

# ACH Credit Format

## CCD + and Special Addenda Record Format Specifications and Layout

The Department of Finance has selected the National Automated Clearing House Association (NACHA) Cash Concentration and Disbursement Plus one Addenda Record (CCD+) format for ACH Credit Corporation Tax Payments. The Department has followed the recommended industry standard Tax Payment (TXP) Banking Convention developed by the Federation of Tax Administrators and the Bankers' EDI Council of NACHA.

The ACH Credit transaction is made of two sections. The first section (Record 6) specifies the actual payment information (i.e. to whom, how much from who, etc). This record must adhere to the NACHA section is the CCD+ Special Addenda Record (Record 7) which allows the inclusion of required Corporation Tax return information with your ACH Credit payment.

The ACH Credit payment (Record 6) and Special Addenda Record (Record 2) requirements and specifications are detailed on the following pages. All ACH Credit Corporation Tax payments must adhere to these specifications so that they can be properly identified and correctly applied by the Department.

### Record 6 Specifications and Layout

FIELD DESCRIPTION	CHARACTER POSITIONS	FIELD SIZE	FIELD INPUT/ TYPE	NOTES
Record Type Code	1-1	1	6	Identifies the NACHA record type. Input is "6" in field position 1
Transaction Code	2-3	2	22	Specifies the credit account type:"22" Automated Deposit ( Credit)
Receiving DFI Identification	4-11	8	02100032	Specifies the RDFI Transit Routing Number. Input is always '02100032' for Business Taxes
Check Digit	12-12	1	2	Completes the RDFI Transit Routing
DFI Account Number	13-29	17	9355930443	Specifies the bank account number of the Department of Finance. Input is always "9355930443" for Business Taxes. Left justify and leave 7 spaces in the field blank.

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FIELD DESCRIPTION	CHARACTER POSITIONS	FIELD SIZE	FIELD INPUT/TYPE	NOTES
ACH Credit \$ Amount	30-39	10	Numeric formatted as \$\$\$\$\$\$cc	<p>Specifies the dollar amount of the ACH Credit Instruction. This is the amount of tax that will be remitted to the City of New York.</p> <p>This field is 10 positions, right justified numeric and without a decimal point or commas. Any blank spaces should zero filled, e.g., \$1500.00 would be entered as 0000150000.</p>
Identification Number	40-54	15	Alpha Numeric	Specifies Taxpayer ID, as entered on the Business Tax return.
Business Name	55-76	22	Alpha Numeric	<p>Specifies the name of the company remitting payment. Input is left justified and alpha-numeric. Any unused field positions should be left blank.</p> <p>If your company name is longer than the twenty two characters available, you should enter the first twenty characters just as they appear on your Business Tax return.</p>
Discretionary Data	77-78	2	Leave blank	Identifies special handling of an entry. No taxpayer input is required. Leave blank.
Addenda Record Indicator	79-79	1	1	<p>Specifies the use of the CCD+ Addenda Record.</p> <p>Input is always '1'.</p>
Trace Number	80-94	15	Leave blank	<p>Distinguishes the transaction for reconciliation purposes. Assigned by the financial institution sending the payment. No input is required by the taxpayer.</p> <p>Leave field blank.</p>

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## Record 7 Specifications and Layout

FIELD DESCRIPTION	CHARACTER POSITIONS	FIELD SIZE	FIELD INPUT/TYPE	NOTES
Record Type	1-1	1	7	Identifies the NACHA record type. Input is "7" in field position 1
Addendum Type Code	2-3	2	05	Identifies the addendum record type. Input is always "05".
Payment Related Information	4-83	Please note: The next 80 character positions are considered the Payment Related Information of Record Type 7. These fields are optional per NACHA standards but for properly posting your payment to your account, NYCDOF is requiring the following information:		
Segment Identifier	4-6	3	TXP	Identifies the beginning of free form descriptive detail. Input is always 'TXP'
Separator	7-7	1	*	The asterisk as a separator is required.
Taxpayer Identification	8-22	15	Alpha Numeric	Specifies your 9-digit Company Tax Identification Number. Input is numeric. Left justify and fill remaining 6 spaces with blanks.
Separator	23-23	1	*	The asterisk as a separator is required.
Tax Type Code	24-28	5		Identifies the tax payment type. Input is GCT for Corporation, UBTP for Partnership, UBTI for individuals, estates trusts and LLC's. Left justify and fill remaining spaces with blanks.
Separator	29-29	1	*	The asterisk as a separator is required.
Liability Period End Date	30-37	8	Numeric formatted as: YYYYMMDD	Specifies the end date of the tax year you are reporting. Enter in YYYYMMDD format e.g. 20111231
Separator	38-38	1	*	The asterisk as a separator is required.
State Main Form Name	39-48	10	Alpha Numeric	Enter the main City form that you will be or have filed for the Tax Year the payment is to be applied to e.g. NYC-3L, NYC-204, NYC-202. Left justify and fill remaining spaces with blanks.
Separator	49-49	1	*	The asterisk as a separator is required.

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FIELD DESCRIPTION	CHARACTER POSITIONS	FIELD SIZE	FIELD INPUT/TYPE	NOTES
State Amount	50-59	10	Numeric	Enter the amount of the payment that is to be applied to NYC tax. Input is numeric and without a decimal between dollars and cents. If your City liability is zero, continue to the next field entry. Right justified, left zero filled, no decimal point.
Separator	60-60	1	*	The asterisk as a separator is required.
Other tax amount	61-70		Leave blank	Not needed for Business Tax at this time. Enter 10 spaces.
Separator	71	1	*	The asterisk as a separator is required.
Payment Type Indicator	72-72	1	Alpha	Enter R if payment is a return Payment. Enter E if the payment is an extension payment. Enter I if the payments an installment payment or estimated tax payment.
Separator	73-73	1	*	The asterisk as a separator is required.
Access Code	74-82	9	Leave blank	Not needed for Business Tax at this time. Enter 9 spaces.
Segment Terminator	83-83	1	\	The backslash as a terminator of the 80 characters is required.
Special Addendum Sequence Number	84-87	4	0001	Identifies the addendum sequence. Input is always '0001'
Entry Detail Sequence Number	88-94	7	Leave blank	Assigned by the financial institution sending the payment. This field should be left blank.

Note: All the above fields are mandatory unless otherwise noted.