Form 1099-LS (2025) — Reportable Life Insurance Sale

CSV Data Formatting Guide

Revised: 2026-05-27

Col	Field (*required field)	Example Value	Formatting Guidelines
A	Acquirer TIN Type*	EIN	SSN or EIN Allowed values: SSN, EIN
B	Acquirer Taxpayer ID Number*	123231234	Enter the 9-digit TIN without dashes. TIN must be exactly 9 digits in length. TIN cannot be 123456789 TIN cannot consist of the same digit repeated.
C	Acquirer Business Name Line 1	John Finch Company	One of either Acquirer Business Name or Acquirer Person Name is required. Must contain only letters, numbers, #, -, (,), &, or apostrophe, with no leading/trailing/adjacent spaces. Must be 75 characters or fewer.
D	Acquirer Business Name Line 2		Must contain only letters, numbers, #, -, (,), &, or apostrophe, with no leading/trailing/adjacent spaces. Must be 75 characters or fewer.
E	Acquirer First Name	John	One of either Acquirer Business Name or Acquirer Person Name is required. Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
F	Acquirer Middle Name	William	Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
G	Acquirer Last Name	Finch	Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
H	Acquirer Suffix	III	Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
I	Acquirer Country*	US	Must be a valid 2-character IRS country code (e.g., US, CA)
J	Acquirer Address Line 1*	123 Business Rd	Must be 35 characters or fewer.
K	Acquirer Address Line 2	Suite 21	Must be 35 characters or fewer.
L	Acquirer City/Town	New York	City must contain only letters, spaces, hyphens, apostrophes, or periods. Must be 40 characters or fewer.
M	Acquirer State/Province/Territory	NY	Domestic: must be a valid US state/territory code (e.g., NY, TX). Foreign: Must be 17 characters or fewer.
N	Acquirer ZIP/Postal Code	10055	Domestic: zip, zip+4, or zip+7. Foreign: Alpha-numeric characters only
O	Acquirer Phone*	2145555555	Phone must be 10-20 digits.
P	Office Code	1234	This is an optional field. For users with multiple locations, this field may be used to identify the location of the office submitting the information returns. Office Code must be exactly 4 digits.

Col	Field (*required field)	Example Value	Formatting Guidelines
Q	Payment Recipient TIN Type*	SSN	SSN, EIN, ATIN, ITIN, QI-EIN, or UND Allowed values: SSN, EIN, ATIN, ITIN, QI-EIN, UND
R	Payment Recipient Taxpayer ID Number*	123231234	Enter the 9-digit TIN without dashes. TIN must be exactly 9 digits in length. TIN cannot be 123456789 TIN cannot consist of the same digit repeated. The composite Payment Recipient TIN + Account Number must be unique
S	Payment Recipient Account Number	AA1234	The account number is required if you have multiple accounts for a payment recipient for whom you are filing more than one Form 1099-LS. Must be 20 characters or fewer. The composite Payment Recipient TIN + Account Number must be unique
T	Payment Recipient Business Name Line 1	Hello Mother Goose Inc	One of either Payment Recipient Business Name or Payment Recipient Person Name is required. Must contain only letters, numbers, #, -, (,), &, or apostrophe, with no leading/trailing/adjacent spaces. Must be 75 characters or fewer.
U	Payment Recipient Business Name Line 2		Must contain only letters, numbers, #, -, (,), &, or apostrophe, with no leading/trailing/adjacent spaces. Must be 75 characters or fewer.
V	Payment Recipient First Name	John	One of either Payment Recipient Business Name or Payment Recipient Person Name is required. Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
W	Payment Recipient Middle Name	William	Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
X	Payment Recipient Last Name	Finch	Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
Y	Payment Recipient Suffix	III	Must be 20 characters or fewer. Must contain only letters, numbers, hyphens, or apostrophes.
Z	Payment Recipient Country*	US	Must be a valid 2-character IRS country code (e.g., US, CA)
AA	Payment Recipient Address Line 1*	123 Business Rd	Must be 35 characters or fewer.
AB	Payment Recipient Address Line 2	Suite 21	Must be 35 characters or fewer.
AC	Payment Recipient City/Town	New York	City must contain only letters, spaces, hyphens, apostrophes, or periods. Must be 40 characters or fewer.
AD	Payment Recipient State/Province/Territory	NY	Domestic: must be a valid US state/territory code (e.g., NY, TX). Foreign: Must be 17 characters or fewer.
AE	Payment Recipient ZIP/Postal Code	10055	Domestic: zip, zip+4, or zip+7. Foreign: Alpha-numeric characters only
AF	Policy Number		Must contain only printable characters with no leading, trailing, or adjacent spaces. Must be 30 characters or fewer.
AG	Box 1 - Amount paid to payment recipient		Up to 2 decimal places. Range: 0 to 999,999,999

Col	Field (*required field)	Example Value	Formatting Guidelines
AH	Box 2 - Date of sale	MM/DD/YYYY	Format: MM/dd/yyyy Range: 01/01/1900 to 12/31/2100
AI	Issuer's Name		Must contain only letters, numbers, #, -, (,), &, or apostrophe, with no leading/trailing/adjacent spaces. Must be 75 characters or fewer.
AJ	Acquirer's Name		Must contain only letters, numbers, hyphens, or apostrophes.
AK	Alternate Acquirer Country	US	Must be a valid 2-character IRS country code (e.g., US, CA)
AL	Alternate Acquirer Address Line 1	123 Business Rd	Must be 35 characters or fewer.
AM	Alternate Acquirer Address Line 2	Suite 21	Must be 35 characters or fewer.
AN	Alternate Acquirer City/Town	New York	City must contain only letters, spaces, hyphens, apostrophes, or periods. Must be 40 characters or fewer.
AO	Alternate Acquirer State/Province/Territory	NY	Domestic: must be a valid US state/territory code (e.g., NY, TX). Foreign: Must be 17 characters or fewer.
AP	Alternate Acquirer ZIP/Postal Code	10055	Domestic: zip, zip+4, or zip+7. Foreign: Alpha-numeric characters only
AQ	Alternate Acquirer Phone		Phone must be 10-20 digits.