

Maine Revenue Services

Electronic File Specifications for Forms 1099 and W-2G

Tax Year 2024

(Income from 1-1-2024 to 12-31-2024)

Contents

Introduction	3
Important Changes	3
Payers Required to Submit Forms 1099 and W-2G	
Due Date:	4
Forms Required	5
Submitting Files	5
2024 Form 1099 and W-2G File Data Standards	5
Electronic Filing Requirements	5
Basic Requirements	5
ASCII Character Set	
Logical Record Length	6
Delimiters	
Record Name: End of Transmission "F" Record	
Technical and Administrative Contacts:	
Appendix A - Acceptable ASCII-1Character Set	

Introduction

This publication contains the specifications and instructions for electronically filing original copies of Forms 1099 and W-2G with Maine Revenue Services (MRS). These file specifications must be followed unless deviations have been specifically granted in writing by MRS. If additional information is needed or if there are any questions, please see the administrative contact list on page 13.

Important Changes

Record Changes:

- B-Record, column 288-327 updated to include hyphen (-) and ampersand (&) as
 acceptable special characters for this field. No other special characters can be
 used in this field.
- B-Record, column 328-367 updated to include hyphen (-) and ampersand (&) as acceptable special characters for this field. No other special characters can be used in this field.

Other Changes:

- T-Record, column 2-5 updated in 2023 to accept prior year information returns.
- T-Record, column 6 updated in 2023 to accept P (prior year) or blank.
- A-Record, column 2-5 updated in 2023 to accept prior year information returns.
- B-Record, column 2-5 updated in 2023 to accept prior year information returns.
- Effective immediately, the income tax withholding unit has a new direct phone number. The income tax withholding unit can be contacted via phone at 207-624-7661 Monday through Friday from 9 am to 12 pm or via email at withholding.tax@maine.gov
- On February 23, 2023, the U.S. Department of the Treasury issued final regulations (T.D. 9972) that reduced the thresholds for filing certain information returns and other documents that are required to be filed electronically from 250 forms to 10. The new federal (10-return) threshold applies, in aggregate, for almost all federal information return types, including federal Forms W2 and Forms 1099, beginning in 2024.
- Beginning with tax forms required to be filed with MRS in 2024, employers and
 payers that are required to file at least 10 federal Forms W-2 and Forms 1099, in
 aggregate, must file the forms electronically with MRS using the Maine Tax
 Portal at revenue.maine.gov.

- The Maine Tax Portal will validate files before submission. Files that fail validation will not be processed.
- MRS does not accept/process corrected information returns via bulk upload (Forms 1099/W2G). Effective October 10, 2023, corrected 1099s will be available for filing manually via the Maine Tax Portal.
- Forms 1099 and W-2G files will be submitted using the Maine Tax Portal. See "Submitting Files" below for more information about the Maine Tax Portal.
- Any person who is required to file an information return in accordance with 36 M.R.S. §5242 and who fails to do so on or after January 31, 2022, or who willfully furnishes a false or fraudulent return of information, is subject to a penalty of \$50 for each such failure. Generally, returns of information include Forms W-2, Forms 1099, and other similar forms containing tax information necessary for filing Maine income tax returns.

Payers Required to Submit Forms 1099 and W-2G

- A payer required to electronically file with the IRS any type of 1099 form must report such form information directly to MRS for Maine residents and recipients of payments sourced to Maine. **Do not use combined Fed/State Program.**
- A payer who is licensed to conduct pari-mutuel wagering pursuant to 8 M.R.S. §§271 or 275-D, or who is licensed to operate a slot machine pursuant to 8 M.R.S. chapter 31, subchapter 2 must electronically file <u>all</u> Forms W-2G directly with MRS, regardless of the number of forms or amount of withholding.
- Any payer who withheld Maine income tax from any payee during the year and did not report the amount of Maine withholding for each of those employees or payees on Form 941-ME, Schedule 2 must report annual payee statement information (Forms W-2 and 1099 series) with MRS for all payees who are Maine residents or who received Maine-source income.

Due Date:

• The filing due date for submitting Forms 1099 and W-2G for tax year 2024 is <u>January 31, 2025</u>. Earlier filing is encouraged to help combat identity theft and refund fraud.

Forms Required

Only the following forms are required. Payment information from other forms should be excluded to improve system efficiency and will be ignored if included.

Form 1099-B	Proceeds from Broker and Barter Exchange Transactions
Form 1099-DIV	Dividends and Distributions
Form 1099-G	Certain Government Payments
Form 1099-INT	Interest Income
Form 1099-K	Payment Card and Third-Party Network Transactions
Form 1099-MISC	Miscellaneous Income
Form 1099-NEC	Nonemployee Compensation
Form 1099-OID	Original Issue Discount
Form 1099-PATR	Taxable Distributions Received from Cooperatives
Form 1099-R	Distributions from Pensions, Annuities, Retirement, IRAs, etc.
Form W-2G	Certain Gambling Winnings

Submitting Files

Files must be submitted electronically via the Maine Tax Portal: <u>MEP | MTP - Maine</u> <u>Revenue Services</u>. If the files do not pass validation, the Maine Tax Portal will provide the reason and location of the error(s).

2024 Form 1099 and W-2G File Data Standards

MRS requires completed T, A, B, and F records using the record layout and field definitions suggested by the IRS (see IRS Pub. 1220). All filers submitting files directly to MRS should include T, A, and F records populated according to the IRS specifications, as described below and the 'B' record completed to the following specifications. All other fields and records not mentioned here may be included; however, they will be ignored.

Electronic Filing Requirements

Basic Requirements

- Data should be uploaded electronically using the MTP specifications format.
- Compressed files are not accepted.
- Data files must be in text format with .txt extension.
- Each record must end with a carriage return line feed (CRLF).
- Each record must be 750 bytes in length.

- Each file should contain data for only one year. Multiple years will be rejected.
- Only ASCII files (American Standard Code for Information Interchange) will be accepted.
- Employee SSN in B record field 12-20 cannot be truncated.
- MRS will not accept redacted SSNs (xxx-xx-1234).
- SSNs cannot start with a 9.

ASCII Character Set

- American Standard Code for Information Interchange (ASCII) will be accepted. Appendix A contains a table of the ASCII Character Set.
- All character data will be treated as uppercase.

Logical Record Length

• Each record must be a uniform length of 750 bytes. Logical records MUST NOT be prefixed by record descriptor words or block descriptor words.

Delimiters

- Each record must be terminated by any one of a line feed ('\n'), a carriage return ('\r'), or a carriage return followed immediately by a linefeed.
- The ASCII-1 hexadecimal value for the carriage return character is 0D (zero and letter D); the ASCII-1 hexadecimal value for the line feed is 0A (zero and letter A). The ASCII-1 decimal values for the two characters are 13 and 10, respectively.
- DO NOT place a record delimiter before the first record of the file.
- DO NOT place more than one record delimiter (i.e., more than one carriage return/line-feed combination) following a record.
- DO NOT place record delimiters after a field within a record.

Record Name: Transmitter "T" Record

T-record column 1	Field Position	Field Title	Length	General Field Description
T-record column 2-5 Payment Year 4 Required. Enter "2024." If reporting prior year data, report the year which applies (2023, 2022, etc.) and set the Prior Year Data Indicator in field position 6 Required. Enter "P" only if reporting prior year data, report the year which applies (2023, 2022, etc.) and set the Prior Year Data Indicator in field position 6 Required. Enter "P" only if reporting prior year data. Otherwise, enter a blank. Do not enter a "P" if the tax year is 2024. Tax years cannot be mixed within a file. Numeric. Enter the 9-digit Taxpayer Identification Number (TIN). Do not enter hyphens or alpha characters Not required. Enter blanks or fill fields per IRS Pub 1220; MRS will ignore T-record column 28 Indicator Indic	T-record	Record Type	1	Required. Enter "T"
column 2-5 Column 2-5	column 1			_
T-record column 16-27 T-record column 6 T-record column 6 Transmitter's TIN process and the process and the process and the process are process and the pro	T-record	Payment Year	4	Required. Enter "2024." If reporting
T-record column 6 T-record prior Year Data Indicator T-record column 6 T-record column 6 T-record column 6 T-record column 7-15 T-record column 7-15 T-record column 16-27 T-record column 16-27 T-record column 16-27 T-record column 16-27 T-record column 28 T-record column 28 T-record column 29 T-record column 29 T-record column 30-69 T-record column 30-69 T-record column 30-4 T-record Contact Name dolumn 30-4 T-record column 30-4 T-record Contact Telephone Sexual S	column 2-5			_
T-record column 6 Indicator				applies (2023, 2022, etc.) and set the
T-record column 6 Prior Year Data Indicator 1 Required. Enter "P" only if reporting prior year data. Otherwise, enter a blank. Do not enter a "P" if the tax year is 2024. Tax years cannot be mixed within a file. Numeric. Enter the 9-digit Taxpayer Identification Number (TIN). Do not enter hyphens or alpha characters				* *
column 6 Indicator In				position 6
T-record column 28 T-record column 29 T-record column 30-69 Transmitter Name column 70-109 Trecord column 30-69 Trecord Contact Name 40 Trecord Contact Name 40 Trecord Column 34-3 Trecord Contact Name 40 Trecord Column 34-3 Trecord Column 34-3 Trecord Contact Name 40 Trecord Contact Name 40 Trecord Contact Name 40 Trecord Column 34-3 Trecord Contact Name 40 Trecord Contact Name 40 Trecord Contact Name 40 Trecord Column 34-3 Trecord Contact Name 40 Trecord C	T-record	Prior Year Data	1	Required. Enter "P" only if reporting
is 2024. Tax years cannot be mixed within a file. T-record column 7-15 T-record column 16-27 T-record column 16-27 T-record column 28 T-record column 28 T-record column 29 T-record column 29 T-record column 29 T-record column 30-69 T-record column 7-109 T-record column 30-69 T-record Contact Name 40 Multiple fields. Enter blanks or fill fields per IRS Pub 1220; MRS will ignore Multiple fields. Enter blanks or fill fields per IRS Pub 1230; MRS will ignore T-record column 30-69 T-record Contact Name 40 Multiple fields. Enter blanks or fill fields per IRS Pub 1240; MRS will ignore T-record column 30-69 T-record Contact Name 40 Multiple fields. Enter blanks or fill fields per IRS Pub 1250; MRS will ignore T-record column 30-4 343 T-record Contact Name of person to contact if transmission problems T-record column 34-4 358 Left-justify and fill with blanks. Enter blanks in the person to contact if transmission problems T-record column 34-4 358 T-record column 34-4 359 T-record column 34-5 T-record column 34-6 T-record column 34-7 T-record col	column 6	Indicator		prior year data. Otherwise, enter a
T-record column 7-15 Trecord column 7-15 Trecord column 7-15 Trecord column 16-27 Trecord column 28 Trecord column 29 Trecord column 30-69 Trecord Contact Name 40 Required. Name of person to contact if transmission problems Trecord column 30-69 Trecord Contact Name 40 Required. Name of person to contact if transmission problems Trecord column 34-343 Trecord Contact Sexual Sexu				blank. Do not enter a "P" if the tax year
T-record column 7-15 Transmitter's TIN price of the first state of th				is 2024. Tax years cannot be mixed
T-record column 29 T-record column 29 T-record column 16-27 Transmitter Name column 70-109 T-record column 10-69 T-record column 30-69 T-record column 10-69 T-record column 29 T-record column 30-69 T-record column 40 T-record column 50-69 T-record Contact 50 T-recor				within a file.
T-record column 29 T-record column 29 T-record column 16-27 Transmitter Name column 70-109 T-record column 10-69 T-record column 30-69 T-record column 10-69 T-record column 29 T-record column 30-69 T-record column 40 T-record column 50-69 T-record Contact 50 T-recor	T-record	Transmitter's TIN	9	Numeric . Enter the 9-digit Taxpayer
T-record column 16-27 Test File Indicator Ind	column 7-15			
T-record column 16-27 Test File Indicator Ind				enter hyphens or alpha characters
T-record column 28 Test File Indicator Indica	T-record	Not required	12	
T-record column 29 T-record Transmitter Name column 70-109 T-record column 70-109 T-record column 30-69 T-reco	column 16-27	•		per IRS Pub 1220; MRS will ignore
T-record column 29 T-record Transmitter Name column 70-109 T-record column 70-109 T-record column 30-69 T-reco				
T-record column 29 T-record Transmitter Name column 70-109 T-record column 110 – 303 T-record column 304-343 T-record column 344-358 T-record column 344- 358 T-record column 344- 359 T-record column 344- 359 T-record column 344- 359 T-record column 344- 359 T-record column 344- 359- Contact Email Address T-record column 359- T-record column 359				
T-record column 29 T-record Transmitter Name column 70-109 T-record column 70-109 T-record column 30-69 T-reco	T-record	Test File	1	Not required. Enter blanks or fill fields
T-record column 29 T-record column 29 T-record column 29 Transmitter Name T-record column 30-69 T-record column 70-109 T-record column 110 – 303 T-record column 304-343 T-record column 344- 358 T-record column 344- 358 T-record column 344- 358 T-record column 359- T-record column 36-69 T-record column 36-7 T-record c	column 28			_
column 29 Indicator I				, , , , , , , ,
column 29 Indicator I				
column 29 Indicator I	T-record	Foreign Entity	1	Must be '1' or blank. Enter "1" (one)
the transmitter is not a foreign entity, enter a blank T-record column 30-69 T-record column 70-109 T-record column 110 – 303 T-record column 304- 343 T-record column 344- 358 T-record column 344- 358 T-record column 359- Contact Email column 359- Contact Email Column 359- Contact Transmitter Name 40 Left-justify and fill with blanks. Enter additional information that may be part of the name Left-justify and fill with blanks. Enter additional information that may be part of the name Multiple fields. Enter blanks or fill fields per IRS Pub 1220; MRS will ignore Required. Name of person to contact if transmission problems Omit hyphens. Left-justify and fill with blanks. Telephone number of person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 Left-justify and fill with blanks. E-mail address of person to contact		_	1	
T-record column 30-69 T-record (Continuation) T-record column 70-109 T-record (Continuation) T-record column 110 – 303 T-record column 304-343 T-record Column 344- 358 T-record column 345- T-record Column 359- T-record Contact Email column 359- T-record Contact Email column 359- T-record Contact Transmitter Name 40 Eeft-justify and fill with blanks. Enter additional information that may be part of the name T-record column 304- T-record Contact Name 40 T-record Contact 15 T-record Contact Email S0 T-record Contact Email Address 50 T-record Contact Email 50 T-record Contact Email Address 50 T-record Contact Email	Column 29	Indicator		•
T-record column 30-69 T-record Transmitter Name T-record (Continuation) T-record column 70-109 T-record column 110 – 303 T-record column 304-343 T-record Contact Telephone Number & Extension T-record column 359- T-record Contact Email Summary Advance Address T-record Contact Email Address T-record Contact Email Summary Advance Transmitter Name Address T-record Contact Email Summary Advance Transmitter Name Address Left-justify and fill with blanks. Enter additional information that may be part of the name Multiple fields. Enter blanks or fill fields per IRS Pub 1220; MRS will ignore Required. Name of person to contact if transmission problems T-record Contact Telephone Number Summary Address T-record Contact Email Summary Address T-record Contact Email Address of person to contact				
Transmitter Name T-record (Continuation) Transmitter Name (Continuation) Transmitter Name Left-justify and fill with blanks. Enter additional information that may be part of the name T-record (column 110 – 303) T-record (column 304- 343) T-record (Contact Name) T-record (column 344- 358) T-record (column 344- 358) T-record (Contact Name) T-record (column 344- 358) T-record (column 344- 358) T-record (column 344- 358) T-record (Contact Name) T-record (T-record	Transmitter Name	40	
T-record column 70-109 T-record (Continuation) T-record column 110 – 303 T-record column 304-343 T-record column 344- 358 T-record column 359- T-record Contact Email column 359- T-record Contact Name T-record column 359- T-record Contact Email column 359- T-record Contact Name T-record Contact Email column 359- T-record Contact Email Address T-record Contact Email address of till with blanks. Enter blanks or fill fields per IRS Pub 1220; MRS will ignore Required. Name of person to contact if transmission problems T-record Contact Telephone with blanks Telephone number of person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 T-record Contact Email Address				•
column 70-109 (Continuation) T-record column 110 – 303 T-record Contact Name dolumn 304-343 T-record column 344-358 T-record column 344-358 T-record Contact Email column 359- Contact Email additional information that may be part of the name additional information fill the name additional i		Transmitter Name	40	
T-record column 110 – 303 T-record Contact Name 40 T-record column 304- 343 T-record Contact Telephone Number & Extension Number & Extension T-record Contact Email Column 359- Address Of the name Multiple fields. Enter blanks or fill fields per IRS Pub 1220; MRS will ignore Required. Name of person to contact if transmission problems Omit hyphens. Left-justify and fill with blanks Telephone number of person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 Left-justify and fill with blanks. E-mail address of person to contact	column 70-109			9 9
T-record column 110 – 303 T-record Contact Name 40 T-record column 304-343 T-record Contact Telephone Number & Extension Number & Extension T-record Contact Email Column 359- Address T-record Contact Email South Multiple fields. Enter blanks or fill fields per IRS Pub 1220; MRS will ignore Required. Name of person to contact if transmission problems Tomit hyphens. Left-justify and fill with blanks Telephone number of person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 Left-justify and fill with blanks. E-mail address of person to contact		(
column 110 – 303 T-record column 304- 343 T-record column 344- 358 Number & Extension T-record Contact Email Column 359- Address fields per IRS Pub 1220; MRS will ignore Required. Name of person to contact if transmission problems Omit hyphens. Left-justify and fill with blanks Telephone number of person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 Left-justify and fill with blanks. E- mail address of person to contact	T-record		194	
T-record Contact Name 40 Required. Name of person to contact if transmission problems T-record Contact Telephone State				_
T-record column 304- 343 T-record Contact Name Contact Name Contact Salar S				-
column 304- 343 T-record Contact 15 Omit hyphens. Left-justify and fill with blanks Telephone number of person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 T-record Contact Email 50 Left-justify and fill with blanks. E-mail address of person to contact		Contact Name	40	
T-record Contact 15 Omit hyphens. Left-justify and fill with blanks Telephone number of person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 T-record Contact Email 50 Left-justify and fill with blanks. E-mail address of person to contact			-	
column 344- 358 Telephone Number & person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 T-record column 359- Address Telephone Description Substituting the person to contact of the person to				r
column 344- 358 Telephone Number & person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 T-record column 359- Address Telephone Description Substituting the person to contact of the person to		Contact	15	Omit hyphens. Left-justify and fill
Number & person to contact. For example, 2076241234. If with extension of 135, the example would be 2076241234135 T-record Contact Email 50 Left-justify and fill with blanks. E-mail address of person to contact				V 2
Extension 2076241234. If with extension of 135, the example would be 2076241234135 T-record Contact Email Address 50 Left-justify and fill with blanks. E-mail address of person to contact				
T-record Contact Email 50 Left-justify and fill with blanks. E-column 359- Address mail address of person to contact				<u> </u>
T-record Contact Email 50 Left-justify and fill with blanks. E-column 359- Address mail address of person to contact				
column 359- Address mail address of person to contact	T-record	Contact Email	50	-
	408			r

T-record	Not required	342	Multiple fields. Enter blanks or fill
column 409 –			fields per IRS Pub 1220; MRS will
750			ignore

Record Name: Issuer "A" Record

Field Position	Field Title	Length	General Field Description
A-record column 1	Record Type	1	Required. Enter "A"
A-record column 2-	Payment Year	4	Required. Enter "2024." If
5			reporting prior year data,
			report the year which
			applies (2023, 2022, etc.).
A-record column 6	Combined	1	Must be blank. File should
	Federal/State Filer		be submitted directly with
			Maine Revenue Services
			only; do not submit file
			through the Fed/State
			combined filing program
A-record column 7-	Not required	5	Not required. Enter blanks
11			or fill fields per IRS Pub
		_	1220 MRS will ignore
A-record column	Payer's Taxpayer	9	Numeric. Valid 9-digit
12-20	Identification		Taxpayer Identification
	Number (TIN)		Number (TIN) assigned to
			the Payer. Do not enter
			blanks, hyphens or alpha
A 1 1	D M	4	characters
A-record column	Payer Name	4	Enter blanks or fill fields
21-24	Control		per IRS Pub 1220; MRS
A	Last Ellina	1	will ignore Enter blanks or fill fields
A-record column 25	Last Filing Indicator	1	
23	indicator		per IRS Pub 1220; MRS
A-record column	Type of Detum	2	will ignore Only form types 1, B, F, 6,
26-27	Type of Return	<u> </u>	A, D, 7, 9, MC, NE and W
20-27			will be read. All other form
			codes should be excluded
			from file and will be
			ignored.
A-record column	Amount codes	18	Enter per IRS Publication
28-45	7 mount codes	10	1220
A-record column	Blank	6	Enter blanks
46-51			
A-record column	Foreign Entity	1	Enter "1" if the payer is a
52	Indicator		foreign entity. Otherwise,
			enter blank.
A-record column	First Payer Name	40	Left-justify and fill with
53-92	Line		blanks Name of Payer with
			TIN in column 12-20

A-record column	Second Payer	40	Left-justify and fill with
93-132	Name Line		blanks.
A-record column	Not required	618	Not required. Enter blanks
133-750			or fill fields per IRS Pub
			1220; MRS will ignore

Record Name: Payee "B" Record

Field Position	Field Title	Length	General Field
D 1 1 1	D 1.T	1	Description Provide the Control of t
B-record column 1	Record Type	1	Required. Enter "B"
B-record, column 2 – 5	Payment Year	4	Required. Enter "2024." If reporting prior year data, report the year
			which applies (2023, 2022, etc.).
B-record, column 6	Corrected	1	Must be blank. Maine
	Return Indicator	_	does not accept
D 1 1 7 10	N. C. I	4	Corrected Form 1099
B-record, column 7 – 10	Name Control	4	Alphanumeric. Should match first 4 characters
			of Payee name in fields
			288-327
B-record, column 11	Type of TIN	1	Must be '1' or '2'. '1'
			is Fed EIN '2' is SSN,
			ITIN, or ATIN; all
			others will be rejected
B-record, column 12 – 20	Payee TIN	9	Numeric. Do not enter
			hyphens or alpha
			characters. Do not
			truncate.
			If the TIN is not
D 1 1 21 40	D 1 4	20	available, enter blanks.
B-record, column 21 – 40	Payer's Account	20	Alphanumeric.
	Number for		Required if submitting more than one
	payee		information return of the
			same type for the same
			payee
B-record, column 41 – 44	Payer's Office	4	Alphanumeric. Enter
D 100010, Column 41 = 44	Code		the office code of the
			payer, otherwise enter
			blanks. Special
			characters not allowed
B-record, column 45 – 54	Blank	10	Enter blanks.

			1
B-record, column 55 – 66	Payment	12	Numeric. Last two
	Amount 1. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
			alpha characters
B-record, column 67 – 78	Payment	12	Numeric. Last two
	Amount 2. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
			alpha characters
B-record, column 79 – 90	Payment	12	Numeric. Last two
,	Amount 3. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
	,		alpha characters
B-record, column 91 – 102	Payment	12	Numeric. Last two
B record, commit yr 102	Amount 4. If not	12	digits represent cents.
	used, enter zeros		Do not enter decimal or
	used, enter zeros		alpha characters
B-record, column 103 –	Payment	12	Numeric. Last two
114	Amount 5. If not	12	digits represent cents.
114			Do not enter decimal or
	used, enter zeros		
D 1 1 115	D	10	alpha characters
B-record, column 115 –	Payment	12	Numeric. Last two
126	Amount 6. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
	_		alpha characters
B-record, column 127 –	Payment	12	Numeric. Last two
138	Amount 7. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
			alpha characters
B-record, column 139 –	Payment	12	Numeric. Last two
150	Amount 8. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
			alpha characters
B-record, column 151 –	Payment	12	Numeric. Last two
162	Amount 9. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
			alpha characters
B-record, column 163 –	Payment	12	Numeric. Last two
174	Amount A. If		digits represent cents.
	not used, enter		Do not enter decimal or
	zeros		alpha characters
			_
B-record, column 175 –	Payment	12	Numeric. Last two
186	Amount B. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
			alpha characters
B-record, column 187 –	Payment	12	Numeric. Last two
198	Amount C. If not		digits represent cents.
	used, enter zeros		Do not enter decimal or
			alpha characters
	i .	i e e e e e e e e e e e e e e e e e e e	1

B-record, column 199 – 210	Payment Amount D. If not used, enter zeros	12	Numeric. Last two digits represent cents. Do not enter decimal or alpha characters
B-record, column 211 – 222	Payment Amount E. If not used, enter zeros	12	Numeric. Last two digits represent cents. Do not enter decimal or alpha characters
B-record, column 223 – 234	Payment Amount F. If not used, enter zeros	12	Numeric. Last two digits represent cents. Do not enter decimal or alpha characters
B-record, column 235 – 246	Payment Amount G. If not used, enter zeros	12	Numeric. Last two digits represent cents. Do not enter decimal or alpha characters
B-record, column 247 - 258	Payment Amount H. If not used enter zeros	12	Numeric. Last two digits represent cents. Do not enter decimal or alpha characters
B-record, column 259 – 270	Payment Amount J. If not used, enter zeros	12	Numeric. Last two digits represent cents. Do not enter decimal or alpha characters
B-record, column 271 – 286	Blank	16	Enter blanks
B-record, column 287	Foreign Country Indicator	1	Enter 1 If address of payee is in foreign country. Or blank if not applicable. Other data entered will be ignored
B-record, column 288 – 327	First Payee Name Line	40	Alphanumeric. Left justify and fill with blanks; a hyphen (-) and an ampersand (&) are the only acceptable special characters
B-record, column 328 – 367	Second payee Name Line	40	Alphanumeric. Left justify and fill with blanks. Hyphen (-) and an ampersand (&) are the only acceptable special characters
B-record, column 368 – 407	Payee Street Address	40	Alphanumeric. Special characters not allowed
B-record, column 408-447	Blank	40	Enter blanks.
B-record, column 448 – 487	Payee City	40	Alphanumeric. Left justify and fill with

			blanks. Special
			characters not allowed
B-record, column 488 –	Payee State	2	Enter two-character
489			state postal
			abbreviation. Must be
			valid postal abbreviation
			per IRS Publication
			1220
B-record, column 490 –	Payee Zip Code	9	Numeric. Left justify
498			and fill with blanks if
			only first 5 digits of zip
			code are known
B-record, column 499 -	Blank	224	Enter blanks.
722			
B-record, column 723 –	Payee Maine	12	Numeric. Right justify
734	Income Tax		and zero fill. The
	Withheld		rightmost 2 digits
			represent cents.
B-record column 735-746	Not required	12	Enter blanks.
B-record, column 747 –	Enter 23 for all	2	Numeric. All entries
748	Maine payees.		other than '23' will be
	W-2G filers		ignored; there must be at
	enter 23 if the		least one Maine payee or
	winnings in Box		the file will be rejected
	1 resulted from a		
	wager that		
	occurred in		
	Maine		
B-record, column 749-750	Blank	2	Enter blanks

Record Name: End of Transmission "F" Record

Field Position	Field Title	Length	General Field Description
F-record column 1	Record Type	1	Required. Enter "F"
F-record, column 2-9	Number of A records	8	Numeric. Must equal total number of A records in file; otherwise file will be rejected
F-record column 10-30	Not required	21	Numeric. Enter zeros
F-record column 31-49	Total Maine Withholding reported in file	19	Numeric. Must equal total of Maine withholding reported in B records columns 723-734. Right justify and zero fill. The rightmost 2 digits represent cents.

			Cannot be blank.
F-record, column	Total number of	8	Numeric. Must
50-57	Payees		equal total number of
			B records in file;
			otherwise, file will
			be rejected.
F-record 58-750	Not required	693	Enter blanks

Note: C-Records and K-Records may be left in the file (they will be ignored), but the upload will be more efficient if they are removed before uploading.

Technical and Administrative Contacts:

withholding.tax@maine.gov

(207) 624-7661

Monday – Friday 9:00 AM to 12:00 PM

Appendix A - Acceptable ASCII-1Character Set

The following chart contains the character set that can be directly read or translated. The translations are shown character for character; i.e., unpacked. The chart does not show every character, just the most commonly used ones. See www.lookuptables.com.

Char	Hex	Dec
+O		
A	65	41
В	66	42
С	67	43
D	68	44
E	69	45
F	70	46
G	71	47
Н	72	48
I	73	49
J	74	4A
K	75	4B
L	76	4C
M	77	4D
N	78	4E
O	79	4F
P	80	50
Q	81	51
R	82	52
S	83	53
T	84	54
U	85	55
V	86	56
W	87	57
X	88	58
Y	89	59
Z	90	5A
0	48	30
1	49	31
2	50	32
3	51	33
4	52	34
5	53	35
6	54	36
7	55	37
8	56	38
9	57	39
Blank	32	20
- (Hyphen)	39	27
' (Apostrophe)	45	2D
CR (carriage return)	0D	13
FL (NL line feed)	0A	10