File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

Version: Approved

Record Number	Field Number	<u>Field Name</u>	<u>Data Type</u>	<u>Max</u> Length	<u>Format</u>	<u>BUS</u> Key	Req?	<u>Rules</u>
P16	1	AIP Code	Character	2			Υ	AIP Code must be valid; edit with the AIP ICE, "D00100".
P16	2	Reinsurance Year	Numeric	4	CCYY	Υ	Υ	Current Reinsurance Year.
P16	3	Record Type Code	Character	6		Υ	Υ	Record Type Code must be "P16".
P16	4	AIP Policy Producer Key	Character	15		Υ	Υ	AIP Policy Producer Key must match the parent primary Policy Producer, "P10" record.
P16	5	AIP Insurance In Force Key	Character	15		Υ	Υ	AIP Insurance In Force Key must be unique within the AIP Policy Producer Key.
P16	6	AIP LGM Premium Key	Character	15		Υ	Υ	AIP LGM Premium Key must be unique within the submitted LGM, "P16" records.
P16	7	AIP Insurance Agent Key	Character	15			Υ	AIP Insurance Agent Key must match the corresponding Insurance Agent, "P55" record.
								AIP Insurance Agent Key must refer to an active Agent "P55" record, or an Agent who is inactive and the Agent Acreage/Inventory Value Signature Date is less than the inactive date.
P16	8	Type Code	Character	3			Υ	Type Code is required; edit with the Insurance Offer ADM, "A00030".
P16	9	Practice Code	Character	3			Υ	Practice Code is required; edit with the Insurance Offer ADM, "A00030".
P16	10	Commodity Type Code	Character	3				Commodity Type Code must be valid; edit with the Commodity Type ADM, "A00430".
P16	11	Class Code	Character	3		-		Class Code must be valid; edit with the Class ADM, "A00410".

File Group:

**Record Name:** LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

Version: Approved

Record Number	Field Number	<u>Field Name</u>	Data Type	Max Length	<u>Format</u>	BUS Key Req?	<u>Rules</u>
P16	12	Sub Class Code	Character	3			Sub Class Code must be valid; edit with the Sub Class ADM, "A00530"
P16	13	Intended Use Code	Character	3			Intended Use Code must be valid; edit with the Intended Use ADM, "A00470".
P16	14	Irrigation Practice Code	Character	3			Irrigation Practice Code must be valid; edit with the Irrigation Practice ADM, "A00490".
P16	15	Cropping Practice Code	Character	3			Cropping Practice Code must be valid; edit with the Cropping Practice ADM, "A00450".
P16	16	Organic Practice Code	Character	3			Organic Practice Code must be valid; edit with the Organic Practice ADM, "A00500".
P16	17	Interval Code	Character	3			Interval Code must be valid; edit with the Interval ADM, "A00480".
P16	18	Insured Premium Signature Date	Date	8	CCYYMMDD	Υ	Insured Signature Date of the Endorsement. Cannot exceed current date or effective date, whichever is applicable.
P16	19	Agent Signature Date	Date	8	CCYYMMDD	Y	Agent Signature Date of the Endorsement. Cannot exceed current date or effective date, whichever is applicable.
P16	20	Sales Effective Date	Date	8	CCYYMMDD	Y	Sales Effective Date must equal date rate was published. Must equal the current day's date if the time is between 12:00 PM and 11:59:59 PM. Must equal the previous day's date if the time is between 12:00 AM and 11:59:59 AM.

File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

**Reinsurance Year:** 2024

Version: Approved

Record Number	Field Number	<u>Field Name</u>	Data Type	Max Length	<u>Format</u>	<u>BUS</u> Key Req?	<u>Rules</u>
P16	21	Month 2 Target Market Amount	Numeric	6	999999	M ca of ex	arget Marketings for Second  Ionth. Number of swine or  attle, or hundredweight (CWT)  milk for dairy the insured  spects to market in the second  onth of the insurance period.
P16	22	Month 3 Target Market Amount	Numeric	6	999999	M ca of ex	erget Marketings for Third  Ionth. Number of swine or  attle, or hundredweight (CWT)  milk for dairy the insured  expects to market in the second  onth of the insurance period.
P16	23	Month 4 Target Market Amount	Numeric	6	999999	M ca of ex	erget Marketings for Fourth  Ionth. Number of swine or  attle, or hundredweight (CWT)  milk for dairy the insured  spects to market in the third  onth of the insurance period.
P16	24	Month 5 Target Market Amount	Numeric	6	999999	M ca of ex	arget Marketings for Fifth Ionth. Number of swine or attle, or hundredweight (CWT) f milk for dairy the insured expects to market in the fourth conth of the insurance period.

File Group:

**Record Name:** LGM Premium

Record Code: P16

File Type: Delimited

**Reinsurance Year:** 2024

Version: Approved

Record Number	Field Number	<u>Field Name</u>	Data Type	Max Length	<u>Format</u>	BUS Key Req?	<u>Rules</u>
P16	25	Month 6 Target Market Amount	Numeric	6	999999		Target Marketings for Sixth Month. Number of swine or cattle, or hundredweight (CWT) of milk for dairy the insured expects to market in the fifth month of the insurance period.
P16	26	Month 7 Target Market Amount	Numeric	6	999999		Target Marketings for Seventh Month. Number of cattle, or hundredweight (CWT) of milk for dairy the insured expects to market in the seventh month of the insurance period.
P16	27	Month 8 Target Market Amount	Numeric	6	999999		Target Marketings for Eighth Month. Number of cattle, or hundredweight (CWT) of milk for dairy the insured expects to market in the eight month of the insurance period.
P16	28	Month 9 Target Market Amount	Numeric	6	999999		Target Marketings for Ninth Month. Number of cattle, or hundredweight (CWT) of milk for dairy the insured expects to market in the nine month of the insurance period.

File Group:

Record Name: LGM Premium

Record Code: P16

**File Type:** Delimited **Reinsurance Year:** 2024

Version: Approved

Record Number	Field Number	<u>Field Name</u>	Data Type	Max Length	<u>Format</u>	BUS Key Req?	<u>Rules</u>
P16	29	Month 10 Target Market Amount	Numeric	6	999999		Target Marketings for Tenth Month. Number of cattle, or hundredweight (CWT) of milk for dairy the insured expects to market in the tenth month of the insurance period.
P16	30	Month 11 Target Market Amount	Numeric	6	999999		Target Marketings for Eleventh Month. Number of cattle, or hundredweight (CWT) of milk for dairy the insured expects to market in the eleventh month of the insurance period.
P16	31	Month 2 Corn Equivalent Amount	Numeric	11	9999.999999		Corn or Corn Equivalent for Second Month. Corn or corn equivalent in tons that the insured expects to feed in the second month of the insurance period. Only applicable for dairy.
P16	32	Month 3 Corn Equivalent Amount	Numeric	11	9999.999999		Corn or Corn Equivalent for Third Month. Corn or corn equivalent in tons that the insured expects to feed in the third month of the insurance period. Only applicable for dairy.

File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

Version: Approved

Record Number	Ontbut Field Number	<u>Field Name</u>	Data Type	<u>Max</u> Length	<u>Format</u>	BUS Key Req?	<u>Rules</u>
P16	33	Month 4 Corn Equivalent Amount	Numeric	11	9999.999999		Corn or Corn Equivalent for Fourth Month. Corn or corn equivalent in tons that the insured expects to feed in the fourth month of the insurance period. Only applicable for dairy.
P16	34	Month 5 Corn Equivalent Amount	Numeric	11	9999.999999		Corn or Corn Equivalent for Fifth Month. Corn or corn equivalent in tons that the insured expects to feed in the fifth month of the insurance period. Only applicable for dairy.
P16	35	Month 6 Corn Equivalent Amount	Numeric	11	9999.999999		Corn or Corn Equivalent for Sixth Month. Corn or corn equivalent in tons that the insured expects to feed in the sixth month of the insurance period. Only applicable for dairy.
P16	36	Month 7 Corn Equivalent Amount	Numeric	11	9999.999999		Corn or Corn Equivalent for Seventh Month. Corn or corn equivalent in tons that the insured expects to feed in the seventh month of the insurance period. Only applicable for dairy.

File Group:

**Record Name:** LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

Version: Approved

Record Number	Ontbut Number	Field Name	Data Type	Max Length	Format	BUS Key Req?	Rules
P16	37	Month 8 Corn Equivalent Amount	Numeric	11	9999.999999	C E e ii e p	Corn or Corn Equivalent for Eighth Month. Corn or corn Equivalent in tons that the Insured expects to feed in the Eighth month of the Insurance Deriod. Only applicable for Ilairy.
P16	38	Month 9 Corn Equivalent Amount	Numeric	11	9999.999999	N e ii n p	Corn or Corn Equivalent for Whith Month. Corn or corn Equivalent in tons that the Insured expects to feed in the Ininth month of the insurance Ineriod. Only applicable for Hairy.
P16	39	Month 10 Corn Equivalent Amount	Numeric	11	9999.999999	C T e ii t	Corn or Corn Equivalent for Tenth Month. Corn or corn Equivalent in tons that the Insured expects to feed in the Eenth month of the insurance Deriod. Only applicable for Hairy.
P16	40	Month 11 Corn Equivalent Amount	Numeric	11	9999.999999	E e ii e p	Corn or Corn Equivalent for Eleventh Month. Corn or corn equivalent in tons that the ensured expects to feed in the eleventh month of the insurance period. Only applicable for lairy.

File Group:

**Record Name:** LGM Premium

Record Code: P16

File Type: Delimited

**Reinsurance Year:** 2024

Version: Approved

Record Number	Ontput Number	<u>Field Name</u>	Data Type	<u>Max</u> Length	<u>Format</u>	BUS Key Req?	<u>Rules</u>
P16	41	Month 2 Soybean Meal Equivalent Amount	Numeric	11	9999.999999		Soybean Meal or Soybean Meal Equivalent for Second Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the second month of the insurance period. Only applicable for dairy.
P16	42	Month 3 Soybean Meal Equivalent Amount	Numeric	11	9999.999999		Soybean Meal or Soybean Meal Equivalent for Third Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the third month of the insurance period. Only applicable for dairy.
P16	43	Month 4 Soybean Meal Equivalent Amount	Numeric	11	9999.999999		Soybean Meal or Soybean Meal Equivalent for Fourth Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the fourth month of the insurance period. Only applicable for dairy.

File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

Version: Approved

Record Number	Ontbut Number	<u>Field Name</u>	Data Type	<u>Max</u> Length	<u>Format</u>	BUS Key R	eq? Rules
P16	44	Month 5 Soybean Meal Equivalent Amount	Numeric	11	9999.999999		Soybean Meal or Soybean Meal Equivalent for Fifth Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the fifth month of the insurance period. Only applicable for dairy.
P16	45	Month 6 Soybean Meal Equivalent Amount	Numeric	11	9999.999999		Soybean Meal or Soybean Meal Equivalent for Sixth Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the sixth month of the insurance period. Only applicable for dairy.
P16	46	Month 7 Soybean Meal Equivalent Amount	Numeric	11	9999.999999		Soybean Meal or Soybean Meal Equivalent for Seventh Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the seventh month of the insurance period. Only applicable for dairy.

File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

**Version:** Approved

Record Number	Field Number	<u>Field Name</u>	Data Type	Max Length	<u>Format</u>	BUS Key	Req?	<u>Rules</u>
P16	47	Month 8 Soybean Meal Equivalent Amount	Numeric	11	9999.999999			Soybean Meal or Soybean Meal Equivalent for Eighth Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the eighth month of the insurance period. Only applicable for dairy.
P16	48	Month 9 Soybean Meal Equivalent Amount	Numeric	11	9999.999999			Soybean Meal or Soybean Meal Equivalent for Ninth Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the ninth month of the insurance period. Only applicable for dairy.
P16	49	Month 10 Soybean Meal Equivalent Amount	Numeric	11	9999.999999			Soybean Meal or Soybean Meal Equivalent for Tenth Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the tenth month of the insurance period. Only applicable for dairy.

File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

**Reinsurance Year:** 2024

Version: Approved

Record	Field Number			<u>Max</u>		BUS	
<u>Number</u>	<u> Number</u>	<u>Field Name</u>	<u>Data Type</u>	<u>Length</u>	<u>Format</u>	<u>Key</u> <u>Rec</u>	<u>q?</u> <u>Rules</u>
P16	50	Month 11 Soybean Meal Equivalent Amount	Numeric	11	9999.999999		Soybean Meal or Soybean Meal Equivalent for Eleventh Month. Soybean meal or soybean meal equivalent in tons that the insured expects to feed in the eleventh month of the insurance period. Only applicable for dairy.
P16	51	Deductible Amount	Numeric	7	9999.99	Y	Deductible Amount, validated against A00070.
P16	52	AIP Liability Amount	Numeric	10	999999999	Y	Insured Value of the endorsement. If liability amount is less than \$1, round to \$1.
P16	53	AIP Total Premium Amount	Numeric	10	999999999	Y	Unless Conservation Compliance is applicable, any Total Premium Amount less than \$1 must round to \$1.
P16	54	AIP Subsidy Amount	Numeric	10	9999999999	Y	Unless Conservation Compliance is applicable, any AIP Subsidy Amount less than \$1 must round to \$1. Subisdy only applies with two or more months insured with marketings.
P16	55	Additional Subsidy Flag	Character	1			Reserved.
P16	56	State Private Subsidy Flag	Character	1			Reserved.
P16	57	Settlement Flag	Character	1			Settlement flag must equal Yes, "Y" if there is a Settlement or Finding, otherwise empty.

File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

**Reinsurance Year:** 2024

Version: Approved Release Date: 7/1/2023

Record Number	Output	<u>Field</u> Number	<u>Field Name</u>	Data Type	Max Length	<u>Format</u>	BUS Key Req?	<u>Rules</u>
P16		58	CC Subsidy Reduction Percent	Numeric	6	9.9999		CC Subsidy Reduction Percent is required when Applied Program Indicator Code List contains 'CC' or 'TR' on the Policy Producer, "P10" record or any associated Policy Producer Other Person, "P10B" record.
P16	*	59	Valid Commodity Type Code	Character	3			Valid Commodity Type Code is populated from the Valid Commodity Type Code in the Insurance Offer ADM, "A00030".
P16	*	60	Vaild Class Code	Character	3			Valid Class Code is populated from the Valid Class Code in the Insurance Offer ADM, "A00030".
P16	*	61	Vaild Sub Class Code	Character	3			Vaild Sub Class Practice Code is populated from the Valid Sub Class Code in the Insurance Offer ADM, "A00030".
P16	*	62	Vaild Intended Use Code	Character	3			Valid Intended Use Code is populated from the Valid Intended Use Code in the Insurance Offer ADM, "A00030".
P16	*	63	Vaild Irrigation Practice Code	Character	3			Valid Irrigation Practice Code is populated from the Valid Irrigation Practice Code in the Insurance Offer ADM, "A00030".
P16	*	64	Vaild Cropping Practice Code	Character	3			Valid Cropping Practice Code is populated from the Valid Cropping Practice Code in the Insurance Offer ADM, "A00030".
P16	*	65	Vaild Organic Practice Code	Character	3			Valid Organic Practice Code is populated from the Valid Organic Practice Type Code in the Insurance Offer ADM, "A00030".

File Group:

**Record Name:** LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

Version: Approved

Record Number		<u>Field</u> Number	<u>Field Name</u>	Data Type	Max Length	<u>Format</u>	BUS Key Req?	<u>Rules</u>
P16	*	66	Vaild Interval Code	Character	3			Valid Interval Code is populated from the Valid Interval Code in the Insurance Offer ADM, "A00030".
P16	*	67	CC Subsidy Reduction Amount	Numeric	10	999999999		CC Subsidy Reduction Amount is the amount of subsidy reduced due to Conservation Compliance. See Calculation Exhibit.
P16	*	68	Gross Margin Guarantee Amount	Numeric	13	<b>S</b> 999999999.99		The Gross Margin Guarantee (dollar and cents) for swine or cattle is the sum of (Target Marketings by month times Expected Gross Margins by month) minus (Deductible times Total Target Marketings).  The Gross Margin Guarantee (dollar and cents) for dairy is the sum of Expected Gross Margins by month minus (Deductible times Total Target Marketings).
P16	*	69	Liability Amount	Numeric	10	999999999		Insured Value of the endorsement. If liability amount is less than \$1, round to \$1.
P16	*	70	Total Premium Amount	Numeric	10	999999999		Unless Conservation Compliance is applicable, any Total Premium Amount less than \$1 must round to \$1.
P16	*	71	Subsidy Amount	Numeric	10	999999999		Unless Conservation Compliance is applicable, any AIP Subsidy Amount less than \$1 must round to \$1.

File Group:

Record Name: LGM Premium

Record Code: P16

File Type: Delimited

Reinsurance Year: 2024

Version: Approved

Record Number	1	<u>Field</u> <u>Number</u>	<u>Field Name</u>	Data Type	<u>Max</u> Length	<u>Format</u>	BUS Key Req?	Rules
P16	*	72	Additional Subsidy Amount	Numeric	10	999999999	R	Reserved.
P16	*	73	State Private Subsidy Amount	Numeric	10	999999999	R	Reserved.
P16	*	74	Producer Premium Amount	Numeric	10	999999999	>	Indorsement Number. Must be zeros (i.e. 00001) and unique or the key.
P16	*	75	A&O Expense Subsidy Amount	Numeric	15	9999999999.99	P P	A & O Expense Subsidy Amount is set to the Total Premium Amount times A & O Expense Subsidy Percent from the A & O Expense Subsidy ICE, D00097".
P16	*	76	BFR/VFR Subsidy Amount	Numeric	10	999999999	R P	Reginning Farmer Rancher/Veteran Farmer Rancher Subsidy Amount. 0.10 (10%) of the Total Premium Amount added to the base Subsidy Amount. See Calculation Exhibits.
P16	*	77	Eligibility Code	Character	8			iligibility Code is the returned values from the neligible Tracking System
P16	*	78	Initial Accepted Batch Number	Numeric	5	99999	S	nitial Accepted Batch Number is the original equence number assigned when this record was irst received at RMA.
P16	*	79	Initial Accepted Date	Date/Time	21	CCYYMMDD hh:mm:ss.fff		nitial Accepted Date is the original date assigned when this record was first received at RMA.
P16	*	80	Batch Received Date	Date/Time	21	CCYYMMDD hh:mm:ss.fff		Batch Received Date is the date that the AIP file is eceived by RMA.
P16	*	81	Batch Number	Numeric	5	99999		Batch Number is a sequential number assigned when an AIP file is received.

File Group:

**Record Name:** LGM Premium

Record Code: P16

File Type: Delimited

**Reinsurance Year:** 2024

Version: Approved

**Release Date:** 7/1/2023

Number Number Field Name Data Type Length Format Key Req	Batch Record ID is a sequential number assigned
P16 * 82 Batch Record ID Numeric 15	to each record in the AIP file by RMA during processing. Batch Record ID is unique within the record type for the batch.
P16 * 83 Process Result Code Character 1	Process Result Code equals the final result code as determined by PASS processing, refer to the Process Result ICE, "D00002" for values.

## Record Level Rules- TBD

1

Batch Received Date must be before Noon Central the next business day after the Sales Effective Date.