

Withholding 6

Methods of Filing Colorado Annual W-2 Tax Data

GENERAL INFORMATION

With few exceptions, all Colorado employers are required to withhold and remit Colorado income tax from employee pay. These taxes must be timely paid and reported by W-2 wage and withholding statements by department-set deadlines. More information about withholding tax requirements is available in publication FYI Withholding 5, Colorado Wage Withholding Tax Requirements.

W-2 statements may be submitted to the department by one of two methods:

- · Secure electronic submission, or
- · By paper.

Employers with greater than 250 employees are required to submit electronically. Those businesses with fewer employees may submit W-2s electronically or file paper W-2 statements. If mailing paper W-2 statements, the form must meet federal filing specifications.

Important: The Colorado Department of Revenue **no longer** accepts magnetic media submissions by ½ inch tape, 3480 cartridge, CD-ROM, diskette or by email submissions. Revenue Online must be used instead of magnetic media and email submissions.

W-2 STATEMENT CALENDAR

<u> 0</u>				
January 31	Employers must furnish statements to their employees on or before this date.			
Last day of	Employers must submit to the Colorado Department of Revenue any W-2			
February	statement by paper means with the annual reconciliation, form DR 1093.			
Last day of	Employers must submit to the Colorado Department of Revenue any W-2			
March	statement by secure electronic submission (including data entry option).			
NOTE: A penalty may be assessed for each W-2 that is filed late.				

W-2 FILE SPECIFICATIONS

General Rules

For alpha/numeric fields

- Left-justify and fill with blanks.
- Where the "CDOR Specific" shows "populate or zero fill," all positions must be zeros, not blank.
- Do NOT use Tabs in any field.

For money fields

- Must contain only numbers.
- No punctuation.
- No signed amounts (high order signed or low order signed).
- Include both dollars and cents with the decimal point assumed (example: \$59.60 = 000005960).
- All state withholding shall be rounded to the nearest dollar (example: \$5,500.99 = 0000550100).
- Right-justify and zero fill to the left.
- Any money field that has no amount to be reported must be filled with zeros, not blanks.
- Colorado withholding cannot be greater than Colorado taxable wages.

For the address fields

- Must conform to U.S. Postal Service rules since address fields are used by Department of Revenue to prepare mail
 correspondence, if necessary. For more information refer to the U.S. Postal Service Web site at www.usps.com
- For State, use only the two-letter abbreviations in Appendix F of the SSA EFW2 publication.
- For Country Codes, use only the two-letter abbreviations in Appendix G of the SSA EFW2 publication. Do NOT use a Country Code when a United States address is shown.

For the Submitter Federal Employer Identification Number (FEIN)

- The FEIN must match the FEIN used to register with Revenue Online.
- Only numeric characters.
- Omit hyphens.
- For sole-proprietor submitters, use the sole-proprietor's Social Security number.

For the employer FEIN

- Only numeric characters.
- Omit hyphens.

The employer FEIN should normally match the FEIN as it is associated with the Colorado Department of Revenue account number.

For the format of the employee name

- Enter the name shown on the individual's Social Security card.
- Must be submitted in the individual name fields:
 - Employee First Name
 - Employee Middle Name or Initial (if shown on Social Security card)
 - Employee Last Name
 - Suffix (if shown on Social Security card)
- Do NOT include any titles.

For the Social Security Number (SSN)

- Use the number shown on the original/replacement SSN card.
- Only numeric characters.
- · Omit hyphens.
- May NOT begin with a 666 or 9.
- For valid range numbers, check the latest list of newly issued Social Security number ranges on the Social Security Department Web site at http://www.socialsecurity.gov/employer
- If there is **no SSN available** for the employee, enter zeros (0) in positions 10 18 of the RS Record, and submit paper W2 statements for these employees to: Colorado Department of Revenue, Discovery Section, Room 634, PO Box 17087, Denver, CO 80217-0087, Attention: Withholding Unit Supervisor
- Affected employees shall also contact the Social Security office to obtain an SSN. Do NOT enter a fictitious SSN (for example, 111111111, 3333333333 or 123456789).

Answers to Frequently Asked Questions

All submitters must register on Revenue Online prior to submitting a file

- The RV record is not utilized by Department of Revenue and should be excluded from the submission.
- Validation will occur at the time of submission.
- Revenue Online will validate the full file and list all errors contained rather than rejecting after the first error is found.
- An email will be sent to the address supplied verifying the Department has received the submission. Print this
 email.

Assistance

Call (303) 205-8292, Monday through Friday, 8 a.m. to 5 p.m., Mountain Standard Time.

Code RA- Submitter Record File must contain only one RA record.

RA must be the first data record on each file.
FEIN listed in positions 3-11 must match that of the Submitter FEIN in RevenueOnline registration.
Required Colorado fields are denoted with * below.
If domestic address exists, do not populate foreign address fields. **
If foreign address exists, fill domestic address with blanks

Field Name Position Length CDOR Specific	Record Identifier* 1-2 2	Submitter's Federal Identification Number (FEIN)* 3-11 9 Submitter Specific	User Identification (User ID) 12-19 8 Populate or zero fill	Software Vendor Code 20-23 4 Populate or zero fill	Blanks 24-28 5 Blank	Resub Indicator 29 1 Populate or zero fill
	SSA Resub		Company	Location	Delivery	
Field Name	WFID	Software Code	Name*	Address	Address*	City*
Position	30-35	36-37	38-94	95-116	117-138	139-160
Length	6	2	57	22	22	22
CDOR	Donulate or	Donulate or	Cubmittor	Cubmittor	Cubmittor	Cubmitter
Specific	Populate or zero fill	Populate or zero fill	Submitter Specific	Submitter Specific	Submitter Specific	Submitter Specific
	2610 1111	2610 1111	Specific	Specific	Specific	Specific
	State		Zip Code		Foreign	Foreign
Field Name	Abbreviation*	Zip Code*	Extension	Blank	State/Province**	Postal Code**
Position	161-162	163-167	168-171	172-176	177-199	200-214
Length	2	5	4	5	23	15
CDOR	Submitter	Submitter	Submitter	Submitter	Only if	Only if
Specific	Specific	Specific	Specific	Specific	Only if Applicable	Only if Applicable
	Орссию	Орссию	Оресто	Орссию	Арріїсавіс	Арріюавіс
	Country	Submitter	Location	Delivery		State
Field Name	Code**	Name	Address	Address	City	Abbreviation
Position	215-216	217-273	274-295	296-317	318-339	340-341
Length CDOR	2	57	22	22	22	2
Specific	Only if Applicable	Populate or zero fill	Populate or zero fill	Populate or zero fill	Populate or zero fill	Populate or zero fill
		7:- CI-		Famaiana	Fausieus	Carratur
Field Name	Zip Code	Zip Code Extension	Blank	Foreign State/Province	Foreign Postal Code	Country Code
Position	342-346	347-350	351-355	356-378	379-393	394-395
Length	5	4	5	23	15	2
CDOR		·				
Specific	Populate or	Populate or	-	Populate or	Populate or	Populate or
	zero fill	zero fill	Blank	zero fill	zero fill	zero fill
	Contact	Contact	Contact Phone		Contact	
Field Name	Name*	Phone Number*	Extension	Blank	Email/Internet*	Blank
Position	396-422	423-437	438-442	443-445	446-485	486-488
Length	27	15	5	3	40	3
CDOR						
Specific	Submitter	Submitter	Submitter		Submitter	
	Specific	Specific	Specific	Blank	Specific	Blank
	Contact	Preferred Method of Problem Notification	Preparer			
Field Name	Fax	Code	Code	Blank	Ī	
Position	489-498	499	500	501-512		
Length CDOR	10	1	1	12		
Specific	Submitter Specific	Populate or Blank	Populate or zero fill	Blank		

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Code RE- Employer Record

File must contain at least one RE record.

The first RE record must follow the RA record.

Following the last RS record for an employer, create either the:

RE record for the next employer in the file; or

RF record if this is the last report in the file.

When employees working under the same Federal employer identification numer (FEIN)

separated for bookkeeping purposes, they MUST be grouped together under one RE record. Multiple submissions for the same FEIN can cause serious processing errors or delays.

Required Colorado fields are denoted with * below.

If domestic address exists, do not populate foreign address fields. **

If foreign address exists, fill domestic address with blanks

NOTE: Byte 174 has changed

Field Name Position Length CDOR Specific	Record Identifier* 1-2 2	Tax Year* 3-6 4	Agent Indicator Code 7 1 See Federal Guide	Employer/Agent Identification Number (EIN)* 8-16 9 Employer Specific	Agent for EIN 17-25 9 Agent Specific	Terminating Business Indicator 26 1 Populate or Blank
Field Name Position Length CDOR Specific	Establishment Number 27-30 4	Other EIN 31-39 9	Employer Name* 40-96 57 Employer	Location Address 97-118 22 Employer	Delivery Address* 19-140 22 Employer	City* 141-162 22 Employer
Field Name	zero fill State Abbreviation*	Guide Zip Code*	Specific Zip Code Extension	Specific Kind of Employer	Specific Blank	City Foreign State/Province**
Position	163-164	165-169	170-173	174	175-178	179-201
Length	2	5	4	1	4	23
CDOR						
Specific	Employer	Employer	Employer	Employer Specific or		Only if
	Specific	Specific	Specific	Blank	Blank	Applicable
Field Name	Foreign Postal Code**	Country Code**	Employment Code	Tax Jurisdiction	Third-Party Sick Pay Indicator	Employer Contact Name
Position	202-216	217-218	219	220	221	222-248 27
Length CDOR	15	2	1	1	1	Employer
Specific	Only if Applicable	Only if Applicable	Populate or zero fill	Populate or zero fill	Populate or zero fill	Specific or Blank
	Employer Contact	Employer Contact Phone	Employer Contact	Employer Contact		
Field Name	Phone Number	Extension	Fax Number	Email	Blank	-
Position	249-263	264-268	269-278	279318	319-512	
Length	15	5	10	40	194	
CDOR	Employer	Employer	Employer	Employer		
Specific	Specific or Blank	Specific or Blank	Specific or Blank	Specific or Blank	Blank	

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Code RS- State Wage Record CDOR file must contain at least one RS08 record with either taxable wages or tax withheld greater than zero.

Withholding cannot be greater than wages.
Required Colorado fields are denoted with * below.
If domestic address exists, do not populate foreign address fields. **
If foreign address exists, fill domestic address with blanks

	Record	State	Taxing Entity	Employee Social Security	Employee	Employee Middle Name
Field Name	Identifier*	Code*	Code	Number (SSN)	First Name*	or Initial
Position	1-2	3-4	5-9	10-18	19-33	34-48
Length	2	2	5	9	15	15
CDOR	_		Ŭ	Ü	10	10
Specific			Populate or	Employee	Employee	Employee
	RS	08	zero fill	Specific	Specific	Specific
	Employee		Location	Delivery		State
Field Name	Last Name*	Suffix	Address	Address*	City*	Abbreviation*
Position	49-68	69-72	73-94	95-116	117-138	139-140
Length	20	4	22	22	22	2
CDOR						
Specific	Employee	Employee	Employee	Employee	Employee	Employee
	Specific	Specific	Specific	Specific	Specific	Specific
		Zip Code		Foreign	Foreign	Country
Field Name	Zip Code*	Extension*	Blank	State/Province**	Postal Code**	Code**
Position	141-145	146-149	150-154	155-177	178-192	193-194
Length	5	4	5	23	15	2
CDOR						
Specific	Employee	Employee	Employee	Employee	Employee	Employee
•	Specific	Specific	Specific	Specific	Specific	Specific
			State Quarterly	State Quarterly		
			Unemployment	Unemployment		
Eletat Messa	Optional	Reporting	Insurance Total	Insurance Total	Number of	Date First
Field Name	Code	Period	Wages	Taxable Wages	Weeks Worked	Employed
Position	195-196	197-202	203-213 11	214-224	225-226	227-234
Length CDOR	2	6	11	11	2	8
Specific	Populate or	Populate or	Populate or	Populate or	Populate or	Populate or
Opecine	zero fill	zero fill	zero fill	zero fill	zero fill	zero fill
	20.0	20.0	20.0	20.0	20.0	20.0
	Date of		State Employer		State	State Taxable
			Account			
Field Name	Separation	Blank	Number	Blank	Code*	Wages*
Position	235-242	243-247	248-267	268-273	274-275	276-286
Length	8	5	20	6	2	11
CDOR	Damidata an					Caralana a
Specific	Populate or zero fill	Blank	Employer Specific	Blank	08	Employee Specific
	Zeio iiii	Dialik	Specific	Dialik	00	<u> Эресінс</u>
	State Income	Other State	Tax Type	Local Taxable	Local Income	State Control
Field Name	Tax Withheld*	Data	Code	Wages	Tax Withheld	Number
Position	287-297	298-307	308	309-319	320-330	331-337
Length	11	10	1	11	11	7
CDOR						
Specific	Employee	Populate or	Populate or	Populate or	Populate or	Populate or
	Specific	zero fill	zero fill	zero fill	zero fill	zero fill
	Cupplemental	Cupplemental				
Field Name	Supplemental Data 1	Supplemental Data 2	Blank			
Position	338-412	413-487	488-512	1		
Length	75	75	25			
CDOR	13	13	20			
Specific	Populate or	Populate or				
- · · · · ·	zero fill	zero fill	Blank			
		-	•	•		

Code RF- Final Record File must contain one RF record.

RF must be the last record.

Required Colorado fields are denoted with * below.

	Record		Number of	
Field Name	Identifier*	Blank	RW Records	Blank
Position	1-2	3-7	8-16	17-512
Length	2	5	9	496
CDOR				
Specific			_	
	RF	Blank	zero fill	Blank

Optional Records

Code RW- Employee Wage Record

The RW record is not utilized by CDOR and should be excluded from the submission; however files containing RW records will not be rejected.

Files containing RW records shall conform to the Social Security Administration EFW2 specifications.

Code RO- Employee Wage Record

The RO record is not utilized by CDOR and should be excluded from the submission; however files containing RO records will not be rejected.

Files containing RO records shall conform to the Social Security Administration EFW2 specifications.

Code RT- Total Record

The RT record is not utilized by CDOR and should be excluded from the submission; however files containing RT records will not be rejected.

Files containing RT records shall conform to the Social Security Administration EFW2 specifications.

Code RU- Total Record

The RU record is not utilized by CDOR and should be excluded from the submission; however files containing RU records will not be rejected.

Files containing RU records shall conform to the Social Security Administration EFW2 specifications.

Code RV- State Total Record

The RV record is not utilized by CDOR and should be excluded from the submission; however files containing RV records will not be rejected.

Files containing RV records shall conform to the Social Security Administration EFW2 specifications.

FYIs provide general information concerning a variety of Colorado tax topics in simple and straightforward language. Although the FYIs represent a good faith effort to provide accurate and complete tax information, the information is not binding on the Colorado Department of Revenue, nor does it replace, alter, or supersede Colorado law and regulations. The Executive Director, who by statute is the only person having the authority to bind the Department, has not formally reviewed and/or approved these FYIs.