STATE OF CALIFORNIA
FRANCHISE TAX BOARD
FIDM : MAIL STOP B-40
PO BOX 460
RANCHO CORDOVA, CA 95741-0460

INFORMATION HOTLINE: (916) 845-6304

ELECTION FORM

Financial institutions use this form to elect the method they wish to use to participate in the Financial Institution Data Match with the Franchise Tax Board (FTB). Please refer to the instructions on the reverse side for more information. When completed and signed by an authorized representative of your organization, this form will serve as the official data processing agreement with the Franchise Tax Board.

YOUR ORGANIZATION

Name: _____ FEIN: _____

Contact: _____ Phone: _____

Street address: _____

Mailing address *(if different from street address)*: _____

ACTION

❑ Initial election – *beginning quarter* ____ *of* _____
(1-4) (year)

❑ Change election

❑ Add or change transmitter

EXCHANGE METHOD

❑ Method 1 Institutions may elect to submit to FTB a file by February 28 identifying all open accounts, and quarterly thereafter, May 30, August 30, and November 30. The quarterly tape may identify either all open accounts or only updates of accounts opened and closed since the last tape.

❑ Method 2 Institutions may elect to match a file supplied by FTB on a quarterly basis (January 15, April 15, July 15, and October 15). Institutions will have 45 days to match against *all* accounts maintained at that institution and return the matches quarterly (February 28, May 30, August 30, and November 30). FTB will submit its file on (select one): ❑ IBM 3480 cartridge ❑ standard ½" tape reel

TRANSMITTER INFORMATION

If you plan to use a transmitter to exchange data with the Franchise Tax Board, please provide the following information about your transmitter:

Name: _____ FEIN: _____

Address: _____

Contact: _____ Phone: _____

If you elected Method 2, would you like the magnetic media sent directly to your authorized transmitter?
❑ Yes ❑ No

AUTHORIZED REPRESENTATIVE

Name *(please print)*: _____ Title: _____

Signature: _____ Date: _____

Section 666 (a) (17) (C) of Public Law 104-193 establishes that a financial institution shall not be liable under any federal or state law to any person for any disclosure of information to FTB (acting on behalf of the California Department of Social Services, the state's IV-D agency) for providing the required information covered in Section 666 (a) (17) (A) (i) of the Act. In addition, a financial institution will not be held liable for any other action taken in good faith to comply with the requirements of Section 666 (a) (17) (C) of the Act. Sections 19552 and 19271.6 of the California Revenue and Taxation Code provide that unauthorized disclosure or use of confidential Franchise Tax Board information is a misdemeanor.

INSTRUCTIONS

GUIDELINES
Financial institutions use this form to elect the method they wish to use to participate in the Financial Institution Data Match (FIDM) with the Franchise Tax Board (FTB). When completed and signed by an authorized representative of your organization, this form will serve as the official data processing agreement with the Franchise Tax Board.

DUE DATE
The initial data match will occur during the 1st quarter of 1999; financial institutions will report information from the prior quarter (4th quarter 1998). To participate, you must complete this election form and send it to FTB by October 15, 1998.

For those financial institutions that request and receive a waiver:
You must complete and return an Election Form 75 days prior to beginning of the quarter in which you plan to enter the program:

If you plan to begin exchanging data during the	***Your election form is due***	***Your first file will report information from the***	***And your file Is due***
1st quarter (begins Jan. 1)	October 15	4th quarter	February 28
2nd quarter (begins Apr. 1)	January 15	1st quarter	May 30
3rd quarter (begins Jul. 1)	April 15	2nd quarter	August 30
4th quarter (begins Oct. 1)	July 15	3rd quarter	November 30

DEFINITIONS

Contact/Phone
The name and telephone number of the person who will serve as the contact between FTB and your institution.

FEIN
Federal Employer Identification Number.

Exchange Method
Financial institutions may either send FTB a file with all of their open accounts (Method 1) or may receive and match a file of FTB's delinquent child support accounts (Method 2).

Media
FTB prefers to exchange information via IBM 3480 or 3490 tape cartridges. However, financial institutions can also send information to FTB on standard ½" tape reels, 3½" diskettes or 5¼" diskettes.

Financial institutions electing Method 1 can send information to FTB on any of the above media.
For financial institutions electing Method 2, FTB will send its file on an IBM 3480 tape cartridge or a standard ½" tape reel.

Authorized Representative
This section must be completed and signed by an officer or executive of your institution.

MAIL YOUR COMPLETED ELECTION FORM TO:

FRANCHISE TAX BOARD
FIDM : MAIL STOP B-40
PO BOX 460
RANCHO CORDOVA, CA 95741-0460

For assistance call the FIDM Help Desk at (916) 845-6304.