

Instructions for Form AR941PT Pass Through Entity Withholding Report Magnetic Media Specifications

Submit the records on CD or Diskette only. Excel spreadsheet is the preferred file type. Access file will be accepted.

1. RECORD LAYOUT

| <u>Field #</u> | <u>Field Name</u> | <u>Field Description</u> | <u>Field Size</u> |
|----------------|-------------------------------|--|-------------------|
| 1 | FIN/SSN | Member FIN or SSN | 9 |
| 2 | FIRST NAME | Member first name, if individual Member complete name, if other than individual | 25 |
| 3 | MIDDLE INITIAL | Member middle initial | 1 |
| 4 | LAST NAME | Member last name | 25 |
| 5 | ADDRESS | Entity/Member address | 35 |
| 6 | CITY | Entity/Member city | 35 |
| 7 | STATE | Entity/Member state | 2 |
| 8 | ZIP | Entity/Member zip | 9 |
| 9 | TAXABLE INCOME DISTRIBUTED | Amount of Distribution | 11 |
| 10 | TAX WITHHELD | Amount Withheld and Paid on behalf of Member | 11 |

2. FIELD DATA INSTRUCTIONS

Field 1 Enter the Social Security Number or Federal Identification Number for the Member. SSN/FIN is a required field for all N records, leave blank for other record codes. Zero fill from left for any number less than 9 digits.

Field 2 For member records coded S, P, L, T or O: Enter complete name of S-Corporation, Partnership, Limited Liability Company, Trust, or Other. Supply legal name only, do not use DBA (doing business as) name.

For records coded N: Enter first name of Partner, Shareholder, Member, or Beneficiary. Supply legal name only, do not use DBA (doing business as) name.

Field 3 Enter middle initial of Member.

Field 4 Enter last name of Member.

Field 5 Enter location Member. Mailing address will be acceptable.

Field 6 Enter city Member.

Field 7 Enter state two digit mailing code Member.

Field 8 Enter mailing zip code for the Member. Zip code required for 5 digits, 9 digits accepted and preferred.

Field 9 Enter the amount of taxable income distributed to the member. Include commas and cents.

Field 10 Enter the amount of Arkansas income tax withheld on behalf of the member.

3. LABEL

Affix a label on the magnetic media and include the following on the label:

1. "AR941PT"
2. Pass Through Entity Name
3. Entities FIN
4. Number of records contained on the disk.