarter "12" = Fourth quarter	Yes
190 - 190	No wage report indicator	1	If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1) There should never be a one (1) where there are not type S records in the file, and there should never be a zero (0) when there are type S records in the file	Yes
191 - 275	Blanks	85	Will be filled with spaces	Fill with spaces

3.2.3 Record Type S

The record type ‘S’ record is used to report wage and tax data for an employee. Information contained in this record includes:

- SSN
- Wages paid
- Name
- Employer account number
- Number of hours worked

There should be one (1) record for each SSN / employer account ID / year and quarter.
Do not generate a record type 'S' record if there were no wages paid to the employee during the quarter.
Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Should always be S	Yes
2 – 10	Social Security	9	Employee's SSN	Yes
11 – 30	Employee Last Name	20	Employee's last name Left justify and fill with spaces if it is less than twenty (20) characters	Yes
31 – 42	Employee First Name	12	Employee's first name Left justify and fill with spaces if it is less than twelve (12) characters	Yes
43 – 43	Employee Middle Initial	1	Employee's middle initial If no middle initial, filled with a space	No
44 – 45	State FIPS Code	2	The state FIPS postal numeric code for the state to which wages are being reported. 45 for South Carolina	No
46 – 63	Blanks	18	Fill with spaces	Fill with spaces
64 – 77	State QTR Unemployment Insurance Total Wages	14	Employee's UI covered wages paid in the quarter. Include the cents but no decimal Right justify and pad with zeros (0) For example $15.90 should be included as: 00000000001590	Yes
78 – 131	Blanks	54	Fill with spaces	Fill with spaces
132 – 134	Number of Hours Worked	3	The number of hours the employee worked in the reporting period Right justify if the number is less than three (3) characters and pad with zeros (0)	No

Location	Contents of Field	Field Length	Description	Required?
135-141	SOC Code	7	SOC code of the employee Ex. 11-0000	No
142 – 146	Blanks	5	Enter blanks	Fill with spaces
147 – 161	State Unemployment Insurance Account Number	15	State UI employer account number Left justify and fill with spaces	Yes
162-164	Location/Unit	3	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location	No
165 – 209	Blanks	45	Fill with spaces	Fill with spaces
210 – 210	Owner/Officer Relationship	1	Owner/officer relationship of the worker Zero (0) for Employee One (1) for Officer	Yes
211 – 211	Blanks	1	Fill with spaces	Fill with spaces
212-212	Employed on payroll for on 12th of month, Month 1	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No

Location	Contents of Field	Field Length	Description	Required?
213-213	Employed on payroll for on 12th of month, Month 2	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No
214-214	Employed on payroll for on 12th of month, Month 3	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No
215 - 220	Reporting Quarter and Year	6	The last month and year for the calendar quarter for which this report applies, e.g., "032014" for Jan-Mar of 2014	Yes
221 - 226	Month the employee was first employed	6	The month and year when the employee was first employed, , e.g., "031997"	No, fill with spaces if there is no data
227 - 232	Month the employee became separated from employment	6	The month and year when the employee was separated, e.g., "031997"	No, fill with spaces if there is no data
233-247	Out of State QTR Unemployment Insurance Taxable Wages	15	Employee's Out of State UI covered taxable wages for the year Include the cents but no decimal Right justify and pad with zeros (0) For example 25.64 should be included as: 00000000002564	Yes, if Out of State Wages – State Code is provided

Location	Contents of Field	Field Length	Description	Required?
248 – 249	Adjustment Reason	2	Numeric – Adjustment Reason code for adjustment to employee wages Zero (0) means original filing Valid adjustment reason codes one (1) through ten (10) Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Yes
250 - 251	Out of State Wages – State Code	2	State code/abbreviation associated with Out of State wages reported for employee	Yes, if Out of State Wages are provided
252 - 275	Blanks	24	Fill with spaces	Fill with spaces

3.2.4 Record Type T

The record type ‘T’ record will contain the totals for all record type ‘S’ records reported for the employer / reporting period. Information contained in this record includes:

- Total number of employees
- Total wages paid
- Total taxable wages
- Total non-taxable wages
- Total employment on the 12th of each month

There should be one (1) record for each SSN / employer account ID / year and quarter.

There can be multiple record type ‘T’ records in the file.

There should be one (1) record type ‘T’ for each employer account ID / reporting period.

If the employer paid no wages in the quarter, include a record type 'T' record for the employer / period and enter zeros (0) for the total wages paid in the quarter, taxable, and excess wages.

Do not include any record type 'S' records for those employers.

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1- 1	Record Identifier	1	Should always be T	Yes
2 - 8	Total Number of Employees	7	The total number of "S" records in the file for the employer/period Right justify and pad with zeros (0)	No
9 - 26	Blank	18	Fill with spaces	Fill with spaces
27 - 40	State QTR Unemployment Insurance Total Wages For Employer	14	Quarterly gross wages subject to UI taxes Total of all gross wages for the employer/period Include the cents but no decimal Right justify and pad with zeros (0) For example $15.90 should be included as: 00000000001590	Yes
41 - 54	State QTR Unemployment Insurance Excess Wages for Employer	14	Quarterly excess UI wages for the employer/period Include the cents but no decimal Right justify and pad with zeros (0) For example $15.90 should be included as:00000000001590	Yes
55 - 68	State QTR Unemployment Insurance Taxable Wages For Employer	14	Quarterly taxable UI wages for the employer/period. Include the cents but no decimal Right justify and pad with zeros (0) For example $15.90 should be included as:00000000001590	Yes
69 - 81	Blank	13	Fill with spaces	Fill with spaces
82 -87	Reporting Quarter and Year	6	The last month and year for the calendar quarter for which this report applies, e.g., "032014" for Jan-Mar of 2014	Yes

Location	Contents of Field	Field Length	Description	Required?
88 - 226	Blank	139	Fill with spaces	Fill with spaces
227 - 233	Month 1 Employment for Employer	7	Total employees for the employer/period who were on the payroll for the payroll period that included the 12th of month for the first month of the quarter Right justify and pad with zeros (0)	Yes
234 - 240	Month 2 Employment for Employer	7	Total employees for the employer/period who were on the payroll for the payroll period that included the 12th of month for the second month of the quarter Right justify and pad with zeros (0)	Yes
241 - 247	Month 3 Employment for Employer	7	Total employees for the employer/period who were on the payroll for the payroll period that included the 12th of month for the third month of the quarter Right justify and pad with zeros (0)	Yes
248 - 275	Blanks	28	Fill with spaces	Fill with spaces

3.2.5 Record Type F

The record type ‘F’ will indicate the end of the file and will be the last data record on each file submitted. Information contained in this record includes:

- Total number of record type ‘S’ records in the file
- Total gross wages of all record type ‘T’ records
- Total 12th of the month employment data from the record type ‘T’ records

The record type ‘F’ record must appear only once on each file.

Below is a description for each field in the record:

Location	Contents of Field	Field Length	Description	Required?
1 - 1	Record Identifier	1	Should always be F	Yes
2 - 11	Total Number of Employees in File	10	The total number of "S" records in the entire file Right justify and pad with zeros (0)	Yes
12 - 40	Blank	29	Fill with spaces	Fill with spaces
41 - 55	Quarterly State Unemployment Insurance Total Wages in File	15	Quarterly gross wages subject to state U.I. tax. Total of all corresponding fields in all "S" records in the file Right justify and pad with zeros (0) Include the cents but no decimal	Yes
56 – 275	Blank	220	Fill with spaces	Fill with spaces

3.3 Download Sample File for Agent ICESA File Layout

3.3.1 Original Submission

See Section 12.4 for a sample agent ICESA file layout.

3.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN at position 177. A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample agent ICESA file layout for amendment.

4 EMPLOYER EFW2 INTERFACE FILE DEFINITION

4.1 General Information

Employers can file original or amended wage reports in this file, however, each file should only contain the information for one (1) quarter.

Report the actual wages paid for amended wage records, do not report the difference between the amended and original wages.

4.1.1 Fixed Length Records

This incoming file is submitted to the system via the employer wage file upload process. The file is a fixed length file; there should be five hundred twelve (512) characters in each row. The file contains the following fixed length records:

- Record type **RA: Submitter Record**
  - There should be one (1) transmitter record per file
  - This record will contain information about the entity submitting the file
    - This could be employer or agent information
  - The record RA must be the first row in the file
- Record Type **RE: Employer Record**
  - There should be one (1) employer record per file
  - This record contains the employer information
- Record Type **RW: Employee Record**
  - There should be one (1) employee record for each employee for whom wages are being reported
  - This record contains individual employee wage information
    - There may be a single or multiple employee records in the file
- Record Type **RT: Employer Totals Record**
  - There should be one (1) total record per file
  - This record contains the totals for all record type ‘RW’ records in the file
- Record Type **RF: Final Record**
  - There should be one (1) final record per file
  - This record indicates the end of the file and must be the last row in each file

Below are the rules for fields within the file.

4.1.2 Rules for Alpha / Numeric Fields

- Left justify and fill with blanks
- Where the "field" shows "Blank," all positions must be blank (spaces), not zeros (0)

4.1.3 Rules for Currency Fields

- Must contain only numbers
- No punctuation
- No signed amounts (high order signed or low order signed)
- Right justify and pad with zeros (0)
- Include both dollars and cents with no decimal point (example: $59.60 = 00000005960)
- Any money field that has no amount to be reported must be filled with zeros (0), not blanks or spaces

4.2 Employer EFW2 Record Layouts

4.2.1 RA Record: Submitter Record

The RA record identifies the organization submitting the file. There is only one (1) RA record, and it must be the first data record on each file.

Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1 – 2	Record Identifier	2	Should always be RA	Yes
3 – 11	Submitter's FEIN	9	The submitter's FEIN Numbers only, do not include the hyphen	Yes
12 – 28	Blanks	17	Fill with spaces	Fill with spaces
29	Resub Indicator	1	“0” (zero)	Yes
30 – 37	Blanks	8	Fill with spaces	Fill with spaces
38 – 94	Business Name	57	The business name Left justify and fill with spaces	Yes
95 – 116	Mailing Address Line 1	22	The company’s mailing address line 1 (Street or Post Office Box) Left justify and fill with spaces	No
117 – 138	Mailing Address Line 2	22	The company's mailing address line 2 (Attention, Suite, Room Number, etc.) Left justify and fill with spaces	No

Location	Field Name	Length	Field Specifications	Required?
139 – 160	City	22	The company's mailing address city Left justify and fill with spaces	No
161 – 162	State Abbreviation	2	The company's mailing address state or commonwealth/ territory Use postal abbreviations	No
163 – 167	ZIP Code	5	The company's mailing address ZIP Code.	No
168 – 171	ZIP Code Extension	4	The company's four (4)-digit extension of the mailing address ZIP Code If not applicable, fill with spaces Do not include the hyphen	No
172 – 216	Blanks	45	Fill with spaces	Fill with spaces
217 – 273	Submitter Name	57	The name of the organization to receive error notification if this file cannot be processed Left justify and fill with spaces	Yes
274 – 295	Physical Address Line 1	22	The submitter's physical address (Street or Post Office Box) Left justify and fill with spaces	No
296 – 317	Physical Address Line 2	22	The submitter's physical address line 2 (Attention, Suite, Room, Number, etc.) Left justify and fill with spaces	No
318 – 339	City	22	The submitter's physical address city Left justify and fill with spaces	No
340 – 341	State Abbreviation	2	The submitter's physical address State or commonwealth/territory Use postal abbreviations	No
342 – 346	ZIP Code	5	The submitter's physical address ZIP Code	No

Location	Field Name	Length	Field Specifications	Required?
347 – 350	ZIP Code Extension	4	The submitter's physical address four (4)-digit extension of the ZIP code Do not include hyphen If not applicable, fill with spaces	No
351 – 395	Blanks	45	Fill with spaces	Fill with spaces
396 – 422	Contact Name	27	The name of the person to be contacted by the agency concerning processing problems Left justify and fill with spaces	Yes
423 – 437	Contact Phone Number	15	The contact's telephone number with numeric values only (including area code) Do not use any special characters Example: 1232345678 Left justify and fill with spaces	No
438 – 442	Contact Phone Extension	5	The contact's telephone extension Left justify and fill with spaces	No
443 – 445	Blanks	3	Fill with spaces	Fill with spaces
446 – 485	Contact E-Mail	40	The contact’s Email address in standard format	Yes
486 – 488	Blanks	3	Fill with spaces	Fill with spaces
489 – 498	Contact Fax	10	If applicable, Include the contact’s fax number (including area code) Otherwise, fill with spaces For U.S. and U.S. territories only	No
499 – 512	Blanks	14	Fill with spaces	Fill with spaces

4.2.2 RE Record: Employer Record

The RE record will contain employer related information. There will be one (1) RE record for each employer EFW2 interface file and reporting period.

Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RE	Yes
3-6	Reporting Year	4	Tax year for which the wages are reported for	Yes
7	Blanks	1	Fill with spaces	Fill with spaces
8-16	Employer Account Number	9	State issues Employer Account number Right justify and pad with zeros (0)	Yes
17-39	Blanks	23	Fill with spaces	Fill with spaces
40 – 96	Employer Name	57	The business name Left justify and fill with spaces	Yes

Location	Field Name	Length	Field Specifications	Required?
97 – 118	Mailing Address Line 1	22	The company's mailing address line 1 (Street or Post Office Box) Left justify and fill with spaces	No
119 – 140	Mailing Address Line 2	22	The company's mailing address line 2 (Attention, Suite, Room Number, etc.) Left justify and fill with spaces	No
141 – 162	City	22	The company's mailing address city Left justify and fill with spaces	No
163 – 164	State Abbreviation	2	The company's mailing address state or commonwealth/ territory Use postal abbreviations	No
165 – 169	ZIP Code	5	The company's mailing address ZIP Code.	No
170 – 173	ZIP Code Extension	4	The company's four (4)-digit extension of the mailing address ZIP Code If not applicable, fill with spaces Do not include the hyphen	No
174 – 221	Blanks	48	Fill with spaces	Fill with spaces

Location	Field Name	Length	Field Specifications	Required?
222 – 248	Employer Contact Name	27	The name of the person to be contacted by the agency concerning processing problems Left justify and fill with spaces	Yes
249 – 263	Employer Contact Phone Number	15	The contact's telephone number with numeric values only (including area code) Do not use any special characters Example: 1232345678 Left justify and fill with spaces	No
264 – 268	Employer Contact Phone Extension	5	The contact's telephone extension Left justify and fill with spaces	No
269 – 278	Blanks	10	Fill with spaces	Fill with spaces
279 – 318	Employer Contact E-Mail	40	The contact’s Email address in standard format	No
319	No wage report indicator	1	If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1) There should never be a one (1) where there are not type RW records in the file, and there should never be a zero (0) when there are type RW records in the file	Yes
320 - 321	Report quarter	2	Will be the last month of the calendar quarter to which the report was filed. "03" = First quarter "06" = Second quarter "09" = Third quarter "12" = Fourth quarter	Yes
322 – 512	Blanks	191	Fill with spaces	Fill with spaces

4.2.3 RW Record: Employee State Wage Record

The RW records include the individual wage records for an SSN. Include one (1) row for each unique SSN.
Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RW	Yes
3-11	Social Security Number (SSN)	9	The employee's SSN as shown on the original/replacement SSN card issued by SSA without hyphens If no SSN is available, fill with nines (999999999)	Yes
12-26	Employee First Name	15	The employee's first name as shown on the SSN card Left justify and fill with spaces	Yes
27-41	Employee Middle Initial	15	If applicable, include the employee's initial	No
42-61	Employee Last Name	20	The employee's last name as shown on the SSN card Left justify and fill with spaces	Yes
62-65	Suffix	4	If applicable, include the employee's alphabetic suffix For example: SR, JR Left justify and fill with spaces Otherwise, fill with spaces	No
66-180	Blanks	114	Fill with spaces	Fill with spaces

Location	Field Name	Length	Field Specifications	Required?
180-181	Adjustment Reason	2	Numeric - Reason code for adjustment to employee wages zero (0) means original filing Right aligned Valid adjustment reason codes are one (1) through ten (10) Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Yes
182-187	Reporting Period	6	The last month and four (4)-digit year for the calendar quarter for which this report applies; e.g., “032013” for January through March of 2013	Yes
188-198	State Quarterly Unemployment Insurance Total (Gross) Wages	11	Right justify and fill with zeros (0) Do not include the decimal For example $25.64 should be included as: 00000002564	Yes
199-209	Out of State Quarterly Unemployment Insurance Total Taxable Wages	11	Employee’s Out of State UI covered taxable wages for the year Right justify and fill with zeros (0) Do not include the decimal For example $25.64 should be included as: 00000002564	Yes, if Out of State Wages – State Code is provided
210 - 211	Out of State Wages – State Code	2	State code/abbreviation associated with Out of State wages reported for employee	Yes, if Out of State Wages are provided
212-247	Blank	36	Fill with spaces	Fill with spaces

Location	Field Name	Length	Field Specifications	Required?
248-267	State Unemployment Insurance Account Number	20	The state UI account number Right justify and fill with spaces	Yes
268-270	Location/Unit	3	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location	No
271-337	Blank	67	Fill with spaces	Fill with spaces
338-338	Employed on payroll for on 12th of month, Month 1	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter0=No 1=Yes	No
339-339	Employed on payroll for on 12th of month, Month 2	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No

Location	Field Name	Length	Field Specifications	Required?
340-340	Employed on payroll for on 12th of month, Month 3	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No
341-341	Owner/Officer Relationship	1	The owner/officer relationship of the worker 0-Employee 1-Officer	Yes
342-344	Number of Hours Worked	3	The number of hours worked during reporting period	No
345-375	Adjustment reason. Other explanation	31	Include the reason for adjustment if adjustment code = Ten (10) Left justify and fill with spaces	Not Only if adj. reason = Ten (10) or fill with spaces
376-382	SOC Code	7	SOC code of the employee Ex. 11-0000	No
383-512	Not used	130	Fill with spaces	Fill with spaces

4.2.4 RT Record: Total Record

RT records contains the calculated gross (total), taxable, and non-taxable (excess) wages for the reporting period.

Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RT	Yes

Location	Field Name	Length	Field Specifications	Required?
3-17	State Unemployment Insurance Account Number	15	Employer Account Number assigned by state for reporting Right justify and pad with zeros (0)	Yes
18-23	Reporting Period	6	Last month and year of reporting period First quarter 2014 would be stored as 032014	Yes
24-33	Blanks	10	Fill with spaces	Fill with spaces
34-53	Gross Wages	20	Gross wages reported by the employer for reporting period Right justify and pad with zeros (0) Include the cents but no decimal For example $25.64 should be included as: 00000000000000002564	Yes
54-73	Taxable wages	20	Taxable wages calculated from the records processed Right justify and pad with zeros (0) Include the cents but no decimal For example $25.64 should be included as: 00000000000000002564	Yes
74-93	Excess (non-taxable) wages	20	Non-taxable wages calculated from the records processed. Right justify and pad with zeros. Include the cents but no decimal. For example $25.64 should be included as: 00000000000000002564	Yes
94-103	Blanks	10	Fill with spaces	Fill with spaces
104-108	Employees on payroll on the 12th of month, Month 1	5	The number of employees who were included in the payroll for the payroll period on the 12th of month for the first month of the quarter Right justify and pad with zeros (0)	Yes

Location	Field Name	Length	Field Specifications	Required?
109-113	Employees on payroll on the 12th of month, Month 2	5	The number of employees who were included in the payroll for the payroll period on the 12th of month for the second month of the quarter Right justify and pad with zeros (0)	Yes
114-118	Employees on payroll on the 12th of month, Month 3	5	The number of employees who were included in the payroll for the payroll period on the 12th of month for the third month of the quarter Right justify and pad with zeros (0)	Yes
119-512	Blanks	394	Fill with spaces	Fill with spaces

4.2.5 RF Record: Final Record

The RF record includes the totals for the file. This must be the last record in the file.
Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RF	Yes
3-7	Blanks	5	Fill with spaces	Fill with spaces
8-16	Number of RW Records	9	The total number of RW records reported on the entire file Right justify and fill with zeros (0)	Yes
17-36	Total wages reported in file	20	The sum of gross wages reported in file Right justify and fill with zeros (0) For example $25.64 should be included as: 00000000000000002564	Yes
37-512	Blanks	476	Fill with spaces	Fill with spaces

4.3 Download Sample File for Employer EFW2 File Layout

4.3.1 Original Submission

See Section 12.4 for a sample employer EFW2 file layout.

4.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN at position 195-196. A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample employer EFW2 file layout for amendment.

5 AGENT EFW2 INTERFACE FILE DEFINITION

5.1 General Information

Agents submitting wages in this format can file multiple employers / reporting periods in the file. There is no need to generate a separate file for each employer or reporting period. The file can also contain original filings and adjustments in the same file, however, an original and amendment for the same employer and reporting period cannot be included in the same file.

Report the actual wages paid for amended wage records, do not report the difference between the amended and original wages.

If a SSN record is rejected for any reason, then the entire employer record associated with that SSN will be rejected.

5.1.1 Fixed Length Records

This incoming file is submitted to the system via the wage file upload process. The file is a fixed length file; there should be five hundred twelve (512) characters in each row. The file contains the following fixed length records:

- Record type **RA: Submitter Record**
  - There should be one (1) transmitter record per file
  - This record will contain information about the entity submitting the file
    - This will be the agent information
  - The record RA must be the first row in the file
- Record Type **RE: Employer Totals Record**
  - There should be one (1) total record per employer / reporting period
    - There can be multiple RV records in a file
  - This record contains the totals for all record type ‘S’ records for an employer / period in the file
- Record Type **RW: Employee Record**
  - There should be one (1) employee record for each employee for whom wages are being reported for each SSN / employer account ID / reporting period
  - This record contains individual employee wage information
    - There may be a single or multiple employee records in the file
- Record Type **RT: Employer Totals Record**
  - There should be one (1) total record per employer / reporting period
  - This record contains the totals for all record type ‘RW’ records for the employer
- Record Type **RF: Final Record**
  - There should be one (1) final record per file
  - This record indicates the end of the file and must be the last row in each file

Below are the rules for fields within the file.

5.1.2 Rules for Alpha/Numeric Fields

- Left justify and fill with blanks
- Where the "field" shows "Blank," all positions must be blank (spaces), not zeros (0)

5.1.3 Rules for Currency Fields

- Must contain only numbers
- No punctuation
- No signed amounts (high order signed or low order signed)
- Right justify and pad with zeros (0)
- Include both dollars and cents with no decimal point (example: $59.60 = 00000005960)
- Any money field that has no amount to be reported must be filled with zeros (0), not blanks or spaces

5.2 Agent EFW2 Record Layouts

5.2.1 RA Record: Submitter Record

The RA record identifies the organization submitting the file. There is only one (1) RA record, and it must be the first data record on each file.

Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RA	Yes
3-11	Submitter's FEIN	9	The submitter's FEIN Numbers only, do not include the hyphen	Yes
12-28	Blanks	17	Fill with spaces	Fill with spaces
29	Resub Indicator	1	“0” (zero)	Yes
30-37	Blanks	8	Fill with spaces	Fill with spaces
38-94	Company Name	57	The company name Left justify and fill with spaces	Yes
95-116	Mailing Address Line 1	22	The company’s mailing address line 1 (Street or Post Office Box) Left justify and fill with spaces	No
117-138	Mailing Address Line 2	22	The company's mailing address line 2 (Attention, Suite, Room Number, etc.) Left justify and fill with spaces	No
139-160	City	22	The company's mailing address city Left justify and fill with spaces	No

Location	Field Name	Length	Field Specifications	Required?
161-162	State Abbreviation	2	The company's mailing address State or commonwealth/ territory Use postal abbreviations	No
163-167	ZIP Code	5	The company's mailing address ZIP Code	No
168-171	ZIP Code Extension	4	The company's four (4)-digit extension of the mailing address ZIP Code If not applicable, fill with spaces Do not include the hyphen	No
172-216	Blanks	45	Fill with spaces	Fill with spaces
217-273	Submitter Name	57	The name of the organization to receive error notification if this file cannot be processed Left justify and fill with spaces	Yes
274-295	Physical Address Line 1	22	The submitter's physical address (Street or Post Office Box) Left justify and fill with spaces	No
296-317	Physical Address Line 2	22	The submitter's physical address line 2 (Attention, Suite, Room, Number, etc.) Left justify and fill with spaces	No
318-339	City	22	The submitter's physical address city Left justify and fill with spaces	No
340-341	State Abbreviation	2	The submitter's physical address State or commonwealth/territory Use postal abbreviations	No
342-346	ZIP Code	5	The submitter's physical address ZIP Code	No
347-350	ZIP Code Extension	4	The submitter's physical address four-digit extension of the ZIP Code If not applicable, fill with spaces	No

Location	Field Name	Length	Field Specifications	Required?
351-395	Blanks	45	Fill with spaces	Fill with spaces
396-422	Contact Name	27	The name of the person to be contacted by the agency concerning processing problems Left justify and fill with spaces	Yes
423-437	Contact Phone Number	15	The contact's telephone number with numeric values only (including area code) Do not use any special characters Example: 1232345678 Left justify and fill with spaces	No
438-442	Contact Phone Extension	5	The contact's telephone extension Left justify and fill with spaces	No
443-445	Blanks	3	Fill with spaces	Fill with spaces
446-485	Contact E-Mail	40	The contact’s Email address in standard format	Yes
486-488	Blanks	3	Fill with spaces	Fill with spaces
489-498	Contact Fax	10	If applicable, include the contact’s fax number (including area code) Otherwise, fill with spaces For U.S. and U.S. territories only	No
499-512	Blanks	14	Fill with spaces	Fill with spaces

5.2.2 RE Record: Employer Record

The RE record will contain totals reported. There will be one (1) RE record for each employer / reporting period. The records will

contain the employer related information.

Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RE	Yes
3-6	Reporting Year	4	Tax year for which the wages are reported for	Yes
7	Blanks	1	Fill with spaces	Fill with spaces
8-16	Employer Account Number	9	State issues Employer Account number Right justify and pad with zeros (0)	Yes
17-39	Blanks	23	Fill with spaces	Fill with spaces
40 – 96	Employer Name	57	The business name Left justify and fill with spaces	Yes
97 – 118	Mailing Address Line 1	22	The company's mailing address line 1 (Street or Post Office Box) Left justify and fill with spaces	No

Location	Field Name	Length	Field Specifications	Required?
119 – 140	Mailing Address Line 2	22	The company's mailing address line 2 (Attention, Suite, Room Number, etc.) Left justify and fill with spaces	No
141 – 162	City	22	The company's mailing address city Left justify and fill with spaces	No
163 – 164	State Abbreviation	2	The company's mailing address state or commonwealth/ territory Use postal abbreviations	No
165 – 169	ZIP Code	5	The company's mailing address ZIP Code.	No
170 – 173	ZIP Code Extension	4	The company's four (4)-digit extension of the mailing address ZIP Code If not applicable, fill with spaces Do not include the hyphen	No
174 – 221	Blanks	48	Fill with spaces	Fill with spaces
222 – 248	Employer Contact Name	27	The name of the person to be contacted by the agency concerning processing problems Left justify and fill with spaces	Yes

Location	Field Name	Length	Field Specifications	Required?
249 – 263	Employer Contact Phone Number	15	The contact's telephone number with numeric values only (including area code) Do not use any special characters Example: 1232345678 Left justify and fill with spaces	No
264 – 268	Employer Contact Phone Extension	5	The contact's telephone extension Left justify and fill with spaces	No
269 – 278	Blanks	10	Fill with spaces	Fill with spaces
279 – 318	Employer Contact E-Mail	40	The contact’s Email address in standard format	No
319	No wage report indicator	1	If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1) There should never be a one (1) where there are not type RW records in the file, and there should never be a zero (0) when there are type RW records in the file	Yes
320 - 321	Report quarter	2	Will be the last month of the calendar quarter to which the report was filed. "03" = First quarter "06" = Second quarter "09" = Third quarter "12" = Fourth quarter	Yes
322 – 512	Blanks	191	Fill with spaces	Fill with spaces

5.2.3 RW Record: Employee State Wage Record

The RW records include the individual wage records for an SSN. Include one (1) row for each employer and unique SSN. Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RW	Yes
3-11	Social Security Number (SSN)	9	The employee's SSN as shown on the original/replacement SSN card issued by SSA without hyphens If no SSN is available, fill with nines (999999999)	Yes
12-26	Employee First Name	15	The employee's first name as shown on the SSN card Left justify and fill with spaces	Yes
27-41	Employee Middle Initial	15	If applicable, include the employee's initial	No
42-61	Employee Last Name	20	The employee's last name as shown on the SSN card Left justify and fill with spaces	Yes
62-65	Suffix	4	If applicable, include the employee's alphabetic suffix For example: SR, JR Left justify and fill with spaces Otherwise, fill with spaces	No
66-180	Blanks	114	Fill with spaces	Fill with spaces
180-181	Adjustment Reason	2	Numeric - Reason code for adjustment to employee wages zero (0) means original filing Right aligned Valid adjustment reason codes are one (1) through ten (10) Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Yes

Location	Field Name	Length	Field Specifications	Required?
182-187	Reporting Period	6	The last month and four (4)-digit year for the calendar quarter for which this report applies; e.g., “032013” for January through March of 2013	Yes
188-198	State Quarterly Unemployment Insurance Total (Gross) Wages	11	Right justify and fill with zeros (0) Do not include the decimal For example $25.64 should be included as: 00000002564	Yes
199-209	Out of State Quarterly Unemployment Insurance Total Taxable Wages	11	Employee’s Out of State UI covered taxable wages for the year Right justify and fill with zeros (0) Do not include the decimal For example $25.64 should be included as: 00000002564	Yes, if Out of State Wages – State Code is provided
210 - 211	Out of State Wages – State Code	2	State code/abbreviation associated with Out of State wages reported for employee	Yes, if Out of State Wages are provided
212-247	Blank	38	Fill with spaces	Fill with spaces
248-267	State Unemployment Insurance Account Number	20	The state UI account number Right justify and fill with spaces	Yes

Location	Field Name	Length	Field Specifications	Required?
268-270	Location/Unit	3	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location	No
271-337	Blank	67	Fill with spaces	Fill with spaces
338-338	Employed on payroll for on 12th of month, Month 1	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter0=No 1=Yes	No
339-339	Employed on payroll for on 12th of month, Month 2	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No
340-340	Employed on payroll for on 12th of month, Month 3	1	Will contain whether the employee was included on the payroll that included on the 12th of the month for the first month of the quarter 0=No 1=Yes	No

Location	Field Name	Length	Field Specifications	Required?
341-341	Owner/Officer Relationship	1	The owner/officer relationship of the worker 0-Employee 1-Officer	Yes
342-344	Number of Hours Worked	3	The number of hours worked during reporting period	No
345-375	Adjustment reason. Other explanation	31	Include the reason for adjustment if adjustment code = Ten (10) Left justify and fill with spaces	Not Only if adj. reason = Ten (10) or fill with spaces
376-382	SOC Code	7	SOC code of the employee Ex. 11-0000	No
383-512	Not used	130	Fill with spaces	Fill with spaces

5.2.4 RT Record: Total Record

RT records contains the calculated gross (total), taxable, and non-taxable (excess) wages for the reporting period.

Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RT	Yes
3-17	State Unemployment Insurance Account Number	15	Employer Account Number assigned by state for reporting Right justify and pad with zeros (0)	Yes

Location	Field Name	Length	Field Specifications	Required?
18-23	Reporting Period	6	Last month and year of reporting period First quarter 2014 would be stored as 032014	Yes
24-33	Blanks	10	Fill with spaces	Fill with spaces
34-53	Gross Wages	20	Gross wages reported by the employer for reporting period Right justify and pad with zeros (0) Include the cents but no decimal For example $25.64 should be included as: 00000000000000002564	Yes
54-73	Taxable wages	20	Taxable wages calculated from the records processed Right justify and pad with zeros (0) Include the cents but no decimal For example $25.64 should be included as: 00000000000000002564	Yes
74-93	Excess (non-taxable) wages	20	Non-taxable wages calculated from the records processed. Right justify and pad with zeros. Include the cents but no decimal. For example $25.64 should be included as: 00000000000000002564	Yes
94-103	Blanks	10	Fill with spaces	Fill with spaces
104-108	Employees on payroll on the 12th of month, Month 1	5	The number of employees who were included in the payroll for the payroll period on the 12th of month for the first month of the quarter Right justify and pad with zeros (0)	Yes
109-113	Employees on payroll on the 12th of month, Month 2	5	The number of employees who were included in the payroll for the payroll period on the 12th of month for the second month of the quarter Right justify and pad with zeros (0)	Yes

Location	Field Name	Length	Field Specifications	Required?
114-118	Employees on payroll on the 12th of month, Month 3	5	The number of employees who were included in the payroll for the payroll period on the 12th of month for the third month of the quarter Right justify and pad with zeros (0)	Yes
119-512	Blanks	394	Fill with spaces	Fill with spaces

5.2.5 RF Record: Final Record

The RF record includes the totals for the file. This must be the last record in the file.
Below is a description for each field in the record:

Location	Field Name	Length	Field Specifications	Required?
1-2	Record Identifier	2	Should always be RF	Yes
3-7	Blanks	5	Fill with spaces	Fill with spaces
8-16	Number of RW Records	9	The total number of RW records reported on the entire file Right justify and fill with zeros (0)	Yes
17-36	Total wages reported in file	20	The sum of gross wages reported in file Right justify and fill with zeros (0) For example $25.64 should be included as: 00000000000000002564	Yes
37-512	Blanks	476	Fill with spaces	Fill with spaces

5.3 Download Sample File for Agent EFW2 Record Layout

5.3.1 Original Submission

See Section 12.4 for a sample agent EFW2 file layout.

5.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN at position 195-196. A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample agent EFW2 file layout

6 EMPLOYER XML INTERFACE FILE DEFINITION

6.1 General Information

Employers can file original or amended wage reports in this file, however, each file should only contain the information for one (1) quarter.

Report the actual wages paid for amended wage records. Do not report the difference between the amended and original wages.

6.2 Employer XML File

This incoming file is submitted to via the employer wage file upload process. The file is an XML file. The file contains the following system fields:

Field Name	Description	Validation
XmlVersion	This informs the compiler of the XML version that is used There is no end tag for the XML Version	NA
<root>	Parent tag must be the first tag in the file There must be a </root> tag as the final row in the file	Required
<Submitter>	Tag informing the compiler that this is a submitter record There must be a </Submitter> end tag at the end of the record	Required
<FEIN>	Submitter FEIN, must have end tag.	Required
<BusinessName>	Submitter business name, must have an end tag.	Required
<Address>	Submitter street address, must have an end tag.	Required
<City>	Submitter city, must have an end tag.	Required
<State>	Submitter state, must have an end tag.	Required
<ZIP>	Submitter ZIP code, must have an end tag.	Required
<ZIP4>	Submitter +Four (4) for ZIP Code, must have and end tag	Not Required, but tags must be in the file <ZIP4></ZIP4>
<Contact>	First and last name of contact person This is the person the Department will contact with questions about the file, must have an end tag	Required
<Phone>	Contact telephone number, must have an end tag	Not Required
<Extension>	Contact telephone extension, must have an end tag	Not Required, but tags must be in the file
<Email>	Email address of the contact person Must have end tag	Required

Field Name	Description	Validation
<Wage>	Tag informing the compiler that this is a wage file There must be a </Wage> end tag at the end of the file	Required
<WageRecord>	Tag informing the compiler that an individual wage record is following There must be a </WageRecord> tag following each individual wage record	Required
<Employee>	Tag informing the compiler that an individual employee record is beginning There must be an end tag </Employee> at the end of each individual record	Required
<EmployerID>	This field will contain the employer's UI account number Must have end tag <EmployerID>123456</EmployerID>	Required The file will be rejected if the employer account number is not included.
<Period>	This field will contain the period for which the report is filed Should contain the last month of the quarter and the year The values for the year 2014 would be: 1st quarter = 032014 2nd quarter = 062014 3rd quarter = 092014 4th quarter = 122014 <Period>032014</Period>	Required, the file will be rejected if the period is not included in the file The period in the file must equal the period selected in the wage submission screen.
<SSN>	This field will contain the employee SSN <SSN>123456789</SSN>	Required
<LastName>	This field will contain the employee's last name, as shown on the Social Security card <LastName>Smith</LastName>	Required
<FirstName>	This field will contain the employee's first name, as shown on the Social Security card <FirstName>Jane</FirstName>	Required
<MI>	This field will contain the employee's middle initial It is not required <MI>G</MI>	Not required but tags must be included in the file

Field Name	Description	Validation
<StateGrossWages>	This field will contain the gross wages paid to the employee during the quarter in State Do not include the decimal point or comma separators <GrossWages>1254636</GrossWages>	Required
<OutofStateTaxable Wages>	This field will contain the employee's out of state UI covered taxable wages for the year Do not include the decimal point or comma separators <OutofStateTaxableWages>1254636</OutofStateTaxableWages>	Yes, if Out of State Wages – State Code is provided
<OosWageStateCode>	This field will contain the two character state abbreviation related to the out of state wages. <OosWageStateCode>NC</OosWageStateCode>	Yes, if Out of State Wages are provided
<Location>	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location < Location >1</ Location >	No
<HrsWkd>	This field will contain the hours worked by the worker in the reporting period <HrsWkd>150</HrsWkd>	No
<SOCCode>	SOC code of the employee Ex. 11-0000	No

Field Name	Description	Validation
<OwnerRel>	Include the owner/officer relationship of the worker <OwnerRel>0</OwnerRel>	Required
<EmployMon1>	Will contain whether the employee was included on the payroll on the 12th of the month for the first month of the quarter <EmployMon1>1<EmployMon1> for yes <EmployMon1>2<EmployMon1> for no	No
<EmployMon2>	Will contain whether the employee was included on the payroll on the 12th of the month for the first month of the quarter <EmployMon2>1<EmployMon2> for yes <EmployMon2>2<EmployMon2> for no	No
<EmployMon3>	Will contain whether the employee was included on the payroll on the 12th of the month for the first month of the quarter <EmployMon3>1<EmployMon3> for yes <EmployMon3>2<EmployMon3> for no	No
<AdjCode>	This field will contain the original filing/adjustment code Codes are numbers zero (0) – ten (10) <AdjCode>0</AdjCode> Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Required
<Reason>	This field will contain reason if adjustment code = Ten (10) Otherwise do not include <Reason>Testing</Reason>	Not required but tags must be included in the file
<Totals>	Tag informing the complier that this is a total record; there must be an end tag at the end of the record	Required
<EmployerID>	This field will contain the UI account number <EmployerID>123456</EmployerID>	Required

Field Name	Description	Validation
<Period>	This field will contain the period for which the report is filed. Should contain the last month of the quarter and the year The values for the year 2014 would be: 1st quarter = 032014 2nd quarter = 062014 3rd quarter = 092014 4th quarter = 122014 <Period>032014</Period>	Required, the file will be rejected if the period is not included in the file The period in the file must equal the period selected in the wage submission screens
<NoWageIndicator>	Email address of the contact person Must have end tag If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1)	Required
<TotalWages>	This field will contain the total wages reported by the employer for the period Do not include decimal or comma separators, <TotalWages>1548233</TotalWages>	Required The file will be rejected if the employer account number is not included
<TaxableWages>	This field will contain the total taxable wages reported by the employer for the period Do not include decimal or comma separators <TaxableWages>5264525</TaxableWages>	Required,
<ExcessWages>	This field will contain the total excess wages reported by the employer for the period Do not include decimal or comma separators, <ExcessWages>524525</ExcessWages>	Required
<Month1>	This field will contain the total number of employees who were on the payroll that includes the 12th of the first month of the quarter <Month1>5</Month1>	Required
<Month2>	This field will contain the total number of employees who were on the payroll that includes the 12th of the second month of the quarter <Month2>5</Month2>	Required

Field Name	Description	Validation
<Month3>	This field will contain the total number of employees who were on the payroll that includes the 12th of the third month of the quarter <Month3>5</Month3>	Required

6.3 Download Sample File for Employer XML File Layout

6.3.1 Original Submission

See Section 12.4 for a sample employer XML file layout

6.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN in the employee record. A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample employer XML file layout for amendment.

7 AGENT XML INTERFACE FILE DEFINITION

7.1 General Information

Agents can file multiple employers / reporting periods in the file. There is no need to generate a separate file for each employer or reporting period. The file can also contain original filings and adjustments in the same file, however, an original and amendment for the same employer and reporting period cannot be included in the same file. The file can also contain no wage reports for employers.

All begin and end tags must be included in the file. If there is no data for that field then include the tags with nothing between them e.g. <tag></tag>.

Report the actual wages paid for amended wage records. Do not report the difference between the amended and original wages.

If a SSN record is rejected for any reason, then the entire employer record associated with that SSN will be rejected.

7.2 Agent XML File

This incoming file is submitted to the system via the wage file upload process. The file is an XML file.
The file contains the following fields:

Field Name	Description	Validation
XmlVersion	This informs the compiler of the XML version that is used There is no end tag for the XML Version	NA
<root>	Parent tag, must have an end tag as the last row in the file	Required
<Submitter>	Tag informing the compiler that this is a submitter record There must be a </Submitter> end tag at the end of the record	Required
<FEIN>	Submitter FEIN, must have end tag	Required
<BusinessName>	Submitter business name, must have an end tag	Required
<Address>	Submitter street address, must have an end tag	Required
<City>	Submitter city, must have an end tag	Required
<State>	Submitter state, must have an end tag	Required
<ZIP>	Submitter ZIP code, must have an end tag	Required
<ZIP4>	Submitter + Four (4) for ZIP Code, must have and end tag	Not Required, but tags must be in the file <ZIP4></ZIP4>
<Contact>	First and last name of contact person This is the person the Department will contact with questions about the file, must have an end tag	Required
<Phone>	Contact telephone number, must have an end tag	Not Required
<Extension>	Contact telephone extension, must have an end tag	Not Required, but tags must be in the file
<Email>	Email address of the contact person Must have end tag	Required
<Wage>	Tag informing the compiler that this is a wage file There must be a </Wage> end tag at the end of the file	Required

Field Name	Description	Validation
<WageRecord>	Tag informing the compile that an individual wage record is following There must be a </WageRecord> tag following each individual wage record	Required
<Employee>	Tag informing the compiler that an individual employee record is beginning There must be an end tag </Employee> at the end of each individual record	Required
<EmployerID>	This field will contain the employer's UI account number Must have end tag <EmployerID>123456</EmployerID>	Required The file will be rejected if the employer account number is not included
<Period>	This field will contain the period for which the report is filed Should contain the last month of the quarter and the year The values for the year 2014 would be: 1st quarter = 032014 2nd quarter = 062014 3rd quarter = 092014 4th quarter = 122014 <Period>032014</Period>	Required, the file will be rejected if the period is not included in the file The period in the file must equal the period selected in the wage submission screens
<SSN>	This field will contain the employee SSN <SSN>123456789</SSN>	Required
<LastName>	This field will contain the employee's last name, as shown on the Social Security card <LastName>Smith</LastName>	Required
<FirstName>	This field will contain the employee's first name, as shown on the Social Security card. <FirstName>Jane</FirstName>	Required
<MI>	This field will contain the employee's middle initial It is not required <MI>G</MI>	Not required but tags must be included in the file

Field Name	Description	Validation
<StateGrossWages>	This field will contain the state gross wages paid to the employee during the quarter Do not include decimal or comma separators <StateGrossWages>1254636</StateGrossWages>	Required
<OutofStateTaxableWages>	This field will contain the out of gross wages paid to the employee during the quarter out of state Do not include the decimal point or comma separators <OutofStateTaxableWages>1254636</OutofStateTaxableWages>	Yes, if Out of State Wages – State Code is provided
<OosWageStateCode>	This field will contain the two character state abbreviation related to the out of state wages. <OosWageStateCode>NC</OosWageStateCode>	Yes, if Out of State Wages are provided
<Location>	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location < Location >1</ Location >	No
<HrsWkd>	This field will contain the hours worked by the worker in the reporting period. <HrsWkd>150</HrsWkd>	No
<SOCCode>	SOC code of the employee Ex. 11-0000	No
<OwnerRel>	Include the owner/officer relationship of the worker. <OwnerRel>0</OwnerRel>	Required

Field Name	Description	Validation
<EmployMon1>	Will contain whether the employee was included on the payroll on the 12th of the month for the first month of the quarter. <EmployMon1>1<EmployMon1> for yes <EmployMon1>2<EmployMon1> for no	No
<EmployMon2>	Will contain whether the employee was included on the payroll on the 12th of the month for the first month of the quarter <EmployMon2>1<EmployMon2> for yes <EmployMon2>2<EmployMon2> for no	No
<EmployMon3>	Will contain whether the employee was included on the payroll on the 12th of the month for the first month of the quarter <EmployMon3>1<EmployMon3> for yes <EmployMon3>2<EmployMon3> for no	No
<AdjCode>	This field will contain the original filing/adjustment code Codes are numbers zero (0) – eight (8) <AdjCode>0</AdjCode> Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Required
<Reason>	This field will contain reason if adjustment code = Eight (8) Otherwise do not include <Reason>Testing</Reason>	Not required but tags must be included in the file
<Totals>	Tag informing the complier that this is a total record There must be an end tag at the end of the record	Required
<EmployerID>	This field will contain the UI account number. <EmployerID>123456</EmployerID>	Required
<Period>	This field will contain the period for which the report is filed Should contain the last month of the quarter and the year The values for the year 2014 would be: 1st quarter = 032014 2nd quarter = 062014 3rd quarter = 092014 4th quarter = 122014 <Period>032014</Period>	Required, the file will be rejected if the period is not included in the file The period in the file must equal the period selected in the wage submission screens

Field Name	Description	Validation
<NoWageIndicator>	Email address of the contact person Must have end tag If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1)	Required
<TotalWages>	This field will contain the total wages reported by the employer for the period Do not include the decimal point or comma separators <TotalWages>1548233</TotalWages>	Required The file will be rejected if the employer account number is not included
<TaxableWages>	This field will contain the total taxable wages reported by the employer for the period Do not include the decimal point or comma separators <TaxableWages>5264525</TaxableWages>	Required
<ExcessWages>	This field will contain the total excess wages reported by the employer for the period Do not include the decimal point or comma separators <ExcessWages>524525</ExcessWages>	Required
<Month1>	This field will contain the total number of employees who were on the payroll that includes the 12th of the first month of the quarter <Month1>5</Month1>	Required
<Month2>	This field will contain the total number of employees who were on the payroll that includes the 12th of the second month of the quarter <Month2>5</Month2>	Required
<Month3>	This field will contain the total number of employees who were on the payroll that includes the 12th of the third month of the quarter <Month3>5</Month3>	Required

7.3 Download Sample File for Agent XML File Layout

7.3.1 Original Submission

See Section 12.4 for a sample agent XML file layout.

7.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN in the employee record. A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample agent XML file layout for amendment.

8 EMPLOYER CSV INTERFACE FILE DEFINITION

8.1 General Information

This section contains the file specifications for the state Unemployment Insurance Tax and Wage reporting .csv file format. This format can be created using commercially available spreadsheet software (e.g., Microsoft Excel). Employers can file original or amended wage reports in this file, however, each file should only contain the information for one (1) quarter.

Report the actual wages paid for amended wage records. Do not report the difference between the amended and original wages.

This incoming file is submitted to the State via the employer wage file upload process. The file is a comma separated file, and there is no set length for the rows. The following paragraphs contain the specifications for the incoming wage report and outgoing confirmation files. Employers will upload the incoming files, and the system will process the file and generate the outgoing confirmation files.

8.1.1 Rules for Currency Fields

- Must contain only numbers
- No comma separators
- No signed amounts (high order signed or low order signed)
- Include both dollars and cents with no decimal point (example: $59.60 = 00000005960)

8.1.2 Rules for SSN Fields

- Must contain nine (9) digits
    - Excel will trim leading zeros (0) with the default settings
    - Set the number format to ‘text’ for the SSN column if creating the file with Excel

8.2 Employer CSV File

This incoming file is submitted to the system via the wage file upload process. The file is a comma separated file. The file contains four (4) records and the rules for records and fields within the file as described in the following subchapters.

8.2.1 Submitter Record

The submitter record will contain information about the business submitting the file, this may be the same as the employer. Below is a description for each field in the record. (Beginning at Column A, Row 1)

Position	Field Name	Field Specifications	Required
A1	Record Identifier	Should always be zero (0)	Yes
B1	Submitters FEIN	The business' FEIN; numbers only, do not include the hyphen	Yes
C1	Business Name	The legal name of the business submitting the file	Yes
D1	Business Address	The mailing address of the business submitting the file	No
E1	Business City	The mailing address city of the business submitting the file	No
F1	State FIPS code	The two character FIPS code for 'STATE': Forty Five(45)	No
G1	Transmitter Zip Code	The mailing address ZIP Code of the business submitting the file Include leading zeros (0)	No
H1	Transmitter ZIP Code extension (+4)	The mailing address ZIP Code extension of the business submitting the file If unknown, fill with spaces	No, fill with spaces or include the + Four (4)
I1	Transmitter Contact	First and last name of individual from submitting business who is responsible for the accuracy and completeness of the wage report Format the names as: First name<space>last name	Yes

Position	Field Name	Field Specifications	Required
J1	Transmitter Contact Telephone Number	Contact telephone number, include the area code Numbers only, no special characters	No
K1	Telephone Extension/Box	Contact telephone number extension (if any) If there is no extension, fill with spaces	No, fill with spaces or Extension
L1	Transmitter Email	Email Alphanumeric	Yes

8.2.2 Employer Record

The employer record will contain summary totals for the employer / reporting period.
Below is a description for each field in the record. (Beginning at Column A, Row 2)

Position	Field Name	Field Specifications	Required
A2	Record type	Must be one (1) for employer record	Yes
B2	State UI Account Number	Employer account number	Yes
C2	Reporting Period	This field will contain the last month of the quarter and the year For example, the values for 2014 would be: 1st - 032014 2nd – 062014 3rd - 092014 4th – 122014	Yes
D2	Gross wages paid	Total Gross wages for employer/reporting period Do not use comma separator or decimal	Yes

Position	Field Name	Field Specifications	Required
E2	Taxable wages paid	Total taxable wages for employer/reporting period Do not use comma separator or decimal	Yes
F2	Total excess wages paid	Total excess (nontaxable) wages for employer/reporting period Do not use comma separator or decimal	Yes
G2	12th of month count for month 1	Total number of employees that worked for the employer during the payroll period that included the 12th of the month for the first month in the quarter	Yes
H2	12th of month count for month 2	Total number of employees that worked for the employer during the payroll period that included the 12th of the month for the second month in the quarter	Yes
I2	12th of month count for month 3	Total number of employees that worked for the employer during the payroll period that included the 12th of the month for the third month in the quarter	Yes
J2	No Wage Indicator	If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1) There should never be a one (1) where there are not type S records in the file, and there should never be a zero (0) when there are type S records in the file	Yes

8.2.3 Wage Record

The wage record will contain wage data for the employees. There should be one (1) row for each SSN.
Below is a description for each field in the record. (Beginning at Column A, Row 3)

Position	Field Name	Field Specifications	Required?
A3	Record type	Must be two (2) for wage record	Yes

Position	Field Name	Field Specifications	Required?
B3	SUI	Employer's account number	Yes
C3	Reporting Period	This field will contain the last month of the quarter and the year For example, the values for 2014 should be: 1st - 032014 2nd – 062014 3rd - 092014 4th – 122014	Yes
D3	SSN	Employee's SSN Note: the SSN must contain nine (9) digits Excel will trim leading zeros (0) with the default settings Set the number format to 'text' for the SSN column if creating the file with Excel	Yes
E3	First Name	Employee's First Name, as printed on Social Security card	Yes
F3	Employer's middle Initial	Employees Middle Initial Do not fill if there is no middle initial	No
G3	Employee's last name	Employee's Last Name, as printed on Social Security card	Yes
H3	Gross wages paid	Gross wages subject to UI paid to employee for employer/unit/reporting period Do not use comma separator or decimal	Yes
I3	Out of State Taxable Wages Paid	Out of State taxable wages subject to UI paid to employee for the year Do not use comma separator or decimal	Yes, if Out of State Wages – State Code is provided
J3	Hours worked	Include hours worked during the quarter for the employee	No

Position	Field Name	Field Specifications	Required?
K3	Employee 12th of month for month 1	Employee worked for the employer during the payroll period that included the 12th of the month for the first month in the quarter	No
L3	Employee 12th of month for month 2	Employee worked for the employer during the payroll period that included the 12th of the month for the second month in the quarter	No
M3	Employee 12th of month for month 3	Employee worked for the employer during the payroll period that included the 12th of the month for the third month in the quarter	No
N3	Owner/Officer relationship information	Include the owner/officer relationship of the worker 0- Employee 1- Officer	Yes
O3	Adjustment Code	Numeric - Reason code for adjustment to employee wages Zero (0) means original filing Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Yes
P3	Other description	Description if adjustment code is ten (10)	Only if Adjustment Code in column O3 = Ten (10)
Q3	Location	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location	No

Position	Field Name	Field Specifications	Required?
R3	SOC code of the employee	SOC code of the employee Ex. 11-0000	No
S3	Out of State Wages – State Code	State code/abbreviation associated with Out of State wages reported for employee	Yes, if Out of State Wages are provided

8.2.4 Final Record

The final record will contain totals for the file.

Below is a description for each field in the record. (Beginning at Column A, Row 4)

Position	Field Name	Field Specifications	Required?
A4	Record type	Must be three (3) for final record	Yes
B4	Total number of records in file	Include total number of wage records in file	Yes
C4	Total wages reported	Include total SSN level wages reported in file Do not use comma separator or decimal	Yes

8.3 Download Sample File for Employer CSV File Layout

8.3.1 Original Submission

See Section 12.4 for a sample employer CSV file layout

8.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN in the record type two (2). A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample employer CSV file layout for amendment.

9 AGENT CSV INTERFACE FILE DEFINITION

9.1 General Information

This section contains the file specifications for the state Unemployment Insurance Tax and Wage reporting .csv file format. This format can be created using commercially available spreadsheet software (e.g., Microsoft Excel). Agents can file multiple employers / reporting periods in the file. There is no need to generate a separate file for each employer or reporting period. The file can also contain original filings and adjustments in the same file, however, an original and amendment for the same employer and reporting period cannot be included in the same file.

Report the actual wages paid for amended wage records. Do not report the difference between the amended and original wages.

This incoming file is submitted to the agency via the employer wage file upload process. The file is a comma separated file, and there is no set length for the rows. The following paragraphs contain the specifications for the incoming wage report and outgoing confirmation files. Users will upload the incoming files, and the system will process the file and generate the outgoing confirmation files.

If an SSN record is rejected for any reason, then the entire employer record associated with that SSN will be rejected.

9.1.1 Rules for Currency Fields

- Must contain only numbers
- No comma separators
- No signed amounts (high order signed or low order signed)
- Include both dollars and cents with no decimal point (example: $59.60 = 00000005960)

9.1.2 Rules for SSN Fields

- Must contain nine (9) digits
    - Excel will trim leading zeros (0) with the default settings
    - Set the number format to ‘text’ for the SSN column if creating the file with Excel

9.2 Agent CSV File

This incoming file is submitted to the system via the wage file upload process. The file is a comma separated file. The file contains four (4) records and the rules for records and fields within the file as described in the following subchapters.

9.2.1 Submitter Record

The submitter record will contain information about the business submitting the file, this may be the same as one (1) of the employers. Below is a description for each field in the record. (Beginning at Column A, Row 1)

Position	Field Name	Field Specifications	Required
A1	Record Identifier	Should always be zero (0)	Yes
B1	Submitters FEIN	The business FEIN; numbers only, do not include the hyphen	Yes
C1	Business Name	The legal name of the business submitting the file	Yes
D1	Business Address	The mailing address of the business submitting the file	No
E1	Business City	The mailing address city of the business submitting the file	No
F1	State FIPS code	The two character FIPS code for twenty-four (24) for 'STATE' or fifty-four (54) for 'STATE'	No
G1	Transmitter ZIP Code	The mailing address ZIP Code of the business submitting the file Include leading zeros (0)	No
H1	Transmitter ZIP code extension (+4)	The mailing address ZIP Code extension of the business submitting the file If unknown, fill with spaces	No, fill with spaces or include the + Four (4)
I1	Transmitter Contact	First and last name of individual from submitting business who is responsible for the accuracy and completeness of the wage report Format the names as: First name<space>last name	Yes
J1	Transmitter Contact Telephone Number	Contact telephone number, include the area code Numbers only, no special characters	No
K1	Telephone Extension/Box	Contact telephone number extension (if any) If there is no extension, fill with spaces	No, fill with spaces or Extension

Position	Field Name	Field Specifications	Required
L1	Transmitter Email	Contact email address Alphanumeric	Yes

9.2.2 Employer Record

The employer record will contain summary totals for the employer / reporting period.
Below is a description for each field in the record. (Beginning at Column A, Row 2)

Position	Field Name	Field Specifications	Required?
A2	Record type	Must be one (1) for employer record	Yes
B2	UI Account Number	Employer UI Account number	Yes
C2	Reporting Period	This field will contain the last month of the quarter and the year For example, the values for 2014 would be: 1st - 032014 2nd - 062014 3rd - 092014 4th - 122014	Yes
D2	Gross wages paid	Total Gross wages for employer/reporting period Do not use comma separator or decimal	Yes
E2	Taxable wages paid	Total taxable wages for employer/reporting period Do not use comma separator or decimal	Yes
F2	Excess wages paid	Total excess (nontaxable) wages for employer/reporting period Do not use comma separator or decimal	Yes
G2	12th of month data for month 1.	Total number of employees that worked for the employer during the payroll period that included the 12th of the month for the first month in the quarter	Yes
H2	12th of month data for month 2.	Total number of employees that worked for the employer during the payroll period that included the 12th of the month for the second month in the quarter	Yes

Position	Field Name	Field Specifications	Required?
I2	12th of month data for month 3.	Total number of employees that worked for the employer during the payroll period that included the 12th of the month for the third month in the quarter	Yes
J2	No Wage Indicator	If the employer did not pay wages during the calendar quarter and there will not be any employee records in the report, enter a zero (0) Otherwise enter a one (1) There should never be a one (1) where there are not type S records in the file, and there should never be a zero (0) when there are type S records in the file	Yes

9.2.3 Wage Record

The wage record will contain wage data for the employees. There should be one (1) row for each SSN / employer / reporting period. Below is a description for each field in the record. (Beginning at Column A, Row 3)

Position	Field Name	Field Specifications	Required?
A3	Record type	Must be two (2) for wage record	Yes
B3	SUI	Employer's UI Account Number	Yes
C3	Reporting Period	This field will contain the last month of the quarter and the year For example, the values for 2014 should be: 1st - 032014 2nd – 062014 3rd - 092014 4th – 122014	Yes
D3	SSN	Employee's SSN Note: the SSN must contain nine (9) digits Excel will trim leading zeros (0) with the default settings Set the number format to 'text' for the SSN column if creating the file with Excel	Yes

Position	Field Name	Field Specifications	Required?
E3	First Name	Employee's First Name, as printed on Social Security card	Yes
F3	Employer's middle Initial	Employees Middle Initial	No
G3	Employee's last name	Employee's Last Name, as printed on Social Security card	Yes
H3	Gross wages paid	Gross wages subject to UI paid to employee for employer/unit/reporting period Do not use comma separator or decimal	Yes
I3	Out of State Taxable Wages Paid	Out of State taxable wages subject to UI paid to employee for the year Do not use comma separator or decimal	Yes, if Out of State Wages – State Code is provided
J3	Hours worked	Include hours worked during the quarter for the employee	No
K3	Employee 12th of month for month 1	Employee worked for the employer during the payroll period that included the 12th of the month for the first month in the quarter	No
L3	Employee 12th of month for month 2	Employee worked for the employer during the payroll period that included the 12th of the month for the second month in the quarter	No
M3	Employee 12th of month for month 3	Employee worked for the employer during the payroll period that included the 12th of the month for the third month in the quarter	No
N3	Owner/Officer relationship information	Include the owner/officer relationship of the worker	Yes

Position	Field Name	Field Specifications	Required?
O3	Adjustment Code	Numeric - Reason code for adjustment to employee wages Zero (0) means original filing Refer Section 12.2 Adjustment Reason Codes for valid reason codes	Yes
P3	Other description	Description if adjustment code = Ten (10) If not, leave blank	Only if Adjustment Code in column O3 = Ten (10)
Q3	Location	Employer location/Unit Right justify and fill with spaces If blank, defaulted to primary location	No
R3	SOC code of the employee	SOC code of the employee Ex. 11-0000	No
S3	Out of State Wages – State Code	State code/abbreviation associated with Out of State wages reported for employee	Yes, if Out of State Wages are provided

9.2.4 Final Record

The final record will contain totals for the file.

Below is a description for each field in the record. (Beginning at Column A, Row 4)

Position	Field Name	Field Specifications	Required?
A4	Record type	Must be three (3) for final record	Yes

Position	Field Name	Field Specifications	Required?
B4	Total number of records in file	Total number of wage records in file	Yes
C4	Total wages reported	Total SSN level wages reported in file Do not use comma separator or decimal	Yes

9.3 Download Sample File for Agent CSV File Layout

9.3.1 Original Submission

See Section 12.4 for a sample agent CSV file layout

9.3.2 Amendment Submission

To amend wages for a SSN, employers should enter the proper adjustment code against each SSN in the record type 2. A new employee can be added by simply adding a new record with the proper wages. To modify wages for an employee, employers must enter the same SSN and the new wages with proper adjustment code. To delete an employee from the submission, employers must enter the SSN with zero (0) wages and proper adjustment reason code.

See Section 12.4 for a sample agent CSV file layout for amendment.

10 AGENT PAYMENT SUBMISSION – PAYMENT ALLOCATION FILE

10.1 General Information

In the Agent Self-Service Portal, agents can submit payments for a single or multiple client employers. If an agent chooses to submit payment for multiple employers, they must first tell the system how they want the single payment allocated between their clients. The payment allocation file is the way this is done. Agents may manually allocate payments or submit a payment allocation file.

There are two payment allocation files: an agent payment allocation file download (agent pulls the file from the system) and an agent payment allocation file upload (agent uploads the file to the system).

The download file contains basic information about the agent's clients:

- Employer UI Account Number for all active clients
- Total amount due for each client
- Amount due for the most recently completed calendar quarter for each client

Agents may select the following type of file for download:

- A file that contains only those clients that have a power of attorney on file with DEW.
- A file that contains only those clients that who were in wage report file – you will be required to enter the confirmation number(s) of the report(s).
- A file that contains only those clients that have a power of attorney on file with DEW AND those clients that who were in wage report file – you will be required to enter the confirmation number(s) of the report(s).

The upload file contains the same elements as the download file with one more element added:

- Amount of payment to be allocated to this employer. Note that the payment amounts for individual employers cannot exceed the total outstanding debt for that employer.

Agents will download the file from the UI system, modify the file to add the amount they would like to pay for each client, and then upload the file. After the allocation file is uploaded, the agent can make a payment and the system will allocate the total payment among clients based on the amounts in the uploaded file.

10.2 Download Payment Allocation CSV File

This download file is pulled from the SCDEW SUITS website by the agents. It is a comma separated value (.csv) file. The layout is below.

10.2.1 Summary Section – Row 1

This row will contain summary information about the file. (Beginning at Column A, Row 1)

Column	Column Name	Column Description
A1	Record Identifier	Will always be 0
B1	Agent ID	Contains the Agent ID assigned by the system.
C1	Total Number of Employers in the file	Contains the total number of employers who have authorized the agent to make payments AND who have outstanding debt.

10.2.2 Detail Section – Remaining Rows

These rows will contain information about the separate employer accounts. Each row will contain the Employer ID number as well as debt information. An example of the file is below the table. (Beginning at Column A, Row 2)

Column	Column Name	Column Description
A2	Record Identifier	Will always be 1
B2	Employer ID	Contains the Employer ID.
C2	Total Amount Due	Contains the total amount due by the employer. This is a currency field and will contain the decimal and cents. This field will not contain commas. Example: $1,000.23 will be included as 1000.23
D2	Quarter Amount Due	Contains the amount due for the most recently completed calendar quarter. The amount will contain all amounts due for the quarter. This is a currency field and will contain the decimal and cents. This field will not contain commas. Example: $1,000.23 will be included as 1000.23

See Section 12.4 to download a sample file for agent payment allocation.

10.3 Payment Allocation File

This incoming file is submitted through the Agent Self-Service Portal via the online screens. It will be a comma separated file that contains payment allocation amounts for each employer for whom the agent is authorized to make payments. Agents can upload a file to the system without first generating a download file. The file must match the specifications listed below.

10.3.1 Summary Section – Row 1

This row will contain summary information about the file. This record should be the first record in the file. (Beginning at Column A, Row 1). All fields are required.

Column	Column Name	Column Description
A1	Record Identifier	Will always be 0
B1	Agent ID	Contains the Agent ID assigned by the system.
C1	Total Number of Employers in the file	Contains the total number of employers who have authorized the agent to make payments AND who have outstanding debt.

10.3.2 Detail Section – Remaining Rows

These rows will contain information about the separate employer accounts. Each row will contain the Employer ID number as well as debt information. An example of the file is below this table. (Beginning at Column A, Row 2). All fields are required.

Column	Column Name	Column Description
A2	Record Identifier	Will always be 1
B2	Employer ID	Contains the Employer ID.
C2	Total Amount Due	Contains the total amount due by the employer. This is a currency field and should contain the decimal and cents. This field should not contain commas. Example: $1,000.23 should be included as 1000.23 Enter $0 if the file is created manually.
D2	Quarter Amount Due	Contains the amount due for the most recently completed calendar quarter. The amount will contain all amounts due for the quarter. This is a currency field and should contain the decimal and cents. This field should not contain commas. Example: $1,000.23 should be included as 1000.23 Enter $0 if the file created manually.

E2	Allocated Amount	This column will contain the allocated payment amount for the employer that is entered by the agent. The system will store this amount as the allocated payment amount. This is a currency field and should contain the decimal and cents. This field should not contain commas. Example: $1,000.23 will be included as 1000.23

See Section 12.4 to download a sample file for agent payment allocation.

11 PAYMENT SUBMISSION – ACH CREDIT OUTBOUND FILE

11.1 General Information

In the Employer or Agent Self-Service Portal, employers or agents can submit payments via the payment method ACH Credit. This requires the employer or agent download the confirmation file from SUITS and create an ACH Credit file which they send to the bank. The bank then 'pushes' the money to DEW each night via interface.

The system will allow users to download the ACH Credit confirmation file to be sent to the bank. This file will identify payment amount, the Account ID, and the ACH Credit confirmation number. The "Payment Related Information" of the Addenda record in the ACH file sent to bank should have this information in the format defined in the following section.

Employer or Agent are prompted to download the ACH Credit Confirmation file from the Payment Confirmation screen when ACH Credit payment method is selected. Once downloaded, the employer or agent can create their Addenda record of the ACH file with this information. The bank will initiate the ACH Credit process, and the payment will be entered in SUITS once received via bank interface.

SOUTH CAROLINA DEPARTMENT OF EMPLOYMENT AND WORKFORCE
1550 Gadsden St., Columbia, SC 29201

11.2 ACH Addenda record specification

The ACH file sent by employers and agents to their bank should have an Addenda record with the information in the ACH confirmation file downloaded from SUITS. “Payment Related Information” field in the addenda record is a free filed with 80 characters length from position 04-83. This filed should be in following format.

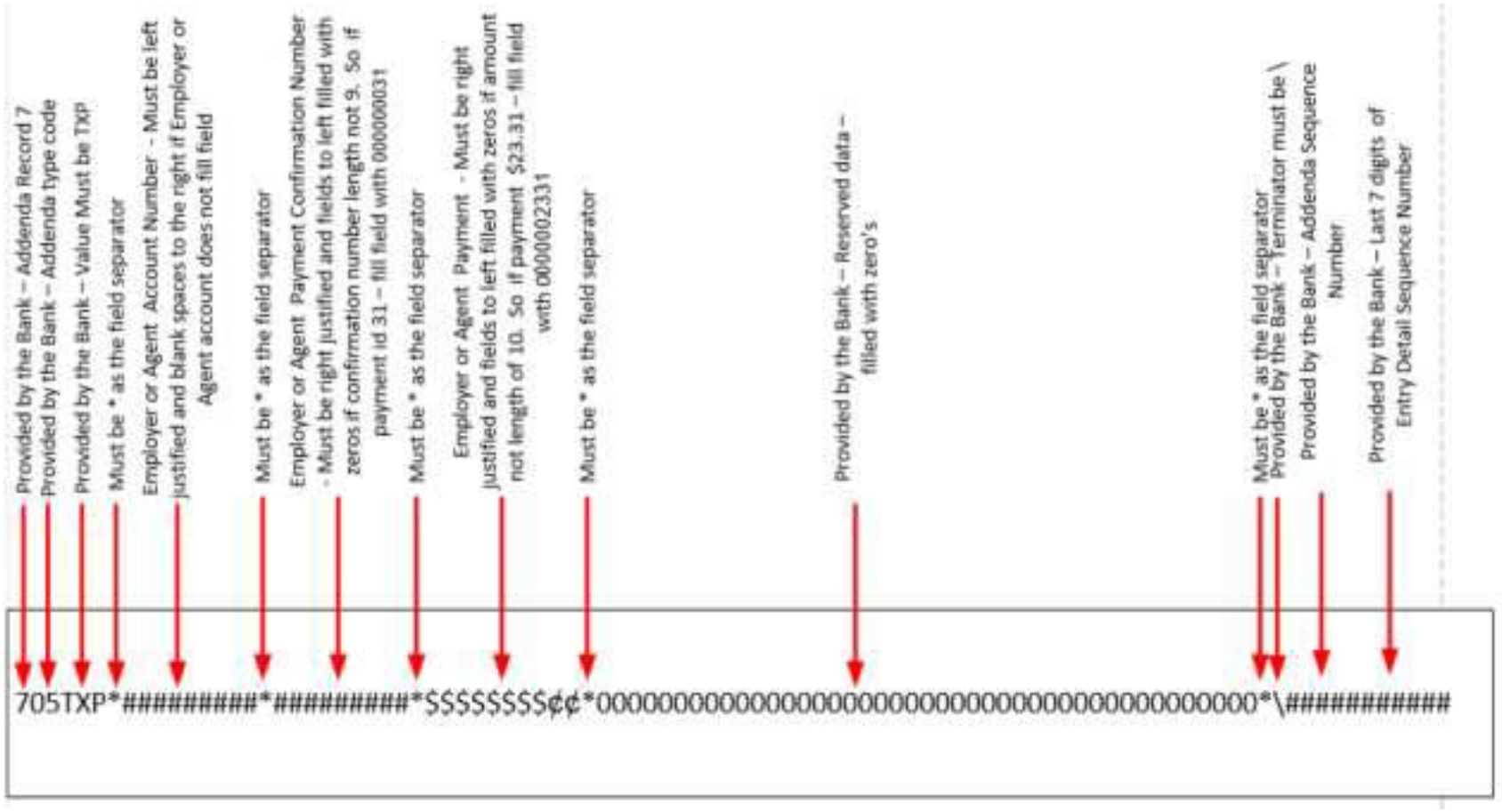
	Field Name	Format/Description	Length	Logic/Validation
1	Record Type	‘7’ designates an addenda record for a specific Entry detail record	1	“7”
2	Addenda Type Code	‘05’ is the addenda type	2	“05”
3	Payment Related Information (80 characters spaces 4-83) Discretionary Data	Discretionary Payment related data. This field is broken down further into five (5) additional fields each field is separated by a field separator (*). These fields contain data regarding the individual employer accounts to which the payments are to be applied.		
3a	Reserved	Reserved.	3	Reserved Value must be ‘TXP’
		Separator	1	Field Separator (*)
3b	Employer Account ID Agent Account ID	Account number of the employer or Agent submitting the payment	9	Left justified with blank spaces to the right
		Separator	1	Field Separator (*)

	Field Name	Format/Description	Length	Logic/Validation
3c	Confirmation Number	This positon should contain the confirmation number assigned by the system	9	Left justified with blank spaces to the right
		Separator	1	Field Separator (*)
3d	Amount	Total Payment amount of the ACH Credit for a particular transaction in US dollars and cents	10	Amount of Payment (dollars and cents. No decimal No comma) Left fill with zeros (0) $$$$$$$$¢¢
		Separator	1	Field Separator (*)
3e	Reserved Data	Reserved Data	43	Reserved Data – fill with 0s 0000000000000000000000000000000000000000000
		Separator	1	Field Separator (*)
		Terminator Always '\'	1	must be = \
4	Addenda Sequence Number	A sequential ascending consecutive number assigned to each primary addenda record	4	"0001"

	Field Name	Format/Description	Length	Logic/Validation
5	Entry Detail Sequence Number	Contains the last seven digits (or ascending sequence number section) of the Entry Detail Record's trace number	7	Last seven (7) digits of the trace number of the related entry detail record

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11.3 Download ACH Credit CSV File

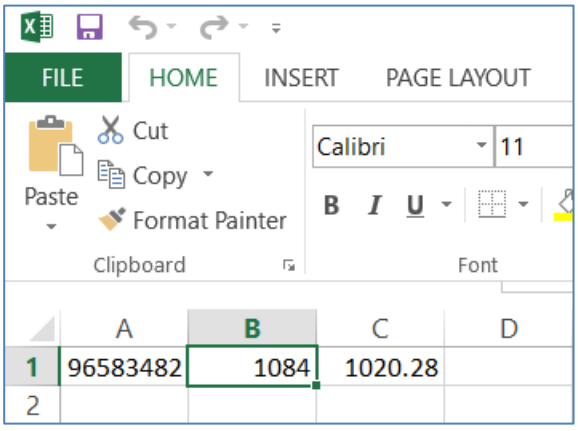
This download file is pulled from the DEW website by the agent or employers. It is a comma separated value (.csv) file. The layout is below.

11.3.1 Detail Section – Agent ACH Credit Outbound Row 1

This row will contain summary information about the Agent payment. (Beginning at Column A, Row 1)

Column	Column Name	Column Description
A1	Agent ID	Contains the Agent Account ID number which is assigned to the agent by SUITS
B1	Confirmation Number	Contains the ACH Credit payment confirmation number which is generated upon completion of the payment wizard.
C1	Total Payment Amount	Contains the total payment amount being paid by the agent.

Below is an example of the Agent download file:



End of Example.

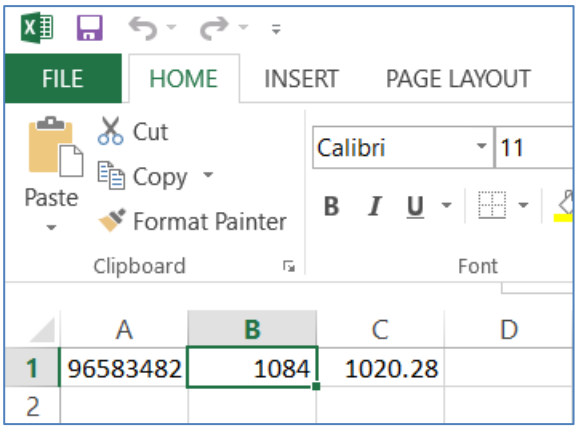
11.3.2 Detail Section – Employer ACH Credit Outbound Row 1

This row will contain summary information about the Employer payment. (Beginning at Column A, Row 1)

Column	Column Name	Column Description

A1	Employer ID	Contains the Employer ID.
B1	Confirmation Number	Contains the ACH Credit payment confirmation number which is generated upon completion of the payment wizard.
C1	Total Payment Amount	Contains the total amount being paid by the employer. This is a currency field and will contain the decimal and cents. This field will not contain commas. Example: $1,000.23 will be included as 1000.23

Below is an example of the Employer download file:



End of Example.

12 APPENDICES

12.1 Worker Relationship

The state requires information about the relationship between the employee and the employer. This information will be used to help agency staff make determinations regarding unemployment claims.

The types and values that should be included in the file are described below:

Value	Title	Description
0	Worker/Employee	Use this if there is no relationship between the worker and the employer Most workers will fall into this category
1	Owner or Officer	Use code one (1) if the worker is also an owner or officer of the business.

12.2 Adjustment Reason Codes

Code used for adjustment to employee wages.

The code descriptions are the following:

Code	Adjustment Reason	
01	Employment Adjusted	
02	Employment and Wages adjusted because the workers performed services for a different business	
03	Employment and Wages adjusted because they were not taxable	
04	Employment and Wages adjusted because they were reported to the wrong state	

Code	Adjustment Reason	
05	Employment and Wages adjusted for a non-subject employer	
06	Employment and Wages adjusted to correct computer system, data entry or accounting errors	
07	Reversal of Previous Adjustment	
08	Staff Amended	Staff facing & selected only If a staff member updates
09	Wages adjusted because worker(s) were hired/terminated	
10	Other	
11	Wages reported to another state, reported to SC in error	
12	Wages belong to exempt employee	
13	Wages belong to 1099 independent contractor	
14	Wages belong to an elected official	
15	Wages reported in error due to an accounting error	

12.3 Email Standard Format

- Must contain only one (1) @ symbol
- Must not contain consecutive periods to the left or right of the @ symbol
- Must not contain empty spaces to the left or right of the @ symbol
- Must not contain a period in the first or last position
- Must not contain a period immediately to the left or right of the @ symbol
- Must not contain an @ symbol in the first or last position
- Must not contain characters other than alphanumeric, hyphens, or periods to the right of the @ symbol
- Must not contain hyphens immediately to the right of the @ symbol or before or after a period
- Must contain either alphanumeric characters or the following keyboard characters, to the left of the @ symbol: (~!#$%^&*_+{}|?’-= / `)

12.4 Sample Files

Click here to download the employer wage sample files

Click here to download the agent wage sample files

Click here to download the agent employer wage sample files

12.5 FIPS Codes

Employer Account ID	Employer Unit ID	Name	FIPS Code	Postal Code
9999901	1	Alabama	1	AL
9999902	1	Alaska	2	AK
9999960	1	American Samoa	60	AS
9999904	1	Arizona	4	AZ
9999904	1	Arkansas	5	AR
9999906	1	California	6	CA
9999908	1	Colorado	8	CO
9999969	1	Commonwealth of the Northern Mariana Islands	69	MP



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Employer Account ID	Employer Unit ID	Name	FIPS Code	Postal Code
9999909	1	Connecticut	9	CT
9999910	1	Delaware	10	DE
9999911	1	District of Columbia	11	DC
9999912	1	Florida	12	FL
9999913	1	Georgia	13	GA
9999966	1	Guam	66	GU
9999915	1	Hawaii	15	HI
9999916	1	Idaho	16	ID
9999917	1	Illinois	17	IL
9999918	1	Indiana	18	IN
9999919	1	Iowa	19	IA
9999920	1	Kansas	20	KS
9999921	1	Kentucky	21	KY
9999922	1	Louisiana	22	LA
9999923	1	Maine	23	ME
9999924	1	Maryland	24	MD

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Employer Account ID	Employer Unit ID	Name	FIPS Code	Postal Code
9999925	1	Massachusetts	25	MA
9999926	1	Michigan	26	MI
9999927	1	Minnesota	27	MN
9999928	1	Mississippi	28	MS
9999929	1	Missouri	29	MO
9999930	1	Montana	30	MT
9999931	1	Nebraska	31	NE
9999932	1	Nevada	32	NV
9999933	1	New Hampshire	33	NH
9999934	1	New Jersey	34	NJ
9999935	1	New Mexico	35	NM
9999936	1	New York	36	NY
9999937	1	North Carolina	37	NC
9999938	1	North Dakota	38	ND
9999939	1	Ohio	39	OH
9999940	1	Oklahoma	40	OK



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Employer Account ID	Employer Unit ID	Name	FIPS Code	Postal Code
9999941	1	Oregon	41	OR
9999942	1	Pennsylvania	42	PA
9999972	1	Puerto Rico	72	PR
9999944	1	Rhode Island	44	RI
9999945	1	South Carolina	45	SC
9999946	1	South Dakota	46	SD
9999947	1	Tennessee	47	TN
9999948	1	Texas	48	TX
9999978	1	U.S. Virgin Islands	78	VI
9999949	1	Utah	49	UT
9999950	1	Vermont	50	VT
9999951	1	Virginia	51	VA
9999953	1	Washington	53	WA
9999954	1	West Virginia	54	WV
9999955	1	Wisconsin	55	WI
9999956	1	Wyoming	56	WY

12.6 Wage Report File Validations

Refer to T03 - Wage File Validation Matrix.xlsx