401 TAB
FBAR Citizenship Lead Sheet
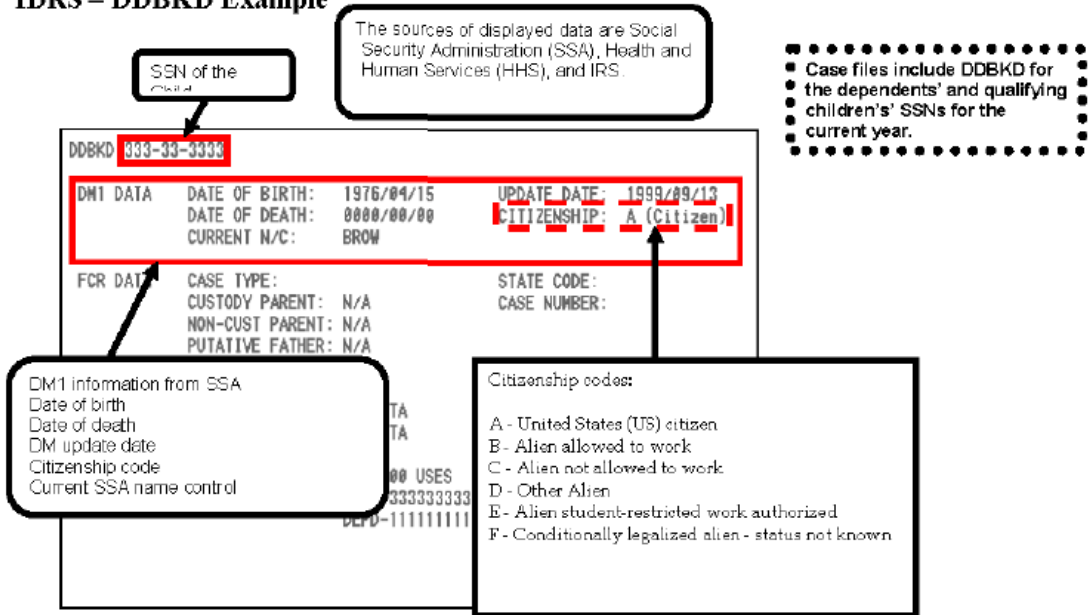
Command Code DDBKD
IRM 2.3.80

By entering a SSN, **Command Code** (CC) **DDBKD allows a user to display a variety of information** about the SSN that comes from external sources and can be used to display **Citizenship documentation only if in question**.

The sources of data displayed comes from Social Security Administration, Health & Human Services, and IRS. The primary use of this command code is to display additional information about a child for Remote Exam to audit returns under the Dependent Database program.

(1) The required input for CC DDBKD is: DDBKD XXX-XX-XXXX

a. Command Code
b. blank for definer
c. Edited TIN (nnn-nn-nnnn)

Note! The citizenship code is often blank on the DDBKD, but may show on a MFTRA U (NUMIDENT).

If you have a copy of the **US Passport** from Section 4 of the UBS CD, include in this section.

To search Social Security Administration records: MFTRA U is used to request a Social Security Administration transcript called NUMIDENT on an individual.

Format: MFTRA
000-11-2222,U,3911211200,SMITH 5301MIL

Note: Your IDRS number (3911211200), name (SMITH), and Stop Number (5301MIL) assist in routing the request.

NUMIDENT Transcript with Social Security-Administration (SSA) Data-IRM **2.3.32-17**

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|   |     1-9    |   11-19   |  21-29   |  31-39   |  41-49   |  51-59   |  61-69   |  71-79   |    |
|   |123456789012345678901234567890123456789012345678901234567890123456789012345678901234567890|    |
| 1|            1                                                                              | 1 |
| 2|        _____                                                                        | 2 |
| 3|DATE OF DEATH-____2_____.                                                                 | 3 |
| 4|                                                                                           | 4 |
| 5|TYOE-3         DATE OF RECORD-_____4____                                                    | 5 |
| 6|                                                                                           | 6 |
| 7|DISABILITY STATUS-5                                                                        | 7 |
| 8|                                                                                           | 8 |
| 9|NAME ON CARD-_____6_____                 | 9 |
|10|SECOND NAME-_____7_____                 |10 |
|11|THIRD NAME-  _____8_____                |11 |
|12|                                                                                           |12 |
|13|CITIZENSHIP-9                           SEX-10                                             |13 |
|14|                                                                                           |14 |
|15|DATE OF BIRTH-____11____        PLACE OF BIRTH-____12_____ 13 14                          |15 |
|16|                                                                                           |16 |
|17|PRIOR DATE OF BIRTH-____15_____                                                            |17 |
|18|                                                                                           |18 |
|19|MOTHER-_____16_____                                       |19 |
|20|                                                                                           |20 |
|21|FATHER-_____17_____                                       |21 |
|   |123456789012345678901234567890123456789012345678901234567890123456789012345678901234567890|    |
|   |     1-9    |   11-19   |  21-29   |  31-39   |  41-49   |  51-59   |  61-69   |  71-79   |    |
```

1. A valid Social Security number for the record being provided.
2. Date of Death. Month, day and full year of death separated by hyphens.
3. Entry indicated the type of SS record on file.
4. The month, day and full year the application or correction was recorded on the SSA file.
5. This field represents pre-1973 disability activity on the SSN.
6. The name on the SSN card to a used in work or business.
7. The applicant's name on most recently assigned SSN card, name at birth or other name used, prioritized in that order.
8. Same as Item 6 above.
9. This entry is one of six possibilities:

   A= US Citizen
   B=Legal Alien-Authorized to Work
   C=Legal Alien-Not Authorized to Work
   D=Other
   E= Alien Student-Restricted Work Authorized
   F=Conditionally Legalized Alien

10. Valid Entries are: M=Male, F=Female, U=Unknown
11. Month, day and full year of birth separated by dashes.
12. City and County (if known).
13. State of birth. Format is two alphabetic characters.
14. An "*" in this field will indicate a Foreign POB or a blank for a Domestic POB.
15. Month, day and full year of birth previously reported to SSA.
16. Applicant's Mother's maiden name.
17. Applicant's Father's name.

(b) (7)(E)

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