Form 1095-C xml Schema Elements Form1095CUpstreamDetailType	Form Line Number	eFile Type	eFile Type Definition	minOccurs	maxOccurs	Element Required or Optional	Description
Recordid	N/A	RecordidType	string maxLength value="10" pattern value="[1-9][0-9]*"	1	1	Required	A sequential number (non-negative integer) that uniquely identifies each record within a submission - every Form 1095-C requires a <i>Recordid</i> . <i>Recordid</i> should start at 1 and increment by 1 sequentially for each Form 1095-C in the submission.
TestScenariold	N/A	TestScenarioIdType	string pattern ([1-9] [1-9][0-9])C{0,1}-([0-9] [1- arn.an)	0	1	Optional	The TestScenariold is only applicable to transmissions submitted to AATS and identifies which test scenario the Form 1095-C represents.
Correctedind	N/A	DigitBooleanType	string enumerations: "0" or "1"	1	1	Required	CorrectedInd indicates if the record is an original (0) or a correction (1) to a record that the IRS has already received, processed, and accepted.
CorrectedRecordRecipientGrp	N/A	CorrectedRecordRecipientGrpType	complexType	0	1	Optional	CorrectedRecordRecipientGrp contains information to identify the submission being
CorrectedUniqueRecordid	N/A	UniqueRecordIdType	string pattern value="[^\s].{^\s]{1,80}\ [1- 9]{1}[0-9]{0,15}\ [1-9]{1}[0-9]{0,15}"	1	1	Required	Corrected.  Corrected Execution (a state unique identifier of the record being corrected.  Receiptid   Submissionid   Recordid
<ssd:choice> CorrectedRecRecipientPrsnName and CorrectedRecRecipientName8</ssd:choice>	N/A			1	1	Required	If CorrectedRecordRecipientGrp is present, there is a required choice between CorrectedRecRecipientPrsnName and CorrectedRecRecipientName (CorrectedRecRecipientName is on the 1095-B only.)
CorrectedRecRecipientPrsnName	N/A	OtherCompletePersonNameType	complexType	1	1	Required	The CorrectedRecRecipientPrsnName is a complex element. This is the name of the
PersonFirstNim	N/A	PersonFirstNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	1	1	Required	person reported on the record being corrected.  The PersonFirstNm is required if CorrectedRecRecipientPrsnName is included in the xml.  Typically used for a person's first name. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonMiddleNm	N/A	PersonMiddleNameType	string maxLength="20" ([A-Za-2\-] ?)*(A-Za-z\-]	0	1	Optional	The PersonMiddleNim is not required. It is a string containing the middle name of the contact person.  Typically used for a person's Middle name. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonLostNm	N/A	PersonLastNameType	string maxLength="20" ([A-Za-2\-]?)*[A-Za-z\-]	1	1	Required	The PersonLostNm is required if CorrectedRecRecipientPrsnName is included in the xml Typically used for a person's last name. Legal Characters: A-Z, a-z, hyphen and single space. Itegal Character: leading space, trailing space, adjacent spaces, and other symbols.
SuffixNm	N/A	SuffixNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	0	1	Optional	The SuffixNm is not required.  Typically used for a person's Suffix. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
CorrectedRecRecipientName	N/A	BusinessNameType		1	1	Required	The CorrectedRecRecipientName is a complex element. This is the name of the business reported on the record being corrected. This is for Form 1095-B only.
BusinessNameLine1Txt	N/A	BusinessNameLine1Type	string maxLength value="75" pattern ([A-Za-z0-9\-\(\)&'] ?)*[A-Za-z0-9\-\(\)&']	1	1	Required	The BusinessNameLine1Txt is required. This is the business name of the ALE Member. Weight Characters: A-Z, a-z, 0-9, hyphen, parentheses, ampersand, apostrophe and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other numbers.
BusinessNameLine2Txt	N/A	BusinessNameLine2Type	string maxLength value="75" pattern ([A-Za-20-9/%\- \(\)&'] ?)*[A-Za-z0-9\- \(\)&']	0	1	Optional	The BusinessNameLine2Txt is optional. This is the business name of the ALE Member. 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.
CorrectedRecRecipientTIN	N/A	TINType	string pattern [0-9]{9}	0	1	Optional	The CorrectedRecRecipientTIN is the TIN of the Payee that was reported on the record being corrected.
TaxYr	N/A	YearType	string pattern value="[1-9][0-9]{3}"	1	1	Required	IRS TaxYr is required. It is the tax year for which the data on the Form 1095-C is being submitted.
EmployeeInfoGrp	N/A	EmployeeInformationGrpType	complexType	1	1	Required	The EmployeeInfoGrp is required.
OtherComplete PersonName PersonFirstNm	N/A Line 1	OtherCompletePersonNameType PersonFirstNameType	complexType string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	1	1	Required Required	The OtherCompletePersonName is required.  The PersonFirstNm is required. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonMiddleNm	Line 1	PersonMiddleNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	0	1	Optional	The PersonMiddleNim is not required.  Typically used for a person's Middle name. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonLastNm	Line 1	PersonLastNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	1	1	Required	The PersonLastNm is required.  Typically used for a person's last name. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
SuffixNm	Line 1	SuffixNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	0	1	Optional	The SuffixNm is not required.  Typically used for a person's Suffix. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonNameControlTxt	N/A	PersonNameControlType	string maxlength value = "4" [A-Z][A-Z\- ]{0,3}	0	1	Optional	The PersonNameControlTxt is a string that conforms to the pattern described in the xml Schema. Legal Characters: A-Z, hyphen and space. Illegal Characters: numbers and symbols
TINRequextTypeCd	N/A	TINRequestTypeCodeType	string enumerations: INDIVIDUAL_TIN BUSINESS_TIN UNKNOWN	0	1	Optional	The TIMRequestTypeCd is a code used to identify the TIM Request Type of the employee. The code for the Employee should be INDIVIDUAL_TIM.
SSN	Line 2	SSNType	string pattern [0-9]{9}	0	1	Optional	The SSN is the 9 digit Social Security Number or Taxpayer Identification Number of the employee.
MailingAddressGrp	Lines 3-6	BusinessAddressGrpType	complexType	0	1	Optional	MailingAddressGrp is a choice of USAddressGrp or ForeignAddressGrp.
USAddressGrp	N/A	USAddressGrpType	complexType	1	1	Required	USAddressGrp or ForeignAddressGrp simple elements are only required if the xml includes MallingAddressGrp. Note: either USAddressGrp or ForeignAddressGrp simple elements are required - not both - depending on the address.

AddressLine1Txt	Line 3	StreetAddressType	string maxLength="35" pattern [A-Za-z0-9]( ?[A-Za-z0-9\-/])*	1	1	Required	Address.InelThr is the first line containing the street address of the employee. This simple element is required if the swill includes JSAddressGrp. Legal Characters: A-Z, a-z, 0-9, hyphen, slash and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
AddressLine2Txt	Line 3	StreetAddressType	string maxLength="35" pattern [A-Za-z0-9]( ?[A-Za-z0-9\-/])*	0	1	Optional	AddressLine2Txt is an optional second line containing the street address of the employee. Legal Characters: A-Z, a-z, 0-9, hyphen, slash and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
CityNm	Line 4	CityType	string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z]	1	1	Required	CityNm is the name of the city of the employee. This simple element is required if the xml includes USAddressGrp.
USStateCd	Line 5	StateType	string 2 character code required as specified in the enumerations listed within the XML schema	1	1	Required	USStateCd is the abbreviation for the state, US Territory, or Military designation of the employee. This simple element is required if the xml includes USAddressGrp.
USZIPCd	Line 6	USZIPCdType	string	1	1	Required	USZIPCd is the 5-digit zip code for the address of the employee. This simple
USZIPExtensionCd	Line 6	USZIPExtensionCdType	pattern [0-9]{5} string	0	1	Optional	element is required if the xml includes <i>USAddressGrp</i> . <i>USZIPExtensionCd</i> is the 4-digit extension zip code for the address of the employee.
Foreign Address Grp	N/A	ForeignAddressGrpType	pattern [0-9]{4} complexType	1	1	Required	USAddressGrp or ForeignAddressGrp are only required if the xml includes
i or eigni war eadurp	,	To regin du essarpt pe	сыпректурс	•	•	ricquired	MailingAddressGrp . Note: either USAddressGrp or ForeignAddressGrp are required - not both - depending on the address.
AddressLine 17xt	Line 3	StreetAddressType	string maxLength="35" pattern [A-Za-z0-9]( ?[A-Za-z0-9\-/])*	1	1	Required	AddressIneTAr is the first line containing the foreign street address of the employee. This simple element is required if the will includes ForeignAddressGrp. Legal Characters: A-Z, a-z, 0-9, hyphen, slash and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
AddressLine2Txt	Line 3	StreetAddressType	string maxLength="35" pattern [A-Za-z0-9]( ?[A-Za-z0-9\-/])*	0	1	Optional	AddressLine2Txt is an optional second line containing the foreign street address of the employee. Legal Characters: A-2, a-2, 0-9, hyphen, slash and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
CityNm	Line 4	CityType	string maxLength="22" pattern ([A-Za-z] ?)*[A-Za-z]	0	1	Optional	CityNm is the name of the city of the employee.
CountryCd	Line 6	CountryType	string 2 character code required as specified in the enumerations listed within the XML schema	1	1	Required	CountryCd is the Foreign Country Code of the employee. CountryCd or CountryNm is required if the xml includes ForeignAddressGrp.
CountryNm	Line 6	CountryNameType	string maxLength="35" pattern [A-Za-z]( ?[A-Za-z])*	1	1	Required	CountryNm is the Foreign Country Name of the employee. CountryNm or CountryCd is required if the xml includes ForeignAddressGrp . Legal characters: A-Z, a-Z, and Single space
ForeignProvinceNm	Line 5	ForeignProvinceNameType	string maxLength="17" [A-Za-z0-9]( ?[A-Za-z0-9\.\-/'])*	0	1	Optional	ForeignProvinceNm is the name of the Province of the large employer that is filling the Form 1094-C and associated Form(s) 1095-C. Foreign Province Name Type (valid characters are alphas (a-2), numeric (0-9), period (J., slash (J), hyphen (-), apostrophe (T), and "blank".).
ForeignPostalCd	Line 6	ForeignPostalCodeType	string maxLength="16" [A-Za-z0-9](?[A-Za-z0-9\.\-/])*	0	1	Optional	ForeignPostalCd is the postal code of the large employer that is filling the Form 1094-C and associated Form(s) 1095-C. Standard foreign postal code type definition (valid characters are alphas (a-2), numeric (0-9), period (1), slash (/), hyphen (-) and blank).
The ALE Member information will be populated from Form 1094-C.	Lines 7-13	N/A	N/A	N/A	N/A	N/A	N/A
ALEContactPhoneNum	Line 10	ContactPhoneNumberType	string minLength="10" maxLength="30" pattern ([0-9])*	0	1	Optional	ALEContactPhoneNum is the phone number for the Applicable Large Employer Member who can be contacted about the information reported on the form. Omit hyphens and include extensions if applicable.
StartMonthNumberCd	N/A	PlanStartMonthType	string maxLength="2" pattern (0[0-9] 1[0-2])	0	1	Optional	StartMonthNumberCd is the Plan Start Month Number Code ("00" to "12").
EmployeeOfferAndCoverageGrp	Lines 14 - 16	EmployeeOfferAndCoverageGrpType	complexType	1	1	Required	The complex element <code>EmployeeOfferAndCoverageGrp</code> is required and contains the information to specify the type of coverage, if any, offered to an employee, the employee's spouse and the employee's dependents.
<xsd:choice> AnnualOfferOfCoverageCd and MonthlyOfferCoverageGrp</xsd:choice>	N/A			1	1	Required	This is a required choice of AnnualOfferOfCoverageCd or MonthlyOfferCoverageGrp.
AnnualOfferOfCoverageCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	1	1	Required	Enter the Code Series 1 that applies. Enter the applicable code in the "All 12 Months" box only if it was the same for every month of the year. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
Monthly Offer Coverage Grp		OfferCoverageByMonthType	complexType	1	1		Group for entering OfferOfCoverageCd monthly.
JanOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
FebOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
MarOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "11" or "1K". (Code 1I is reserved.)
AprofferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
MayOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1" or "1K". (Code 1I is reserved.)
	Line 14	OfferCoverageType	string	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E",
JunOfferCd			maxLength="2" enumerations 1A-1K or 1a-1k				"1F", "1G", "1H", "1J" or "1K". (Code 11 is reserved.)  Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E",

AugOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
SepOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 11 is reserved.)
OctOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
NovOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
DecOfferCd	Line 14	OfferCoverageType	string maxLength="2" enumerations 1A-1K or 1a-1k	0	1	Optional	Enter the Code Series 1 that applies. Code Series: "1A", "1B", "1C", "1D", "1E", "1F", "1G", "1H", "1J" or "1K". (Code 1I is reserved.)
<ssd:choice> AnnlEmployeeRequiredContriAmt and MonthlyEmployeeRequiredContriGrp</ssd:choice>	N/A			0	1	Optional	There is an optional choice of AnnlEmployeeRequiredContrlAmt and MonthlyEmployeeRequiredContriGrp .
AnnlEmployeeRequiredContriAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	1	1	Required	Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employer is offered coverage but is not required to contribute any amount towards the premium, enter 0.0. Do not leave blank. Values must be entered as dollars and cents. Enter premium amount in "All 12 Months" box only if it was the same for
MonthlyEmployeeRequiredContriGrp	Line 15	AmountByMonthDetailType	complexType	1	1	Required	every month of the year.  Group for entering employee share of premium amount by month.
	Line 15	AmountType	string	0	1	Optional	Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employee
JanuaryAmt			maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"				is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and cents.
FebruaryAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employer is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and cents.
MarchAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employer is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and costs.
AprilAmt .	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employed is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
MayAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Complete only if code 18, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employer is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
JuneAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Cents. Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employer is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
JulyAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Complete only if code 18, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employe is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
AugustAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	cents. Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employe is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
SeptemberAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Cents. Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employe is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
OctoberAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Cents. Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employe is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
NovemberAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employe is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
DecemberAmt	Line 15	AmountType	string maxLength value="19"/> pattern value="([0-9]+\.[0-9][0-9]?)"	0	1	Optional	Complete only if code 1B, 1C, 1D, 1E, 1J or 1K is entered on line 14. If the employe is offered coverage but is not required to contribute any amount towards the premium, enter 0.00. Do not leave blank. Values must be entered as dollars and
xxsd:choice> AnnualSafeHarborCd and MonthlySafeHarborGrp	N/A			0	1	Optional	There is an optional choice of AnnualSafeHarborCd and MonthlySafeHarborGrp.
AnnualSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	1	1	Required	Enter the Code Series 2 that applies. Enter the applicable code in the "All 12 Months" box only if it is the same for all year. Code Series 2: "2A", "2B", "2C", "2D" "2E", "2F", "2G", "2H".
MonthlySafeHarborGrp	Line 16	MonthlySafeHarborCdType	complexType	1	1	Required	Group for entering Code Series 2 by month.
JanSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1	Optional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
FebSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1	Optional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
MarSafeHaborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1	Optional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
AprSofeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1	Optional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
MaySafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1	Optional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".

JunSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1 0	ptional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
JulSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1 0	ptional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
AugSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1 0	ptional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
SepSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1 0	ptional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
OctSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1 0	ptional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
NovSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1 0	ptional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
DecSafeHarborCd	Line 16	SafeHarborCdType	"string" maxLength="2" enumerations added 2A-2H, 2a-2h	0	1 0	ptional	Enter the Code Series 2 that applies. Code Series 2: "2A", "2B", "2C", "2D", "2E", "2F", "2G", or "2H".
CoveredIndividuallind	N/A	DigitBooleanType	string enumerations: "0" or" 1"	0	1 0	ptional	Enter "0" for false or "1" for true to indicate if the employer offers employer- sponsored self-insured health coverage in which the employee or other individual is enrolled.
CoveredindividualGrp	Lines 17-22	EmployerCoveredIndividualType	complexType	0	99 O	ptional	The complex element CoveredIndividualGrp should be present when the CoveredIndividualInd is "1". It allows for up to 99 covered individuals to be submitted on each 1095-C.
CoveredindividualName	N/A	OtherCompletePersonNameType	complexType	1	1 R	equired	CoveredIndividualName is a complex element. It is required when CoveredIndividualGrp is present in the xml.
PersonFirstNm	Lines 17(a)- 22(a)	PersonFirstNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	1	1 R	equired	The PersonFirstMm is required if CoveredIndividualName is included in the xml. Typically used for a person's first name. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonMiddleNm	Lines 17(a)- 22(a)	PersonMiddleNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	0	1 0	ptional	The PersonMiddleNm is not required.  Typically used for a person's Middle name. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonLastNm	Lines 17(a)- 22(a)	PersonLastNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	1	1 R	equired	The PersonLostNim is required if CoveredindividualName is included in the xml. Typically used for a person's last name. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
SuffixAm	Lines 17(a)- 22(a)	SuffixNameType	string maxLength="20" ([A-Za-z\-] ?)*[A-Za-z\-]	0	1 0	ptional	The SuffixNm is not required.  Typically used for a person's Suffix. Legal Characters: A-Z, a-z, hyphen and single space. Illegal Character: leading space, trailing space, adjacent spaces, and other symbols.
PersonNameControlTxt	N/A	PersonNameControlType	string maxlength value = "4" [A-Z][A-Z\- ]{0,3}	0	1 0	ptional	The PersonNameControlTxt is a string that conforms to the pattern described in the xml Schema. Legal Characters: A-Z, hyphen and space. Illegal Characters: numbers and symbols
TINRequestTypeCd	N/A	TINRequestTypeCodeType	string enumerations: INDIVIDUAL_TIN BUSINESS_TIN UNKNOWN	0	1 0	ptional	The TIMRequestTypeCd is a string that conforms to the enumerations described in the XML Schema. The enumeration for the covered individual should be INDIVIDUAL_TIN.
SSN	Lines 17(b)- 22(b)	SSNType	string pattern [0-9]{9}	0	1 0	ptional	Enter the 9-digit SSN for each covered individual. For covered individuals a Taxpayer Identification Number (TIN), rather than an SSN, may be entered if the covered individual does not have an SSN.
BirthDt	Lines 17(c)- 22(c)	DateType	date pattern value [1-9][0-9]{3}\*	0	1 0	ptional	Enter a date of birth for the covered individual only if SSN in column (b) is blank. Format should be: YYYY-MM-DD.
<xsd:choice> CoveredIndividualAnnualInd and CoveredIndividualMonthlyIndGrp</xsd:choice>	N/A			0	1 0	ptional	There is an optional choice of <i>CoveredIndividualAnnualInd</i> and
CoveredindividualAnnualind	Lines 17(d)- 22(d)	DigitBooleanType	string enumerations:	1	1 R	equired	Covered Individual Monthly Ind Gro.  Put "1" for true to indicate if the individual was covered for at least one day per month for all 12 months of the calendar year.
CoveredIndividualMonthlyIndGrp	N/A	MonthIndGrpType	"0" or" 1" complexType	1	1 R	equired	CoveredIndividualMonthlyIndGrp is a group of indicators for each month of
JanuaryInd	Lines 17(e)- 22(e)	DigitBooleanType	string enumerations:	0	1 0	ptional	coverage.  Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
FebruaryInd	Lines 17(e)- 22(e)	DigitBooleanType	"0" or" 1" string enumerations:	0	1 0	ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
Marchind	Lines 17(e)- 22(e)	DigitBooleanType	"0" or" 1" string enumerations: "0" or" 1"	0	1 0	ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
Aprilind	Lines 17(e)- 22(e)	DigitBooleanType	string enumerations: "0" or" 1"	0	1 0	ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
MayInd	Lines 17(e)- 22(e)	DigitBooleanType	string enumerations: "0" or" 1"	0	1 0	ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
Juneind	Lines 17(e)- 22(e)	DigitBooleanType	string enumerations: "0" or" 1"	0		ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
JulyInd	Lines 17(e)- 22(e)	DigitBooleanType	string enumerations: "0" or" 1"	0		ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
Augustind	Lines 17(e)- 22(e)	DigitBooleanType	string enumerations: "0" or" 1"	0		ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.
SeptemberInd	Lines 17(e)- 22(e)	DigitBooleanType	string enumerations:	0	1 0	ptional	Put "1" for true to indicate the months in which the individual was covered for at least one day per month.

Octoberind	Lines 17(e)-	DigitBooleanType	string	0	1	Optional	Put "1" for true to indicate the months in which the individual was covered for at
Octobernia	22(e)		enumerations:	U	1		least one day per month.
	22(e)		"0" or" 1"				least one day per month.
NovemberInd	Lines 17(e)-		string	0	1	Optional	Put "1" for true to indicate the months in which the individual was covered for at
	22(e)		enumerations:				least one day per month.
			"0" or" 1"				,,
DecemberInd	Lines 17(e)-	DigitBooleanType	string	0	1	Optional	Put "1" for true to indicate the months in which the individual was covered for at
	22(e)		enumerations:				least one day per month.
			"0" or" 1"				
recordType	N/A	string	string	1	1	Required	The underlying COTS product requires the recordType and lineNum attributes for
lineNum	N/A	integer	integer	1	1	Required	every record in the file. These attributes are constants:
							recordType =""
							lineNum ="0"