Payroll Data Interchange (PDI) Data Requirements

Fixed Length Record Format-Maximum Length Not applicable for comma delimited files

Plan Account Number: __

Plan Name:

Field Description	Start/Stop Positions 1-13	Maximun Length *	Type	Required (R) Optional (O)	Format / Value	Comments
Plan Number Employee SSN	1-13	13	Char	R	99999999 or 999-99-9999	Each Record would have to include the corresponding plan number
Division number	25-44	20	Char	R O		Required if the plan is divisionalized.
Last Name	45-79	35	Char	D		Required if the plan is divisionalized.
	80-99	20		R D		
First Name			Char	R		
Middle Name	100-119	20	Char	0		
Name Suffix	120-134	15	Char	0		
Birth Date	135-144	10	Date	R	mm/dd/yyyy	Must be four digit year.
Gender	145-145	1	Char	R	M=Male, F=Female	
Marital Status	146-146	1	Char	R	M=Married, S=Single, D=Divorced, W=Widowed	Used for spousal consent determination.
Address Line 1	147-181	35	Char	R		
Address Line 2	182-216	35	Char	R		
City	217-236	20	Char	R		
State	237-238	2	Char	R	Upper Case	
Zip Code	239-248	10	Char	R	99999-9999 or 99999	
Home Phone Number	249-258	10	Char	0		
Work Phone Number	259-268	10	Char	0		
Work Phone Ext.	269-272	4	Char	0		
Country Code	273-274	2	Char	0		Remove if all employees live in the USA.
Hire Date	275-284	10	Date	R	mm/dd/yyyy	Tremove in an emproyee must be foundigit year. Original Hire date; must be foundigit year.
Tille Date	273-204	10	Date		ппписиуууу	Employment Termination Date, do not send if only changing divisions. Keep terminated employees on the file through the end of the year.
Touris Date	005 004	40	D			
Termination Date	285-294	10	Date	K	mm/dd/yyyy	which they terminated.
Re-Hire Date	295-304	10	Date	R	mm/dd/yyyy	Use when an employee was previously terminated and rehired.
Ending Payroll date	305-314	10	Date	R	mm/dd/yyyy	Checkdate
Contribution Amount 1	315-324	10	Numb		9999999.99 Positive number implied.	Employee Before Tax Contributions
Contribution Amount 2	325-334	10	Numb		9999999.99 Positive number implied.	Employer Match or Safe Harbor Match
Contribution Amount 3	335-344	10	Numb		9999999.99 Positive number implied.	Loan Repayment
Contribution Amount 4	345-354	10	Numb	R	999999.99 Positive number implied.	Roth Contributions
Contribution Amount 5	355-364	10	Numb	R	9999999.99 Positive number implied.	Roth Match
Contribution Amount 6	365-374	10	Numb	R	9999999.99 Positive number implied.	Additional Contributions and/or Loan repayments.
Contribution Amount 7	375-384	10	Numb	R	999999.99 Positive number implied.	Additional Contributions and/or Loan repayments.
Contribution Amount 8	385-394	10	Numb	D	999999.99 Positive number implied.	Additional Contributions and/or Loan repayments.
Contribution Amount 6	303-334	10	INUITID	IX	5555555.55 T Ostave Humber Implied.	
ACTO III Word of	005 000	_			2000	Year to Date Hours Worked to include hourly and salaried employees. To be submitted each payroll period. If actual hours eligibility
YTD Hours Worked	395-399	5	Numb	R	99999	method used, this information is required to ensure people are identified as eligible and are solicited to enroll.
YTD Total Compensation	400-410	11	Numb	R	99999999.99 Positive number implied.	Total compensation - Year to date (W2 total wages) Include overtime, commission, bonus.
YTD Plan Compensation	411-421	11	Numb		99999999.99 Positive number implied.	Plan compensation - Year to date, as defined by your plan document. Used for purposes of discrimination testing.
YTD Pre Entry Compensation	422-432	11	Numb	0	9999999.99 Positive number implied.	Compensation the employee earns prior to becoming eligible to participate in the plan.
Highly Comp Employee Code	433-433	1	Char	0	Y=Yes	Required for all HCE's if we monitor HCE limits.
Percent of Ownership	434-439	6	Numb	0	999.99	Ownership or voting stock in company. Includes lineal ascendants/descendants.
Officer Determination	440-440	1	Char	0	Y=Yes	Use if they are an officer for key employee status.
						Required for online enrollment and deferral processing. If not, then optional. If using system calculated eligibility, see instructions under
Participation Date	441-450	10	Date	R	mm/dd/yyyy	eligibility indicator.
						Required for online enrollment and deferral processing. If not using these services, then optional. If using system calculated eligibility
						have excluded classes, include N eligibility indicator for all employees who are in an excluded class. If an employee moves from an ex
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Eligibility Code	451-451	1	Char	R	Y=Yes, N=No	all other employees.
Before-Tax Contribution %	452-454	3	Numb		999	If applicable, required for initial set-up of deferral processing otherwise optional.
Before-Tax Contribution \$	455-462	8	Numb		99999.99	If applicable, required for initial set-up of deferral processing otherwise optional.
After-Tax Contribution %	463-465	3	Numb		999	If applicable, required for initial set-up of deferral processing otherwise optional. i.e Roth after tax contributions
After-Tax Contribution \$	466-473	8	Numb	0	99999.99	If applicable, required for initial set-up of deferral processing otherwise optional. i.e Roth after tax contributions
Email Address	474-513	40	Char	0		Employees work e-mail address
Salary Amount	514-530	17	Char	0		Salary for the employee for a given pay period. If providing Salary Amount, it is required to provide Salary Amount Qualifier
Salary Amount Qualifier	531-532	2	Char	0		Salary period A=Annual, M= Monthly, S= Semi-Monthly, B= Bi-Weekly, H= hourly, W= Weekly
Termination Reason Code	533-552	20	Char	0	DE = Death, DI = Disability, LA = Laid off, R = Retirement, S = Separation of Service	Separation Code
Sarbanes Oxley Reporting Indicator	553-553	1	Char	0	Y or N	Trade Monitor, flags the system for excessive trading
Filler	554-559	6	Char	0	· · · · ·	Filler
Federal Exemptions	560-561	2	Char	0		Federal exemptions claimed
Employer Assigned ID	562-571	10		0		Federal exemptions claimed Employer ID (May be different from SSN but Not to replace SSN)
				0	D. dooth	
Compliance Status Code	572-577	6	Char	O	D = death	Required for Compliance Testing. Used to denote a special status for an employee that may affect year end testing.
					E = excluded due to non-participating employer of a Controlled Group or Affiliated Service Group	
					I = disabled	
					L = leased employees	
					M = military leave	
					N = non-resident alien with no U.S. income	
					R = retired	
					S = age/service requirement never met for initial eligibility purposes.	
					T = terminated in a prior year with current compensation due to severance pay.	
					U = union/collectively bargained employees	
					X = member of an excludable class of employees as defined in the plan document	
					0 (Zero) = Denotes when an employee has moved out of a status code. This will reset them to	

Technical Instructions:

1 File can be created in a standard Space Delimited ASCII format (,pm) or comma delimited format (.csv). A carriage return (criff) is required at the end of a record. Only include one participant per record.

2 THE FILE FORMAT MUST REMAIN STATIC, CHANGES TO THE FILE MUST BE COORDINATED WITH RECORD KEEPER.

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- 7 A negative sign in the contribution fields can be added in the first space of the contribution field, ie."-000012.34" or directly next to the contribution amount " -12.34" 8 All date fields must be a two-digit month(MM), two-digit day((DD), and a four digit year (YYYY)

Required data elements

Required for compliance testing.

Required for online enrollment and/or deferral recordkeeping features.

Required for Opt out managed accounts otherwise the default salary will be used if the plan doesn't manually input the salary