

Wage Reporting Requirements on Magnetic Media
ICESA Format – Year 2012 Compliant

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I. MAGNETIC MEDIA WAGE REPORTING REQUIREMENTS AND PROCEDURES

Employee Record Code “S” is required to report wage and tax data for an employee. The file definition is located in Appendix A. **Only the shaded fields are required by MDES. Other fields are optional.**

NOTE: MDES will accept the “RS” record in the MMREF-1 format in lieu of the layout in Appendix A. However, the instructions for completing fields as shown below and in Appendix A should be used for all formats. layout for 2000 should be broken
The following fields are required by MDES:

If you have already transitioned to the MMREF-1 format, the following fields are required by MDES:

Position 1-2	Record Identifier (“RS”)
Position 3-4	FIPS postal NUMERIC code
Position 10-18	Social Security Number
Position 19-33	Employee First Name
Position 34-48	Employee Middle Name
Position 49-68	Employee Last Name
Position 197-202	Reporting Period
Position 203-213	State Quarterly Unemployment Insurance Total Wages
Position 248-267	State Employer Account Number

FORMATS ON THE CODE “S” RECORD:

Name

The employee name on the magnetic media file must agree with the spelling of the name on the individual’s social security card.

Parts of the compound surname must be connected by a hyphen. Single letter prefixes (e.g., “O,” “D,”) must not be separated from the rest of the surname by a blank, but should be connected by an apostrophe.

Punctuation may be used when appropriate. **Do not use commas in names such as Jr. and Sr.**

Lower case letters are not acceptable.

Do not include any titles in the name. Titles make it difficult to determine an individual’s name and may prevent properly crediting earnings data.

Money Amounts

All money fields are strictly numeric.

They must include dollars and cents with the decimal point assumed.

Do not use any punctuation in any money field.

Negative (Credit) money amounts are not allowed.

Right justify and zero fill all money fields.

II. DISKETTE/ CD TECHNICAL REQUIREMENTS FOR UNEMPLOYMENT

INSURANCE REPORTING.

File Name

The file name must be UIWAGE.TXT. It MUST be in the root directory.

A diskette/ CD must not contain more than one file. It may contain multiple accounts in the one file. If more than one diskette/CD of unemployment insurance wage information is being submitted, the file on all diskettes/CD must be named UIWAGE.TXT. When submitting multiple accounts on one diskette/ CD, an account must not be split across diskettes/ CD. No files other than UIWAGE.TXT should be included on a diskette/ CD.

Transmitters of unemployment insurance wage information for multiple employers should avoid creating a separate file and a separate diskette/ CD for each employer.

Operating System

All “3.5” diskettes must be created using an MS-DOS “double density” or “high density” operating system format.

If you do not have an MS-DOS operating system, you may still be able to create MS-DOS compatible diskette files. Some operating systems, e.g., UNIX, XENIX and APPLE, may have a DOS shell that can be used to create these files. For UNIX/XENIX based systems use DOSCP command to create an MS-DOS compatible file. Check your operating system manual.

Character Set

Data must be recorded on “3.5” diskettes using the ASCII-1 character set (Appendix C).

Note: EBCDIC and ASCII-2 are not acceptable for diskette reporting.

Record Length

Each record in a file MUST be 275 characters in length. Data must be entered in each record in the exact positions shown in the attached file layout.

Formatting

Data sent on “3.5” “double density” or “high density” diskettes MUST be formatted to the density specified by the diskette manufacturer.

Delimiters

Record delimiters must be used. They must follow the last character of each record.

The record delimiter must consist of two characters and those two characters must be carriage return and line feed. The ASCII-1 hexadecimal value (Appendix C) for the carriage return character is 0D (zero and letter D); the ASCII-1 hexadecimal value (Appendix

C) for the line feed is 0A (zero and letter A). The ASCII-1 decimal values for the two characters are 13 and 10, respectively.

A record delimiter must appear immediately after the last character of each record. The carriage return character and the line feed character will be placed in positions 276 and 277, 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.

Multiple-Volume Submission

Multiple-Volume Submission is not allowed. All unemployment insurance wage information must be on one diskette/ CD.

Multiple-Account Submission

Multiple-Account Submission is allowed. A list of account numbers and the corresponding number of employees and wage total for each account must be included.

External Labels

Diskettes must contain an external label containing the following information:

1. Employer Name
2. Employer Account Number
3. Reporting Quarter/Year
4. If the diskette / CD are to be returned to the employer the diskette/CD label should have written in red ink, "Return Requested". If not, the diskette /CD will not be returned.
5. The following characters in upper left-hand part of label: MDESR022000.
NOTE: For the MMREF-1 record layout, use MDES-MMREF1 on the label.

Note: Form UI-2 and remittance must be included with diskette/CD.

**APPENDIX A: STANDARD MAGNETIC FORMAT FOR QUARTERLY WAGE
REPORTING**

RECORD NAME: S RECORD – EMPLOYEE RECORD

RECORD LENGTH = 275

DATA TYPES: A/N = ALPHANUMERIC; LEFT JUSTIFIED AND BLANK FILLED.
N = NUMERIC; RIGHT JUSTIFIED, ZERO FILLED, UNSIGNED DO NOT
INCLUDE DECIMAL IN FIELDS CONTAINING DOLLARS AND CENTS
*** ONLY THE SHADED FIELDS ARE REQUIRED BY MISSISSIPPI.**

LOCATION	FIELD NAME	FIELD LENGTH	TYPE	DESCRIPTION AND REMARKS
1-1	Record Identifier	1	A/N	Constant "S".
2-10	Social Security Number	9	A/N	Employee's social security number, if not known enter the letter "I" in position 2 and blanks in positions 3-10.
11-30	Employee Last Name	20	A/N	Enter employee last name.
31-42	Employee First Name	12	A/N	Enter employee first name.
43-43	Employee Middle Initial	1	A/N	Enter employee middle initial. If no middle initial, enter blank.
44-45	State Code	2	A/N	Enter the state FIPS postal numeric code for the state to which wages are being reported.
46-49	Blanks	4	A/N	Enter blanks.
50-63	State QTR Total Gross Wages	14	N	Enter quarterly wages subject to all taxes, as reported on UI-2 form, line 5. NOTE: Less Cafeteria Wages.

LOCATION	FIELD NAME	FIELD LENGTH	TYPE	DESCRIPTION AND REMARKS
64-77	State QTR Unemployment Insurance Total Wages	14	N	Enter quarterly wages subject to unemployment taxes. Include all tip income.
78-91	State QTR Unemployment Insurance Excess Wages	14	N	Quarterly wages in excess of the state U.I. taxable wage base.
92-105	State QTR Unemployment Insurance Taxable Wages	14	N	State QTR U.I. total wages less state QTR U.I. excess wages.
106-120	Quarterly State Disability Insurance Taxable Wages	15	N	States requiring this data will define. If not required, enter zeroes.
121-129	Quarterly Tip Wages	9	N	Include all tip income, If not required enter zeroes.
130-131	Number of Weeks Worked	2	A/N	The number of weeks worked in the reporting period.
132-134	Number of Hours Worked	3	A/N	The number of hours worked in the reporting period.
135-142	Blanks	8	A/N	Enter blank.
143-146	Taxing Entity Code	4	A/N	Constant "UTAX"
147-161	State Unemployment Insurance Account Number	15	A/N	Enter state UI employer account number. Mississippi's account number is 10 digits without dashes or slashes.

LOCATION	FIELD NAME	FIELD LENGTH	TYPE	DESCRIPTION AND REMARKS
162-176	Unit/Division Location/Plant Code	15	A/N	The ID assigned to identify wages by work site.
177-190	State Taxable Wages	14	N	Enter wages subject to state income tax.
191-204	State Income Tax Withheld	14	N	Enter state income tax withheld.
205-206	Seasonal Indicator	2	A/N	States requiring this data will define. If not required, enter blanks.
207-207	Employer Health Insurance Code	1	A/N	States requiring this data will define. If not required, enter blanks.
208-208	Employee Health Insurance Code	1	A/N	States requiring this data will define. If not required, enter blanks.
209-209	Probationary Code	1	A/N	States requiring this data will define. If not required, enter blanks.
210-210	Officer Code	1	A/N	For employees who are officers of the corporation, enter "1". Otherwise, enter "0".
211-211	Wage Plan Code	1	A/N	States requiring this data will define. If not required, enter blank.

LOCATION	FIELD NAME	FIELD LENGTH	TYPE	DESCRIPTION AND REMARKS
212-212	Month 1 Employment	1	A/N	Enter "1" if employee covered by U.I. worked during or received pay for the pay period including the 12 th day of the 1 st month of the reporting period.
213-213	Month 2 Employment	1	A/N	Enter "1" if employee covered by U.I. worked during or received pay for the pay period including the 12 th day of the 2 nd month of the reporting period.
214-214	Month 3 Employment	1	A/N	Enter "1" if employee covered by U.I. worked during or received pay for the pay period including the 12 th day of the 3 rd month of the reporting period.
215-220	Reporting Quarter and Year	6	A/N	Enter the last month and year for the calendar quarter for which this report applies, e.g., "032000" for Jan-Mar of 2000.
221-226	Date First Employed	6	A/N	Enter the month and year, e.g., "032000".

LOCATION	FIELD NAME	FIELD LENGTH	TYPE	DESCRIPTION AND REMARKS
227-232	Date of Separation	6	A/N	Enter the month and year, e.g., "032000".
233-275	Blanks	43	A/N	Enter blanks.

APPENDIX B: FEDERAL INFORMATION PROCESSING STANDARD

(FIPS 5-2 POSTAL ABBREVIATIONS AND NUMERIC CODES)

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

STATE NAME	ABBREVIATION CODE	NUMERIC ABBREVIATION CODE
Utah	UT	49
Vermont	VT	50
Virginia	VA	51
Washington	WA	53
West Virginia	WV	54
Wisconsin	WI	55
Wyoming	WY	56

Territories and Possessions

TERRITORY/POSSESSION	ABBREVIATION CODE
American Samoa	AS
Guam	GU
Puerto Rico	PR
Virgin Islands	VI
Northern Mariana Islands	MP

Military Post Offices (APO and FPO)

MILITARY POST OFFICES	ABBREVIATION CODE
Canada, Europe, Africa and the Middle East	AE
Central America and South America	AA
Alaska and the Pacific	AP
Contingency Operations	AC

APPENDIX C: ACCEPTABLE CHARACTER SETS

The following charts contain the character sets that can be directly read or translated. The translations are shown character for character, i.e., unpacked. EBCDIC is the standard character set used. The charts do not show every character for each character set, just the most commonly used characters.

ASCII-1

ASCII-1 Decimal Value	Character Value	HEX
48	0	30
49	1	31
50	2	32
51	3	33
52	4	34
53	5	35
54	6	36
55	7	37
56	8	38
57	9	39
65	A	41
66	B	42
67	C	43
68	D	44
69	E	45
70	F	46
71	G	47
72	H	48
73	I	49
74	J	4A
75	K	4B
76	L	4C
77	M	4D
78	N	4E
79	O	4F
80	P	50
81	Q	51
82	R	52
83	S	53
84	T	54
85	U	55
86	V	56
87	W	57
88	X	58
89	Y	59
90	Z	5A
32	Blank	20
39	Apostrophe	27
45	Hyphen	2D