

# 1099-K Upload Instructions

## Payer and Recipient Information with form data

### Document Overview

Tax Year	Template Version	Last Updated on	New Updates
2025	1099K_Payer_Recipient_2.0	Nov, 2025	Added new fields such as contact person first name, contact person middle initial, contact person last name, and contact person suffix (1=Jr 2=Sr 3=I 4=II 5=III 6=IV 7=V 8=VI 9=VII)
2024	1099K_Payer_Recipient_1.0	Sep, 2024	No new updates
2023	1099K_Payer_Recipient_1.0	Aug, 2023	No new updates

### General Instructions

#### File Specifications

- **File Format:** Ensure the file is saved as .CSV (Comma-Separated Values). Other formats like .xls or .xlsx are not supported. [See how to convert other file formats to CSV.](#)
- **File Size:** The file size should not exceed the specified limit (e.g., 15 MB). Split large files into smaller ones if necessary.
- **Row Limit:** Rows exceeding 20,000 entries should be split into multiple files to ensure smooth processing.
- **Encoding:** Use UTF-8 encoding to avoid errors with special characters or unsupported languages.

#### Data and Input Specifications

- **Mandatory Fields:** Fields marked as required or mandatory must be filled for every record.
- **Empty Fields:** If a value is not applicable, leave the field blank rather than using placeholders like "N/A" or "NULL."
- **Comma in Values:** If any of the values contain commas, enclose them in double quotes (EX. "Brown, Davis & Partners").

- **Headers & Column Order:**
  - Headers can be edited as needed.
  - **Do not change the order of columns**, as the system maps data based on column position.
- **Duplicate Records:** Duplicates can cause errors or inconsistencies in the submission process. Therefore, ensure that each record is unique by removing any duplicate rows.
- **Predefined Values:** For fields with fixed-choice options, ensure you use values exactly as defined in the template instructions.
- **Special Characters:** All special characters are allowed except < > ; { } [ ] \_ \ ! : ? = (These characters will be removed before upload.) If any text has a dot followed by letters, a space will be added after the dot.
  
- **Contact Information:**
  - For each recipient, you can add up to 5 contact information.
  - Even if a payer has multiple recipients, the maximum allowed is 5 contacts per payer.
  - If a 6th contact is added for the same payer in the Bulk Upload Template and uploaded through the UI, the system will throw an error.
  - In the UI, the user can set any one of the 5 contacts as the primary contact.

Field Name	Description	Maximum Length	Allowed Input Characters
Filer reference number	The Filer reference number is a unique identifier assigned to each Filer (business).	50	Alphabets and Numbers All special characters allowed
Filer type of TIN (1=EIN 2=SSN)*	The type of the Taxpayer Identification Number (TIN) applicable to the Filer.	4	Allowed values are 1, 2, EIN, SSN 1 = EIN 2 = SSN
Filer TIN*	A nine-digit number issued to businesses, U.S. citizens, permanent residents, and	11	Numbers Allowed special character is - TIN is allowed with or without hyphen

	temporary (working) residents. The acceptable formats are 22-5454665, 234-54-5434, 898765463.		
<b>If the type of TIN is individual TIN (SSN, ITIN, ATIN, and Other), First name and Last name fields are mandatory.</b>			
Filer name (if the filer TIN is EIN)*	Filer name refers to the name of the entity or business responsible for making payments.	75	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Filer first name (if the filer TIN is SSN)*	The first name of the Filer	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Filer middle initial (if the filer TIN is SSN)	The middle initial of the Filer	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Filer last name (if the filer TIN is SSN)*	The family or surname of the Filer	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Filer suffix (if the filer TIN is SSN) (1=Jr 2=Sr 3=I 4=II 5=III 6=IV 7=V 8=VI 9=VII)	Generational or professional titles (e.g., Jr., Sr., III) to the Filer name for accurate identification.	6	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =  Allowed values: "Junior", "Jr", "Senior", "Sr", "I", "II", "III", "IV", "V", "VI", and "VII".
Filer DBA/trade name	The registered name under which a business operates and conducts its	75	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =

	affairs, distinct from its legal or registered name.		If you have multiple trade names separate them with a comma.
Filer country*	Enter the Country or Country Code as per the IRS standards. <a href="#">Refer to IRS Country Codes</a>	27	Alphabets <b>Note:</b> If left blank, it will be considered as "US".
Filer address line 1*	Enter the primary street address for the Filer's residence or business.	46	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Filer address line 2	Optional field for additional address details such as apartment, suite, unit, or building number.	46	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Filer city/town*	The municipality or urban area where the Filer resides or conducts business.	50	Alphabets and Numbers Allowed special characters only . ' -
Filer state/province/territory*	State/province/territory in which the Filer resides or conducts business.	50	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Filer ZIP code/postal code*	If the Filer is from the US, the zip code must be filled out. Otherwise, the postal code should be provided.	16	US: Numbers - 5 digits, plus an optional 4 digits (ZIP+4 format). Foreign: Up to 16 characters allowed. Special character allowed hyphen (-) slash (/).
Contact person first name	The first name of the contact person.	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =

Contact person middle initial	The middle initial of the contact person.	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Contact person last name	The family or surname of the contact person.	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Contact person suffix (1=Jr 2=Sr 3=I 4=II 5=III 6=IV 7=V 8=VI 9=VII)	Generational titles (e.g., Jr., Sr., III) to the payer name for accurate identification. (If individual)	6	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? = Allowed values: "Junior", "Jr", "Senior", "Sr", "I", "II", "III", "IV", "V", "VI", and "VII".
Contact person email address	Enter the contact person's email address	100	Alphabets and Numbers Allowed special characters are . - _ + and @
Contact person phone number	Enter the contact person's phone number	15	Numbers Allowed special characters are + - ( ) and spaces
Group names	Enter the group name you want to assign to this Filer.	75	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Payee reference number	The Payee reference number is a unique identifier assigned to each Payee.	50	Alphabets and Numbers All special characters allowed

<p>Payee type of TIN (1=EIN 2=SSN 3=ITIN 4=ATIN 5=TIN not provided)*</p>	<p>The type of the Taxpayer Identification Number (TIN) applicable to the Payee.</p>	<p>16</p>	<p>Allowed entries are EIN, SSN, ITIN, ATIN, Others. Alternatively, you can use the following numbers to indicate TIN type.</p> <p>1 = EIN 2 = SSN 3 = ITIN 4 = ATIN 5 = TIN not provided 10 = Others</p> <p>If you leave the Recipient TIN field blank, it will be considered an error. The Recipient TIN cannot be empty.</p> <p>When the TIN type is 'TIN not provided', the recipient name field is mandatory.</p> <p>If you provide 'Others', TIN type will be considered as 'SSN'.</p>
<p>Payee TIN*</p>	<p>A nine-digit number issued to businesses, U.S. citizens, permanent residents, and temporary (working) residents. The acceptable formats are 22-5454665, 234-54-5434, 898765463</p>	<p>11</p>	<p>Numbers Allowed special character is - TIN is allowed with or without hyphen</p>
<p>Payee name (if the payee TIN is EIN or TIN not provided)*</p>	<p>Full legal name of the entity receiving the payment. (Applicable only if</p>	<p>75</p>	<p>Alphabets and Numbers All special characters allowed except &lt; &gt; ; { } [ ] _ \ ! : ? =</p>

	the Payee is a business)		
Payee first name (if the payee TIN is SSN, ATIN or ITIN)*	First name of the individual receiving the payment. (Applicable only if the Payee is an individual)	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Payee middle initial (if the payee TIN is SSN, ATIN or ITIN)	Middle initial of the individual receiving the payment. (Applicable only if the Payee is an individual)	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Payee last name (if the payee TIN is SSN, ATIN or ITIN)*	The family or surname of the individual receiving the payment. (Applicable only if the Payee is an individual)	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Payee suffix (if the payee TIN is SSN, ATIN or ITIN) (1=Jr 2=Sr 3=I 4=II 5=III 6=IV 7=V 8=VI 9=VII)	Use this field to add generational or professional titles (e.g., Jr., Sr., III) to the Payee's name for accurate identification.	6	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =  Allowed values: "Junior", "Jr", "Senior", "Sr", "I", "II", "III", "IV", "V", "VI", and "VII".
Payee DBA/trade name	A DBA/trade name is a registered name under which a business operates and conducts its affairs, distinct from its legal or registered name. It allows businesses to operate under a	75	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =  If you have multiple trade names separate them with a comma.

	name different from the owner's legal name.		
Payee country*	Enter the Country or Country Code as per the IRS standards. <a href="#">Refer to IRS Country Codes</a>	27	Alphabets  <b>Note:</b> If left blank, it will be considered as "US".
Payee address line 1*	Enter the primary street address for Payee residence or business.	46	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Payee address line 2	Optional field for additional address details such as apartment, suite, unit, or building number.	46	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Payee city/town*	The city/town refers to the municipality or urban area where the taxpayer resides or conducts business.	50	Alphabets and Numbers Allowed special characters only . ' -
Payee state/province/territory*	It typically requires the taxpayer to indicate the state/province/territory in which they reside or have earned income subject to state taxation.	50	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Payee ZIP code/postal code*	If the Payee is from the US, the zip code must be filled out. Otherwise, the postal code should be provided.	16	US: Numbers - 5 digits, plus an optional 4 digits (ZIP+4 format). Foreign: Up to 16 characters allowed. Special character allowed

			hyphen (-) slash (/).
Payee email address	Enter Payee's email address if you want to opt for online access for the Payee. Online Access is a feature that allows Payees to view or download the form copies online.	100	Alphabets and Numbers Allowed special characters are . - _ + and @
Payee phone number	Enter the Payee's phone number	15	Numbers Allowed special characters are + - ( ) and spaces.
Filer is a payment settlement entity (PSE)	Mention Yes if the Filer is a Payment Settlement Entity (PSE)	5	Allowed values are Yes/No or 1/0 or True/False or X=Yes (Checked) Y=No (Unchecked)  <b>Note:</b> If you leave this field blank, it will be automatically assigned as 'No' for the recipient.
Filer is an electronic payment facilitator (EPF)/Other third party	Mention Yes if the Filer is an Electronic Payment Facilitator (EPF)/Other third party	5	Allowed values are Yes/No or 1/0 or True/False or X=Yes (Checked) Y=No (Unchecked)  <b>Note:</b> If you leave this field blank, it will be automatically assigned as 'No' for the recipient.
Transactions reported are payment card	Mention Yes if the transactions reported are made using Payment card	5	Allowed values are Yes/No or 1/0 or True/False or X=Yes (Checked) Y=No (Unchecked)  <b>Note:</b> If you leave this field blank, it will be

			automatically assigned as 'No' for the recipient.
Transactions reported are third party network	Mention Yes if the transactions reported are made using Third Party Network	5	Allowed values are Yes/No or 1/0 or True/False or X=Yes (Checked) Y=No (Unchecked)  <b>Note:</b> If you leave this field blank, it will be automatically assigned as 'No' for the recipient.
PSE's name	Full legal name of the entity making a payment.	35	Alphabets and Numbers Allowed special characters are & ( ) - ' , .space
PSE's phone number	Enter the entity's phone number	15	Numbers Allowed special characters are + - ( ) and spaces
Account number	Account number is a unique identifier used to distinguish same type of return filed for the Payee for the same tax year.	20	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Second TIN not.	Enter Yes if the IRS sent you a notice twice in the last three calendar years stating that the payee used an incorrect TIN.	5	Allowed values are Yes/No or 1/0 or True/False or X=Yes (Checked) Y=No (Unchecked)  <b>Note:</b> If you leave this field blank, it will be automatically assigned as 'No' for the recipient.
Box 1a Gross amount of payment card/third party network transactions*	Enter the gross amount of total reportable payment card or third-party network	13	Numbers including decimals  <b>Note:</b> Do not enter amounts with

	transactions for the calendar year.		positive/negative signs
Box 1b Card not Present transactions	Enter the gross amount of payment card or third-party network transactions for the year where the card was not present or manually entered.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 2 Merchant category code	Enter the four-digit merchant category code (MCC) used by the payment card industry to classify the payee for the payment card transactions reported on this form.	39	Alphabets and Numbers Allowed special characters are # / & ( ) - ' , . space
Box 3 Number of payment transactions*	Enter the total number of payment transactions processed through the payment card or third-party payer network.	4	Numbers
Box 4 Federal income tax withheld	Enter any federal income tax withheld.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5a January	Enter the total gross amount of payment card or third-party network transactions made to you in January.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs

Box 5b February	Enter the total gross amount of payment card or third-party network transactions made to you in February.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5c March	Enter the total gross amount of payment card or third-party network transactions made to you in March.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5d April	Enter the total gross amount of payment card or third-party network transactions made to you in April.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5e May	Enter the total gross amount of payment card or third-party network transactions made to you in May.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5f June	Enter the total gross amount of payment card or third-party network transactions made to you in June.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5g July	Enter the total gross amount of payment card or third-party network transactions made to you in July.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5h August	Enter the total gross amount of payment card or third-party	13	Numbers including decimals

	network transactions made to you in August.		<b>Note:</b> Do not enter amounts with positive/negative signs
Box 5i September	Enter the total gross amount of payment card or third-party network transactions made to you in September.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5j October	Enter the total gross amount of payment card or third-party network transactions made to you in October.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5k November	Enter the total gross amount of payment card or third-party network transactions made to you in November.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 5l December	Enter the total gross amount of payment card or third-party network transactions made to you in December.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs
Box 6a State	Enter the U.S. State Name or State Code.	27	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Box 7a Filer state identification no	This refers to the state identification number of the Filer.	20	Alphabets and Numbers Allowed special characters are / - space
Box 8a State income tax withheld	This refers to the total amount of state income tax withheld from the payments	13	Numbers including decimals <b>Note:</b> Do not enter

	made to the Payee during the tax year.		amounts with positive/negative signs
Box 6b Second State	Enter the U.S. State Name or State Code.	27	Alphabets and Numbers All special characters allowed except < > ; { } [ ] _ \ ! : ? =
Box 7b Second filer state identification no	This refers to the state identification number of the Filer.	20	Alphabets and Numbers Allowed special characters are / - space
Box 8b Second State income tax withheld	This refers to the total amount of state income tax withheld from the payments made to the Payee during the tax year.	13	Numbers including decimals <b>Note:</b> Do not enter amounts with positive/negative signs

**Below are the accepted state ID Number Formats**

State	State ID Number Format 1	State ID Number Format 2	State ID Number Format 3	State ID Number Format 4	State ID Number Format 5
Alabama (AL)	123456	R007999999	-	-	-
Arizona (AZ)	99-9999999	999999999	23-123456	-	-
Arkansas (AR)	999999999-ZZ Z	999999999	-	-	-
California (CA)	999-9999-9	999999999	Z99999999	999999999999 9	999999999 9
Colorado (CO)	999999999	99-999999	99-999999-999	999999999999	-
Connecticut (CT)	999999999-99 9	9999999999-9 99	99999999999-9 99	99-99999999	-
Delaware (DE)	9-999999999 -999	-	-	-	-

District of Columbia (DC)	99999999999 9	-	-	-	-
Georgia (GA)	9999999-AA	-	-	-	-
Hawaii (HI)	99999999-99	W99999999- 99	GE-999-999-9 9999-99	GE-999-999- 9999-99	-
Idaho (ID)	9999999999	-	-	-	-
Illinois (IL)	99-99999999	99-99999999 999	-	-	-
Indiana (IN)	99999999999 999	99999999999 999 9	-	-	-
Iowa (IA)	99-999999999 99	99-99999999- 999	-	-	-
Kansas (KS)	0369999999999 9F99	036-Z9999999 99Z99	999-Z99999999 9Z99	-	-
Kentucky (KY)	9999999	-	-	-	-
Louisiana (LA)	99999999-999	99999999999	-	-	-
Maine (ME)	99-99999999A A	99-999999999 9	-	-	-
Maryland (MD)	999999999	-	-	-	-
Massachusetts (MA)	99-99999999	999-999-999	999999999	WTH-9999999 99-999	-
Michigan (MI)	ZZ-99999999	99-99999999	-	-	-
Minnesota (MN)	1234567	-	-	-	-
Mississippi (MS)	99-99999999	9999-9999	99-99999999-9	99-99999999 9	-
Missouri (MO)	999999998	-	-	-	-
Montana (MT)	99999999-999 -WTH	-	-	-	-
Nebraska (NE)	99999999	999999999	9999999999	21-999999999 9	-
New Jersey (NJ)	9999999999/9 99	999-999-999/ 999	-	-	-
New Mexico (NM)	99-9999999-9 9-9	99-9999999-9 99	-	-	-
New York (NY)	9999999999	999999999-9	-	-	-

North Carolina (NC)	999999999	-	-	-	-
North Dakota (ND)	12345678901	-	-	-	-
Ohio (OH)	99-999999	99 999999	59 999999	-	-
Oklahoma (OK)	99-9999999	WTH-999999 99-99	999999999	-	-
Oregon (OR)	9999999-9	-	-	-	-
Pennsylvania (PA)	9999 9999	99999999	-	-	-
Rhode Island (RI)	99-9999999	999999999	99999999999	-	-
South Carolina (SC)	999999999	99999999-9	-	-	-
Utah (UT)	12345678901 WTH	99999999-99 9-WTH	-	-	-
Vermont (VT)	43099999999 9F99	WHT1234567 8	-	-	-
Virginia (VA)	30V99999999 F999	99-Z9999999 9F-999	99999999999	-	-
West Virginia (WV)	99999999	-	-	-	-
Wisconsin (WI)	36999999999 999	036-9999999 999-99	-	-	-