## **Electronic File Format for Form BA-3**

Form BA-3 Record Format			
Field Length	Record Position	Data and Instructions	
1	1	"0" (zero).	
4	2-5	Four-digit year being reported.	
1	6	"7"	
4	7-10	Four-digit BA number assigned by the Railroad Retirement Board.	
10	11-20	Entries in this field are optional. The "Payroll ID" reference number shown here will be included on certain correspondence to the employer to assist the employer in locating the employee.	
9	21-29	Employee's social security number.	
20	30-49	First twenty (20) characters of the employee's surname. Spaces in such names as Mc Carthy, St Clair, De La Cross are acceptable.	
15	50-64	First fifteen (15) characters of the employee's first name.	
1	65	Employee's middle initial.	
7	66-72	RUIA I (\$\$\$\$\$¢¢) – Total compensation which is creditable under the RUIA to qualify for benefits. This amount should not exceed the RUIA I monthly maximum times 12.	
2	73-74	Blank Filler.	
7	75-81	RUIA II (\$\$\$\$\$¢¢) – Total compensation which is creditable under the RUIA to determine maximum benefits. This amount should not exceed the RUIA II monthly maximum times 12.	
2	82-83	Blank Filler.	
12	84-95	84-Jan 85-Feb 86-March 87-April 88-May 89-June 90-July 91-Aug 92-Sept 93-Oct 94-Nov 95-Dec  Service Month Detail - The code corresponding to the employment relation for a non-work month.  Code 1 = worked Code 8 = not worked but has employment relation Code 9 = not worked & has no employment relation unknown  NOTE: You cannot mix all four codes. You must either use codes 1, 8, & 9 or codes 1 & 0. All 12 positions must be filled.	
2	96-97	Service Month Total - The sum of the characters in positions 84-95. Enter zeroes if no months are reported.	
8	98-105	Creditable Tier I compensation, up to the annual maximum for the year (\$\$\$\$\$¢¢).	
2	106-107	Blank Filler.	

## **Electronic File Format for Form BA-3**

Form BA-3 Record Format			
Field Length	Record Position	Data and Instructions	
8	108-115	Creditable Tier II compensation, up to the annual maximum for the year (\$\$\$\$\$ $\phi$ ).	
2	116-117	Blank Filler.	
5	118-122	Last daily pay rate (\$). If pay rate exceeds \$200.00, enter 20000.	
2	123-124	Blank Filler.	
8	125-132	Creditable Miscellaneous compensation (\$\$\$\$\$¢¢).	
2	133-134	Blank Filler.	
8	135-142	Creditable Sick Pay compensation (\$\$\$\$\$¢¢).	
3	143-145	Blank Filler.	
30	146-175	Mailing Address Line 1 (Street Number, Post Office Box, etc.).	
30	176-205	Mailing Address Line 2.	
20	206-225	City	
2	226-227	State	
5	228-232	Zip Code	
8	233-240	Effective date of the address information (MMDDCCYY).	
60	241-300	Blank Filler (For future expansion).	

**NOTE**: The file should be saved as a text (\*.txt) file with the record format listed above.