

**RECORD LAYOUT AND DESCRIPTION  
LOTUS 1-2-3 SPREADSHEET**

- Enter all information in UPPER CASE only.
- Do not use column headings.
- Use Row 1 for the 'A' record.
- Use Row 2 for the first 'D' record.
- Use the row immediately after the last 'D' record for the 'T' record.
- Do not leave any rows blank.
- Save file as 'EXCEL Worksheet'.
- All diskettes must contain the 8 character entry NJ1080DR as the file name. The New Jersey Division of Taxation will reject and return unprocessed any diskette not properly identified internally by NJ1080DR. A diskette must not contain any file or data set other than NJ1080DR.

---



---

**"A" RECORD**

| <u>Column</u> | <u>Field Title</u>       | <u>Column Width</u> | <u>Description and Remarks</u>   |
|---------------|--------------------------|---------------------|--|
| A             | Record Type              | 2                   | Required. Enter "A"  |
| B             | Return Year              | 5                   | Required. Enter return year for Form NJ-1080-C. For 2000, enter "2000".  |
| C             | Federal EIN              | 13                  | Required. Enter the entity's Federal EIN as it appears on Form NJ-1080-C. If the Federal EIN as it appears on Form NJ-1080-C is nine digits in length, enter three zeros in the three positions after the ninth digit of the EIN. Do not enter dashes. Left justify the Federal EIN. |
| D             | Filler                   | 2                   | Enter blanks.  |
| E             | Filler                   | 10                  | Enter blanks.  |
| F             | Filler                   | 21                  | Enter blanks.  |
| G             | Filler                   | 16                  | Enter blanks.  |
| H             | Composite Name           | 36                  | Required. Enter the entity's name as it appears on Form NJ-1080-C. Left justify and fill with blanks.  |
| I             | Composite Trade Name     | 36                  | Enter the entity's trade name, if applicable, as it appears of Form NJ-1080-C. Left justify and fill with blanks.  |
| J             | Composite Street Address | 36                  | Required. Enter the entity's street address as it appears on Form NJ-1080-C. Left justify and fill with blanks.  |
| K             | Composite City           | 26                  | Required. Enter the entity's city as it appears on Form NJ-1080-C. Left Justify and fill with blanks.  |

**RECORD LAYOUT AND DESCRIPTION  
LOTUS 1-2-3 SPREADSHEET**

**“A” RECORD (Continued)**

| <u>Column</u> | <u>Field Title</u> | <u>Column Width</u> | <u>Description and Remarks</u>  |
|---------------|--------------------|---------------------|---|
| L             | Composite State    | 3                   | Required. Enter the entity’s state abbreviation as it appears on Form NJ-1080-C. Left justify the state code.   |
| M             | Composite Zip Code | 10                  | Enter the entity’s nine digit zip code if known. If the four digit extension is not known, enter the five digit zip code followed by four zeroes. Do not enter a dash in this field. Left justify the zip code. |
| N             | Filler             | 12                  | Enter blanks.   |
| O             | Filler             | 12                  | Enter blanks.   |
| P             | Filler             | 8                   | Enter blanks.   |
| Q             | X                  | 2                   | Required. Enter “X”   |

**“D” RECORD**

|   |                                       |    |  |
|---|---------------------------------------|----|--|
| A | Record Type                           | 2  | Required. Enter “D”  |
| B | Return Year                           | 5  | Required. Enter return year for Form NJ-1080-C. Must be the same year entered in Record “A”.   |
| C | Composite Federal EIN                 | 13 | Required. Enter the entity’s Federal EIN as it appears on the “A” record.  |
| D | Participant/Non-participant Indicator | 2  | Required. Enter a “1” (one) for a participant with total income less than \$250,000, or “2” (two) for a participant with income greater than or equal to \$250,000, or a “3” (three) for a nonparticipant. |
| E | Social Security Number                | 10 | Enter the participant’s social security number or the social security number/EIN of the nonparticipant. Left justify the social security number. Do not enter dashes.                                      |
| F | Last Name                             | 21 | Required. Enter last name of participant/ nonparticipant. Left justify and fill with blanks. If nonparticipant is not an individual, enter the name of the entity.   |
| G | First Name                            | 16 | Required. Enter first name of participant/ nonparticipant. Left justify and fill with blanks.  |
| H | Filler                                | 36 | Enter blanks.  |
| I | Filler                                | 36 | Enter blanks.  |
| J | Street Address                        | 36 | Enter the participant’s/nonparticipant’s street address. Left justify and fill with blanks.  |
| K | City                                  | 26 | Enter the participant’s/nonparticipant’s city. Left justify and fill with blanks.  |

**RECORD LAYOUT AND DESCRIPTION  
LOTUS 1-2-3 SPREADSHEET**

**“D” RECORD (Continued)**

| <u>Column</u> | <u>Field Title</u> | <u>Column Width</u> | <u>Description and Remarks</u>   |
|---------------|--------------------|---------------------|--|
| L             | State              | 3                   | Enter the participant’s/nonparticipant’s state abbreviation. Left justify the state code.  |
| M             | Zip Code           | 10                  | Enter the participant’s/nonparticipant’s nine digit zip code. If the four digit extension is unknown, enter the five digit zip code followed by four zeros. Left justify the zip code.   |
| N             | Taxable Income     | 12                  | Enter the participant’s taxable income for New Jersey Gross Income Tax purposes. If a nonparticipant (position 18 = “3”) fill with zeros.  |
|               |                    |                     | <b>NOTE: All money amounts must be right justified and contain a maximum of only 11 characters. The right-most two positions represent cents in the money amount fields. Do not enter dollar signs, commas, decimal points or negative amounts. Positive amounts are indicated by placing a “+” (plus) in the left-most position of the money amount. Each money amount field must contain 10 numeric characters. Unused positions must be filled with zeros. (Example: \$2,457.96 is entered as ‘+0000245796’).</b> |
| O             | NJ Income Tax      | 12                  | Enter the participant’s New Jersey Income Tax. If a nonparticipant (position 18 = “3”) fill with zeros. See note above.  |
| P             | Filler             | 8                   | Enter blanks.  |
| Q             | X                  | 2                   | Required. Enter “X”  |

**“T” RECORD**

|   |                       |    |  |
|---|-----------------------|----|--|
| A | Record Type           | 2  | Required. Enter “T”  |
| B | Return Year           | 5  | Required. Enter return year for Form NJ-1080-C. Must be the same year entered in Record “A”. |
| C | Composite Federal EIN | 13 | Required. Enter the entity’s Federal EIN as it appears on the “A” record.                    |
| D | Filler                | 2  | Enter blanks.  |
| E | Filler                | 10 | Enter blanks.  |
| F | Filler                | 21 | Enter blanks.  |
| G | Filler                | 16 | Enter blanks.  |
| H | Filler                | 36 | Enter blanks.  |

**RECORD LAYOUT AND DESCRIPTION  
LOTUS 1-2-3 SPREADSHEET**

---

---

**“T” RECORD (Continued)**

| <u>Column</u> | <u>Field Title</u>  | <u>Column<br/>Width</u> | <u>Description and Remarks</u>  |
|---------------|---|-------------------------|---|
| I             | Filler  | 36                      | Enter blanks.   |
| J             | Filler  | 36                      | Enter blanks.   |
| K             | Filler  | 26                      | Enter blanks.   |
| L             | Filler  | 3                       | Enter blanks.   |
| M             | Filler  | 10                      | Enter blanks.   |
| N             | Filler  | 12                      | Enter blanks.   |
| O             | Filler  | 12                      | Enter blanks.   |
| P             | Number of<br>Participant/Nonparticipant<br>Records Reported | 8                       | Required. Enter the number of “D” records reported for the preceding “A” record. Right justify and zero fill. Enter a total of only 7 characters. |
| Q             | X   | 2                       | Required. Enter “X”.  |