

| Form 1095-B XML Schema Elements <i>Form1095BUpstreamDetailType</i> | Form Line Number | eFile Type | eFile Type Definition | minOccurs | maxOccurs | Element Required or Optional | Description |
|---|------------------|------------------------------|---|-----------|-----------|------------------------------|---|
| <i>RecordId</i> | N/A | RecordIdType | nonNegativeInteger minInclusive value="1" | 1 | 1 | Required | A sequential number (non-negative integer) that uniquely identifies each record within a submission - every Form 1095-B requires a <i>RecordId</i> . <i>RecordId</i> should start at 1 and increment by 1 sequentially for each Form 1095-B in the submission. |
| <i>TestScenarioId</i> | N/A | TestScenarioIdType | string pattern (([1-9] [1-9][0-9])C(0,1)-([0-9] [1-9][0-9])) | 0 | 1 | Optional | The <i>TestScenarioId</i> is only applicable to transmissions submitted to AATS and identifies which test scenario the Form 1095-B represents. |
| <i>CorrectedInd</i> | N/A | DigitBooleanType | string enumerations allowed: "0" or "1" | 1 | 1 | Required | <i>CorrectedInd</i> is a boolean indicating if the record is an original (0) or a correction (1) to a record that the IRS has already received, processed, and accepted. |
| <i>CorrectedRecordInfoGrp</i> | N/A | CorrectedRecordInfoGrpType | complexType | 0 | 1 | Optional | <i>CorrectedRecordInfoGrp</i> contains information to identify the submission being corrected. |
| <i>CorrectedUniqueRecordId</i> | N/A | UniqueRecordIDType | token pattern .(1,80)\ [1-9][1][0-9][0,15]\ [1-9][1][0-9][0,15] | 1 | 1 | Required | <i>CorrectedRecordUniqueId</i> is the unique identifier of the record being corrected. |
| <i>CorrectedRecordPayeeName</i> | N/A | OtherCompletePersonNameType | complexType | 0 | 1 | Optional | The <i>CorrectedRecordPayeeName</i> is a complex element. It is not required. However, if it is included in the XML, the simple elements must follow the schema definition. This is a persons name that the IRS can contact if there are questions about the submission. |
| <i>PersonFirstNm</i> | N/A | PersonFirstNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 1 | 1 | Required | The <i>PersonFirstNm</i> is required if <i>CorrectedRecordPayeeName</i> is included in the XML. It is the first name of the person reported on the record being corrected. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonMiddleNm</i> | N/A | PersonMiddleNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 0 | 1 | Optional | The <i>PersonMiddleNm</i> is not required. It is the middle name of the person reported on the record being corrected. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonLastNm</i> | N/A | PersonLastNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 1 | 1 | Required | The <i>PersonLastNm</i> is required if <i>CorrectedRecordPayeeName</i> is included in the XML. It is the last name of the person on the record being corrected. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>SuffixNm</i> | N/A | SuffixNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 0 | 1 | Optional | The <i>SuffixNm</i> is not required. It is the suffix name of the person reported on the record being corrected. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>CorrectedRecordPayeeTIN</i> | N/A | SSNType | string pattern [0-9][9] | 0 | 1 | Optional | The <i>CorrectedRecordPayee Tin</i> is the SSN of the Payee that was reported on the record being corrected. |
| <i>TaxYr</i> | N/A | YearType | gYear 1000-9999 allowed | 0 | 1 | Optional | IRS <i>TaxYr</i> is the tax year for which the data on the Form 1095-B is being submitted. |
| <i>ResponsibleIndividualGrp</i> | Lines 1 - 9 | ResponsibleIndividualGrpType | complexType | 0 | 1 | Optional | The complex element <i>ResponsibleIndividualGrp</i> contains the information for Form 1095-B Part I. |
| <i>ResponsibleIndividualName</i> | Line 1 | OtherCompletePersonNameType | complexType | 0 | 1 | Optional | The complex element <i>ResponsibleIndividualName</i> contains the information to be reported on Line 1 of Form 1095-B. |
| <i>PersonFirstNm</i> | Line 1 | PersonFirstNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 1 | 1 | Required | The <i>PersonFirstNm</i> is required if <i>ResponsibleIndividualName</i> is included in the XML. It is the first name of the responsible individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonMiddleNm</i> | Line 1 | PersonMiddleNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 0 | 1 | Optional | The <i>PersonMiddleNm</i> is not required. It is the middle name of the responsible individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonLastNm</i> | Line 1 | PersonLastNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 1 | 1 | Required | The <i>PersonLastNm</i> is required if <i>ResponsibleIndividualName</i> is included in the XML. It is the last name of the responsible individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>SuffixNm</i> | Line 1 | SuffixNameType | string pattern ([A-Za-z\]?)*[A-Za-z\] | 0 | 1 | Optional | The <i>SuffixNm</i> is not required. It is the suffix name of the responsible individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonNameControlTxt</i> | N/A | PersonNameControlType | string maxlength value = "4" pattern [A-Z] [A-Z\] {0,3} | 0 | 1 | Optional | The <i>PersonNameControlTxt</i> is a string that conforms to the pattern described in the XML Schema. Legal Characters: A-Z, hyphen and space. Illegal Character: numbers and symbols. |
| <i>TINRequestTypeCd</i> | N/A | TINRequestTypeCodeType | enumerated string enumerations allowed: INDIVIDUAL_TIN BUSINESS_TIN UNKNOWN | 0 | 1 | Optional | The <i>TINRequestTypeCd</i> is a code used to identify the TIN Request Type of the responsible individual. The code for the responsible individual should be INDIVIDUAL_TIN. |

| | | | | | | | |
|----------------------------------|---------------|-------------------------------|---|---|---|----------|--|
| <i>SSN</i> | Line 2 | SSNType | string pattern [0-9]{9} | 0 | 1 | Optional | The <i>SSN</i> is the 9 digit Social Security Number or Taxpayer Identification Number of the responsible individual. |
| <i>BirthDt</i> | Line 3 | DateType | date pattern [1-9][0-9]{3}\.* | 0 | 1 | Optional | Enter a date of birth for the responsible individual only if SSN on line 2 is blank. |
| <i>MailingAddressGrp</i> | Lines 4 - 7 | BusinessAddressGrpType | complexType | 0 | 1 | Optional | <i>MailingAddressGrp</i> is a choice of <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> . |
| <i>USAddressGrp</i> | Lines 4 - 7 | USAddressGrpType | complexType | 1 | 1 | Required | <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are only required if the XML includes <i>MailingAddressGrp</i> . Note: either <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are required - not both - depending on the address. |
| <i>AddressLine1Txt</i> | Line 4 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9](?[A-Za-z0-9\-\-])* | 1 | 1 | Required | <i>AddressLine1Txt</i> is the first line containing the street address of the responsible individual from Part I of Form 1095-B. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>AddressLine2Txt</i> | Line 4 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9](?[A-Za-z0-9\-\-])* | 0 | 1 | Optional | <i>AddressLine2Txt</i> is an optional second line containing the street address of the responsible individual from Part I of Form 1095-B. |
| <i>CityNm</i> | Line 5 | CityType | string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z] | 1 | 1 | Required | <i>CityNm</i> is the name of the city of the responsible individual from Part I of Form 1095-B. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USStateCd</i> | Line 6 | StateType | enumerated string 2 character code required as specified in the XML schema | 1 | 1 | Required | <i>USStateCd</i> is the abbreviation for the state, US Territory, or Military designation of the responsible individual from Part I of Form 1095-B. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USZIPCd</i> | Line 7 | USZIPCdType | string pattern [0-9]{5} | 1 | 1 | Required | <i>USZIPCd</i> is the 5-digit zip code for the address of the responsible individual from Part I of Form 1095-B. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USZIPExtensionCd</i> | Line 7 | USZIPExtensionCdType | string pattern [0-9]{4} | 0 | 1 | Optional | <i>USZIPExtensionCd</i> is the 4-digit extension zip code for the address of the responsible individual from Part I of Form 1095-B. |
| <i>ForeignAddressGrp</i> | Lines 4 - 7 | ForeignAddressGrpType | complexType | 1 | 1 | Required | <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are only required if the XML includes <i>MailingAddressGrp</i> . Note: either <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are required - not both - depending on the address. |
| <i>AddressLine1Txt</i> | Line 4 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9](?[A-Za-z0-9\-\-])* | 1 | 1 | Required | <i>AddressLine1Txt</i> is the first line containing the street address of the responsible individual from Part I of Form 1095-B. This simple element is required if the XML includes <i>ForeignAddressGrp</i> . |
| <i>AddressLine2Txt</i> | Line 4 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9](?[A-Za-z0-9\-\-])* | 0 | 1 | Optional | <i>AddressLine2Txt</i> is an optional second line containing the street address of the responsible individual from Part I of Form 1095-B. |
| <i>CityNm</i> | Line 5 | CityType | string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z] | 0 | 1 | Optional | <i>CityNm</i> is the name of the city of the responsible individual from Part I of Form 1095-B. |
| <i>CountryCd</i> | Line 7 | CountryType | enumerated string 2 character code required as specified in the XML schema | 1 | 1 | Required | <i>CountryCd</i> is the Foreign Country Code of the responsible individual. This simple element or <i>CountryNm</i> is required if the XML includes <i>ForeignAddressGrp</i> . |
| <i>CountryNm</i> | Line 7 | CountryNameType | string pattern [A-Za-z](?[A-Za-z])* | 1 | 1 | Required | <i>CountryNm</i> is the Foreign Country Name of the responsible individual. This simple element or <i>CountryCd</i> is required if the XML includes <i>ForeignAddressGrp</i> . Legal characters: A-Z, a-z, and single space. |
| <i>ForeignProvinceNm</i> | Line 6 | ForeignProvinceNameType | string pattern [A-Za-z0-9](?[A-Za-z0-9\-\- /'])* | 0 | 1 | Optional | <i>ForeignProvinceNm</i> is the name of the Province of the responsible individual from Part I of Form 1095-B. Valid characters are alphas (a-z), numeric (0-9), period (.), slash (/), hyphen (-), apostrophe ('), and "blank". |
| <i>ForeignPostalCd</i> | Line 7 | ForeignPostalCodeType | string pattern [A-Za-z0-9](?[A-Za-z0-9\-\- /])* | 0 | 1 | Optional | <i>ForeignPostalCd</i> is the name of the foreign postal code of the responsible individual from Part I of Form 1095-B. Valid characters are alphas (a-z), numeric (0-9), period (.), slash (/), hyphen (-) and blank. |
| <i>PolicyOriginCd</i> | Line 8 | PolicyOriginCodeType | string maxLength="1" Letter Series: "A", "B", "C", "D", "E", "F" | 0 | 1 | Optional | The <i>PolicyOriginCd</i> is the letter identifying the origin of the policy and can be A through F according to the filing instructions. |
| <i>SHOPIdentificationNum</i> | Line 9 | ExchangeIdType | Leave this line blank for 2015 | 0 | 1 | Optional | For 2015, leave this line blank - this is an optional element and should not be included in the XML for TY 2015. The schema and form include the element for future use. |
| <i>SponsoringEmployerInfoGrp</i> | Lines 10 - 15 | SponsoringEmployerInfoGrpType | complexType | 0 | 1 | Optional | The complex element <i>SponsoringEmployerInfoGrp</i> contains the information for Form 1095-B Part II. |
| <i>BusinessName</i> | N/A | BusinessNameType | complexType | 0 | 1 | Optional | The <i>BusinessName</i> is a complex element. It is not required. However, if it is included in the XML, the simple elements must follow the schema definition. |
| <i>BusinessNameLine1Txt</i> | Line 10 | BusinessNameLine1Type | string maxLength="75" pattern ([A-Za-z0-9\-\- \'])*[A-Za-z0-9\-\- \'] | 1 | 1 | Required | The <i>BusinessNameLine1Txt</i> is required if <i>BusinessName</i> is included in the XML. This is the business name for the employer sponsoring the coverage. Legal Characters: A-Z, a-z, 0-9, hyphen, parentheses, ampersand, apostrophe and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |

| | | | | | | | |
|-------------------------------|---------------|-------------------------|---|---|---|----------|--|
| <i>BusinessNameLine2Txt</i> | Line 10 | BusinessNameLine2Type | string maxLength="75" pattern ([A-Za-z0-9\-\'] ?)*[A-Za-z0-9\-\'] | 0 | 1 | Optional | The <i>BusinessNameLine2Txt</i> is optional if <i>BusinessName</i> is included in the XML. This is a continuation of the business name for the employer sponsoring the coverage. Legal Characters: A-Z, a-z, 0-9, slash, percent, hyphen, parentheses, ampersand, apostrophe and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>BusinessNameControlTxt</i> | N/A | BusinessNameControlType | string pattern ([A-Z0-9_] '){1,4} | 0 | 1 | Optional | The <i>BusinessNameControlTxt</i> is a string that conforms to the pattern described in the XML Schema. Legal Characters: A-Z, 0-9, hyphen and ampersand. Illegal Character: spaces |
| <i>EIN</i> | Line 11 | EINType | string pattern [0-9]{9} | 0 | 1 | Optional | The <i>EIN</i> is the Employer identification Number for the employer sponsoring the coverage. |
| <i>TINRequestTypeCd</i> | N/A | TINRequestTypeCodeType | enumerated string enumerations allowed: INDIVIDUAL_TIN BUSINESS_TIN UNKNOWN | 0 | 1 | Optional | The <i>TINRequestTypeCd</i> is a string that conforms to the pattern described in the XML Schema. The enumeration for the employer sponsoring the coverage should be BUSINESS_TIN. |
| <i>MailingAddressGrp</i> | Lines 12 - 15 | BusinessAddressGrpType | complexType | 0 | 1 | Optional | <i>MailingAddressGrp</i> is a choice of <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> . |
| <i>USAddressGrp</i> | Lines 12 - 15 | USAddressGrpType | complexType | 1 | 1 | Required | The <i>USAddressGrp</i> is a complex element. <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are only required if the XML includes <i>MailingAddressGrp</i> . Note: either <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are required - not both - depending on the address. |
| <i>AddressLine1Txt</i> | Line 12 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9]{ ?}[A-Za-z0-9\-\-]}* | 1 | 1 | Required | <i>AddressLine1Txt</i> is the first line containing the street address of the employer sponsoring the coverage. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>AddressLine2Txt</i> | Line 12 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9]{ ?}[A-Za-z0-9\-\-]}* | 0 | 1 | Optional | <i>AddressLine2Txt</i> is an optional second line containing the street address of the employer sponsoring the coverage. |
| <i>CityNm</i> | Line 13 | CityType | string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z] | 1 | 1 | Required | <i>CityNm</i> is the name of the city of the employer sponsoring the coverage. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USStateCd</i> | Line 14 | StateType | enumerated string 2 character code required as specified in the XML schema | 1 | 1 | Required | <i>USStateCd</i> is the abbreviation for the state, US Territory, or Military designation of the employer sponsoring the coverage. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USZIPCd</i> | Line 15 | USZIPCdType | string pattern [0-9]{5} | 1 | 1 | Required | <i>USZIPCd</i> is the 5-digit zip code for the address of the employer sponsoring the coverage. This simple element is required if the XML includes <i>MailingAddressGrp</i> . |
| <i>USZIPExtensionCd</i> | Line 15 | USZIPExtensionCdType | string pattern [0-9]{4} | 0 | 1 | Optional | <i>USZIPExtensionCd</i> is the 4-digit extension zip code for the address of the employer sponsoring the coverage. |
| <i>ForeignAddressGrp</i> | Lines 12 - 15 | ForeignAddressGrpType | complexType | 1 | 1 | Required | The <i>ForeignAddressGrp</i> is a complex element. <i>ForeignAddressGrp</i> or <i>USAddressGrp</i> are only required if the XML includes <i>MailingAddressGrp</i> . Note: either <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are required - not both - depending on the address. |
| <i>AddressLine1Txt</i> | Line 12 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9]{ ?}[A-Za-z0-9\-\-]}* | 1 | 1 | Required | <i>AddressLine1Txt</i> is the first line containing the street address of the employer sponsoring the coverage. This simple element is required if the XML includes <i>ForeignAddressGrp</i> . |
| <i>AddressLine2Txt</i> | Line 12 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9]{ ?}[A-Za-z0-9\-\-]}* | 0 | 1 | Optional | <i>AddressLine2Txt</i> is an optional second line containing the street address of the employer sponsoring the coverage. |
| <i>CityNm</i> | Line 13 | CityType | string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z] | 0 | 1 | Optional | <i>CityNm</i> is the name of the city of the employer sponsoring the coverage. |
| <i>CountryCd</i> | Line 15 | CountryType | enumerated string 2 character code required as specified in the XML schema | 1 | 1 | Required | <i>CountryCd</i> is the Foreign Country Code of the employer sponsoring the coverage. Either <i>CountryCd</i> or <i>CountryNm</i> are required if the XML includes <i>ForeignAddressGrp</i> . |
| <i>CountryNm</i> | Line 15 | CountryNameType | string pattern [A-Za-z]{ ?}[A-Za-z] | 1 | 1 | Required | <i>CountryNm</i> is the Foreign Country Name of the address of the employer sponsoring the coverage. Either <i>CountryNm</i> or <i>CountryCd</i> are required if the XML includes <i>ForeignAddressGrp</i> . Legal characters: A-Z, a-z, and single space |
| <i>ForeignProvinceNm</i> | Line 14 | ForeignProvinceNameType | string pattern [A-Za-z0-9]{ ?}[A-Za-z0-9\-\- /']}* | 0 | 1 | Optional | <i>ForeignProvinceNm</i> is the name of the Province of the address of the employer sponsoring the coverage. Valid characters are alphas (a-z), numeric (0-9), period (.), slash (/), hyphen (-), apostrophe ('), and "blank". |
| <i>ForeignPostalCd</i> | Line 15 | ForeignPostalCodeType | string pattern [A-Za-z0-9]{ ?}[A-Za-z0-9\-\- /]}* | 0 | 1 | Optional | <i>ForeignPostalCd</i> is the name of the foreign postal code of the address of the employer sponsoring the coverage. Valid characters are alphas (a-z), numeric (0-9), period (.), slash (/), hyphen (-) and blank. |
| <i>IssuerInfoGrp</i> | Lines 16 - 22 | IssuerInfoGrpType | complexType | 0 | 1 | Optional | The complex element <i>IssuerInfoGrp</i> contains the information for Form 1095-B Part III. |
| <i>BusinessName</i> | N/A | BusinessNameType | complexType | 0 | 1 | Optional | The <i>BusinessName</i> is a complex element. It is not required. However, if it is included in the XML, the simple elements must follow the schema definition. |

| | | | | | | | |
|-------------------------------|---------------|-------------------------|---|---|---|----------|--|
| <i>BusinessNameLine1Txt</i> | Line 16 | BusinessNameLine1Type | string maxLength="75" pattern ([A-Za-z0-9\-\(\)\'] ?)*[A-Za-z0-9\-\(\)\'] | 1 | 1 | Required | The <i>BusinessNameLine1Txt</i> is required if <i>BusinessName</i> is included in the XML. This is the business name for the provider of the coverage. Legal Characters: A-Z, a-z, 0-9, hyphen, parentheses, ampersand, apostrophe and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>BusinessNameLine2Txt</i> | Line 16 | BusinessNameLine2Type | string maxLength="75" pattern ([A-Za-z0-9\-\(\)\'] ?)*[A-Za-z0-9\-\(\)\'] | 0 | 1 | Optional | The <i>BusinessNameLine2Txt</i> is optional if <i>BusinessName</i> is included in the XML. This is a continuation of the business name for the provider of the coverage. Legal Characters: A-Z, a-z, 0-9, slash, percent, hyphen, parentheses, ampersand, apostrophe and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>BusinessNameControlTxt</i> | N/A | BusinessNameControlType | string pattern ([A-Z0-9_]-){1,4} | 0 | 1 | Optional | The <i>BusinessNameControlTxt</i> is a string that conforms to the pattern described in the XML Schema. Legal Characters: A-Z, 0-9, hyphen and ampersand. Illegal Character: spaces |
| <i>TINRequestTypeCd</i> | N/A | TINRequestTypeCodeType | enumerated string enumerations allowed: INDIVIDUAL_TIN BUSINESS_TIN UNKNOWN | 0 | 1 | Optional | The <i>TINRequestTypeCd</i> is a string that conforms to the pattern described in the XML Schema. The enumeration for the employer sponsoring the coverage should be BUSINESS_TIN. |
| <i>EIN</i> | Line 17 | EINType | string pattern [0-9]{9} | 0 | 1 | Optional | The <i>EIN</i> is the Employer Identification Number for the employer sponsoring the coverage. |
| <i>ContactPhoneNum</i> | Line 18 | ContactPhoneNumberType | string minLength="10" maxLength="15" pattern ([0-9])* | 0 | 1 | Optional | The <i>ContactPhoneNum</i> is the phone number of a person associated with the provider of the coverage that the IRS can contact if there are questions about the submission. |
| <i>MailingAddressGrp</i> | Lines 19 - 22 | BusinessAddressGrpType | complexType | 0 | 1 | Optional | <i>MailingAddressGrp</i> is a choice of <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> . |
| <i>USAddressGrp</i> | Lines 19 - 22 | USAddressGrpType | complexType | 1 | 1 | Required | <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are only required if the XML includes <i>MailingAddressGrp</i> . Note: either <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are required - not both - depending on the address. |
| <i>AddressLine1Txt</i> | Line 19 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9\(\)]* | 1 | 1 | Required | <i>AddressLine1Txt</i> is the first line containing the street address of the provider of the coverage. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>AddressLine2Txt</i> | Line 19 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9\(\)]* | 0 | 1 | Optional | <i>AddressLine2Txt</i> is an optional second line containing the street address of the provider of the coverage. |
| <i>CityNm</i> | Line 20 | CityType | string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z] | 1 | 1 | Required | <i>CityNm</i> is the name of the city of the provider of the coverage. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USStateCd</i> | Line 21 | StateType | enumerated string 2 character code required as specified in the XML schema | 1 | 1 | Required | <i>USStateCd</i> is the abbreviation for the state, US Territory, or Military designation of the provider of the coverage. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USZIPCd</i> | Line 22 | USZIPCdType | string pattern [0-9]{5} | 1 | 1 | Required | <i>USZIPCd</i> is the 5-digit zip code for the address of the provider of the coverage. This simple element is required if the XML includes <i>USAddressGrp</i> . |
| <i>USZIPExtensionCd</i> | Line 22 | USZIPExtensionCdType | string pattern [0-9]{4} | 0 | 1 | Optional | <i>USZIPExtensionCd</i> is the 4-digit extension zip code for the address of the provider of the coverage. |
| <i>ForeignAddressGrp</i> | Lines 19 - 22 | ForeignAddressGrpType | complexType | 1 | 1 | Required | <i>ForeignAddressGrp</i> or <i>USAddressGrp</i> are only required if the XML includes <i>MailingAddressGrp</i> . Note: either <i>USAddressGrp</i> or <i>ForeignAddressGrp</i> are required - not both - depending on the address. |
| <i>AddressLine1Txt</i> | Line 19 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9\(\)]* | 1 | 1 | Required | <i>AddressLine1Txt</i> is the first line containing the street address of the provider of the coverage. This simple element is required if the XML includes <i>ForeignAddressGrp</i> . |
| <i>AddressLine2Txt</i> | Line 19 | StreetAddressType | string maxLength="35" pattern [A-Za-z0-9\(\)]* | 0 | 1 | Optional | <i>AddressLine2Txt</i> is an optional second line containing the street address of the provider of the coverage. |
| <i>CityNm</i> | Line 20 | CityType | string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z] | 0 | 1 | Optional | <i>CityNm</i> is the name of the foreign city of the provider of the coverage. |
| <i>CountryCd</i> | Line 22 | CountryType | enumerated string 2 character code required as specified in the XML schema | 1 | 1 | Required | <i>CountryCd</i> is the Foreign Country Code of the provider of the coverage Either <i>CountryCd</i> or <i>CountryNm</i> are required if the XML includes <i>ForeignAddressGrp</i> . |
| <i>CountryNm</i> | Line 22 | CountryNameType | string pattern [A-Za-z](?)[A-Za-z] | 1 | 1 | Required | <i>CountryNm</i> is the Foreign Country Name of the address of the provider of the coverage. Either <i>CountryNm</i> or <i>CountryCd</i> are required if the XML includes <i>ForeignAddressGrp</i> . Legal characters: A-Z, a-z, and single space |
| <i>ForeignProvinceNm</i> | Line 21 | ForeignProvinceNameType | string pattern [A-Za-z0-9\(\)]*/')* | 0 | 1 | Optional | <i>ForeignProvinceNm</i> is the name of the Province of the address of the provider of the coverage. Valid characters are alphas (a-z), numeric (0-9), period (.), slash (/), hyphen (-), apostrophe ('), and "blank". |
| <i>ForeignPostalCd</i> | Line 22 | ForeignPostalCodeType | string pattern [A-Za-z0-9\(\)]* | 0 | 1 | Optional | <i>ForeignPostalCd</i> is the name of the foreign postal code of the address of the provider of the coverage. Valid characters are alphas (a-z), numeric (0-9), period (.), slash (/), hyphen (-) and blank. |

| | | | | | | | |
|---------------------------------------|---------------|-------------------------------|---|---|----|----------|---|
| <i>CoveredIndividualGrp</i> | Lines 23 - 28 | EmployerCoveredIndividualType | complexType | 0 | 99 | Optional | The complex element <i>CoveredIndividualGrp</i> contains the information for Form 1095-B Part IV. |
| <i>CoveredIndividualName</i> | Line 23-28(a) | OtherCompletePersonNameType | complexType | 0 | 1 | Optional | <i>CoveredIndividualName</i> is a complex element. It is not required. However, if it is included in the XML, the simple elements must follow the schema definition. |
| <i>PersonFirstNm</i> | Line 23-28(a) | PersonFirstNameType | string pattern ([A-Za-z\-\-] ?)*[A-Za-z\-\-] | 1 | 1 | Required | The <i>PersonFirstNm</i> is required if <i>CoveredIndividualName</i> is included in the XML. It is the first name of the covered individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonMiddleNm</i> | Line 23-28(a) | PersonMiddleNameType | string pattern ([A-Za-z\-\-] ?)*[A-Za-z\-\-] | 0 | 1 | Optional | The <i>PersonMiddleNm</i> is not required. It is the middle name of the covered individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonLastNm</i> | Line 23-28(a) | PersonLastNameType | string pattern ([A-Za-z\-\-] ?)*[A-Za-z\-\-] | 1 | 1 | Required | The <i>PersonLastNm</i> is required if <i>CoveredIndividualName</i> is included in the XML. It is the last name of the covered individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>SuffixNm</i> | Line 23-28(a) | SuffixNameType | string pattern ([A-Za-z\-\-] ?)*[A-Za-z\-\-] | 0 | 1 | Optional | The <i>SuffixNm</i> is not required. It is the suffix name of the covered individual. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols. |
| <i>PersonNameControlTxt</i> | N/A | PersonNameControlType | string maxlength value = "4" pattern [A-Z] [A-Z\-\-] {0,3} | 0 | 1 | Optional | The <i>PersonNameControlTxt</i> is a string that conforms to the pattern described in the XML Schema. Legal Characters: A-Z, hyphen and space. Illegal Character: numbers and symbols. |
| <i>TINRequestTypeCd</i> | N/A | TINRequestTypeCodeType | enumerated string enumerations allowed: INDIVIDUAL_TIN BUSINESS_TIN UNKNOWN | 0 | 1 | Optional | The <i>TINRequestTypeCd</i> is a string that conforms to the pattern described in the XML Schema. The enumeration for the <i>CoveredIndividualName</i> should be INDIVIDUAL_TIN. |
| <i>SSN</i> | Line 23-28(b) | SSNType | string pattern [0-9]{9} | 0 | 1 | Optional | The <i>SSN</i> is the 9 digit Social Security Number or Taxpayer Identification Number of each covered individual. |
| <i>BirthDt</i> | Line 23-28(c) | DateType | date pattern [1-9][0-9]{3}\-\-.* | 0 | 1 | Optional | Enter a date of birth for the covered individual only if SSN on Line 2 is blank. |
| <i>CoveredIndividualAnnualInd</i> | Line 23-28(d) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | Check this box if the individual was covered for at least one day per month for all 12 months of the calendar year. |
| <i>CoveredIndividualMonthlyIndGrp</i> | N/A | MonthIndGrpType | complexType | 0 | 1 | Optional | <i>CoveredIndividualMonthlyInd</i> is a complex element. It shows each month the individual was covered for at least one day in each month listed. |
| <i>JanuaryInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>FebruaryInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>MarchInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>AprilInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>MayInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>JuneInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>JulyInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>AugustInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>SeptemberInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>OctoberInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>NovemberInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>DecemberInd</i> | Line 23-28(e) | DigitBooleanType | string enumeration value= 0 or 1 | 0 | 1 | Optional | If the individual was not covered for all months, include this element with the enumeration "0" for false and "1" for true. |
| <i>recordType</i> | N/A | string | string | 1 | 1 | Required | The underlying COTS product requires the <i>recordType</i> and <i>lineNum</i> attributes for every record in the file. These attributes are constants: |
| <i>lineNum</i> | N/A | integer | integer | 1 | 1 | Required | <i>recordType</i> ="" <i>lineNum</i> ="0" |

Depending on the developmental tool used there may be a compatibility issue and the displayed results may differ with the filing patterns shown.