

FileForms Bulk Upload Template Key

Column	Title	Required to Upload?	Format	# of Digits	Toggle (Y/N)?	Accepts Abbreviations?	Example	Description
A	Legal Name	No	Text	-	-	-	ABC LLC	Legal Name of Reporting Company as seen on a Tax Return or State Registration
B	Trade Name	No	Text	-	-	-	ABC	DBA or name used by Reporting Company to conduct operations
C	Jurisdiction	No	Text	-	-	Yes	United States	The country which the business was formed or registered
D	State of formation	No ¹	Text	-	-	Yes	New York	The state where the company was formed or registered (if not formed in a tribal jurisdiction)
E	Tribal Jurisdiction	No ²	Text	-	-	Yes	Seminole Tribe of Florida	The tribal jurisdiction which the entity was formed or registered (if not formed in a state)
F	US Territory	No	Text	-	-	Yes	Puerto Rico	The US territory where the company was formed
G	Tax ID Type	No	Text	-	-	Yes	EIN/SSN/ITIN	The Tax Identification Type which is used to identify your business.
H	EIN	No	Number	9	-	-	12-3456789	Also accepts SSN/ITIN
I	Address Line 1	No	Text/Number	-	-	-	123 Main St	Business Address, cannot be PO Box, can be Registered Agents address if no other
J	City	No	Text	-	-	-	Fort Lauderdale	Business City
K	State	No	Text	-	-	Yes	Florida	Business State
L	Zip Code	No	Number	5	-	-	33315	Business Zip Code
M	Was your company incorporated on or after January 1 2024?	No	Text	-	Insert 'Y' or 'N'	-	Y	Companies formed in 2024+ are required to file within 90 days of their formation date
N	Date of Formation	No ³	Date	8	-	-	MM/DD/YYYY	Date the company was formed or registered with the Secretary of State
O	Contact First Name	No	Text	-	-	-	John	Individual Contact's First Name
P	Contact Middle Name	No	Text	-	-	-	Doe	Individual Contact's Middle Name
Q	Contact Last Name	No	Text	-	-	-	Smith	Individual Contact's Last Name
R	Contact Suffix	No	Text	-	-	-	Mr.	Individual Contact's Suffix
S	Contact Date of Birth	No	Date	8	-	-	MM/DD/YYYY	Individual Contact's Date of Birth
T	Contact Email	No	Valid Email	-	-	-	john@gmail.com	Individual Contact's Email Address
u	Contact Address	No	Text/Number	-	-	-	321 Main Ave	Individual Contact's Residential Address
V	Contact Country	No	Text	-	-	Yes	United States of America	Individual Contact's Country
W	Contact City	No	Text	-	-	-	Fort Lauderdale	Individual Contact's City
X	Contact State	No	Text	-	-	Yes	Florida	Individual Contact's State
Y	Contact Zip Code	No	Number	5	-	-	33315	Individual Contact's Zip
Z	Contact FinCEN ID	No	Number	12	-	-	0000-1111-2222	Unique Identifier Provided by FinCEN
AA	Contact Phone Number	No	Number	10	-	-	954-111-2233	Individual Contact's Phone Number
AB	Contact Beneficial Owner	No	Text	-	Insert 'Y' or 'N'	-	Y	Assigns the Contact as a BO of the Reporting Company
AC	Contact Company Applicant	No	Text	-	Insert 'Y' or 'N'	-	Y	Assigns the Contact as CA of the Reporting Company
AD	Contact Business Admin	No	Text	-	Insert 'Y' or 'N'	-	Y	Assigns Contact as BA (individual directing filing) of the Reporting Company
AE	Send Invite Now	No	Text	-	Insert 'Y' or 'N'	-	N	Triggers invitations sent to all CAs, BAs, and BOs to confirm their information and upload ID

Footnotes:

- 1) State of Formation, or a Tribal Jurisdiction, must be provided (not both)
- 2) Tribal Jurisdiction is only required if State of formation is not applicable
- 3) Date of formation is only required if company was formed on or after January 1, 2024