



**Indiana Withholding and Composite
Filing Opt-Out Affidavit**



Pass-Through Entity Information	
Name of Entity	FEIN
Address	
City, State, ZIP Code	

Type of Pass-Through Entity:

- Partnership
 S Corporation
 Estate
 Trust

Nonresident Information	
Name	FEIN/SSN
Address	
City, State, ZIP Code	
Type of Entity	
Year(s) (see instructions)	

Please check the reason(s) for claiming an exemption for, or reduction in the amount of withholding:

- The entity is an employee stock ownership plan. (03)
 The entity is an insurance company not subject to adjusted gross income tax or financial institutions tax. (05)
 The entity is a nonprofit (including IRAs and other retirement plans) and the income is not unrelated business income to the entity. (06)
 The entity is a real estate investment trust. Do not claim this exemption if the entity is a captive real estate investment trust. (07)
 The entity is a real estate mortgage investment conduit. (08)
 The entity is permitted a treaty-based exemption from income tax. Please list the country and the relevant provision of the treaty (if known). (09) _____



The income is subject to reduction because the entity claiming ownership has an allowable loss to be applied against the income.

Suspended losses (list amount allowable) (04) _____

Claimed _____

Passive activity losses (list amount allowable) (10) _____

Claimed _____

Indiana net operating losses (list amount allowable) (11) _____

Claimed _____

The tax owed by the entity is reduced by either Indiana credit carryforwards or Indiana credits from other sources. List the credit, amount, the year in which the credit was earned, and the FEIN or Social Security number of the source. (12)

Credit (3-digit code)	Amount	Year Earned	FID of Source
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The entity is a corporation or financial institution that is registered with the Indiana Secretary of State to do business in Indiana and is remitting estimated payments on the income from the pass-through entity. List the FID if the corporation otherwise subject to withholding is different than the corporation reporting the tax for Indiana purposes. (13) _____

Under penalties of perjury, I understand that I am responsible for filing any Indiana tax returns and remitting any tax due as a result of the pass-through entity's income derived from Indiana sources. I further agree that I consent to the jurisdiction of the state of Indiana with regard to any income, return filing, assessment, and rights of appeal. I further agree that this waiver of withholding does not apply if a partnership is subject to adjustments resulting from Indiana or federal adjustments, including audits, administrative adjustment requests, and amended returns. This agreement may be revoked at any time by the Indiana Department of State Revenue ("Department"), and the Department may notify the pass-through entity listed above of the revocation and any disallowance of waivers.

Name: _____ Name (printed): _____

Title (if applicable): _____ Date: _____



Instructions for Indiana Withholding and Composite Filing Opt-Out Affidavit

The Schedule IN-COMPA is intended as a schedule to permit a shareholder, partner, or beneficiary to have nonresident tax withholding reduced or eliminated in certain cases. These cases are intended to be those circumstances where an ultimate taxpayer would have an Indiana income tax liability that is significantly lower than the amount required to be withheld or withholding would result in duplicate collection of the same tax.

This affidavit may not be used to claim a reduction or waiver of pass through entity tax ("PTET"). Any tax required to be withheld will be reduced by the PTET even if this affidavit is not completed.

A pass-through entity is **not** required to accept the affidavit. If a pass-through entity does not accept this affidavit, withholding is required in the same manner as if no affidavit had been completed. In addition, the department may void any affidavit and may require a pass-through entity to not accept an affidavit upon notification by the department.

For a pass-through entity, any completed affidavits are required to be attached to the pass-through entity's return each year for which the affidavit applies. **Failure to attach an affidavit shall be treated as if the affidavit had not been completed for that taxable year and composite tax will be assessed.**

For a partner, shareholder, or beneficiary, the affidavit may be attached to the return. However, attachment is not required. The partner, shareholder, or beneficiary must provide a completed copy of the affidavit upon department request.

The affidavit must be completed by the nonresident before the 15th day of the fourth month following the end of the pass-through entity's tax year. In the case of an affidavit covering multiple years, failure to complete the affidavit in a timely manner will result in the affidavit being treated as void for that taxable year.

IMPORTANT: In the event of an amended return by the pass-through entity or a department adjustment to the pass-through entity, this affidavit will not relieve the pass-through entity of withholding based on the amended return. Further, this affidavit cannot be used to relieve a partnership of any tax otherwise due as a result of adjustments if the partnership elects to be taxed at the partnership level.

Nonresident Information

Enter all fields for the affected nonresident. For type of entity, use a common description (e.g., individual, S corporation, C corporation, etc.).

For the year, enter the first year and last year of the election (for instance, 2022-2026 or 2022-forward) only for the first five reasons listed in the affidavit or for the reason associated with corporations registered in Indiana and remitting estimated payments. For all other listed reasons, enter only the current taxable year.

If multiple tax years are entered appropriately, the affidavit generally is required to be completed only once for the entire period specified unless the department specifically voids the affidavit. However, if there is a material change in law (as published in the Indiana Register) or material change in fact, the listing of multiple years is void upon such material change.

Reasons for Claiming Exemption or Reduction in Withholding

Please check at least one box specifying a reason for reduced or eliminated withholding. More than one box can be checked.

Each box has a number in parentheses after the explanation. The pass-through entity is required to list the code in Column A on the line of Schedule Composite or Schedule Composite-COR associated with the nonresident completing this affidavit. If more than one box is checked, the pass-through entity is required to list one of the allowable codes in Column A of the Schedule Composite or Schedule Composite-COR.

If you are claiming an exemption because of an allowable loss, you are required to specify each amount of loss that is potentially applicable against the income from the pass-through entity.

If you are claiming that you have a credit that (1) is from another entity or (2) is a carryforward from a previous year, regardless of whether the credit was generated by this pass-through entity, list each credit separately. Use the three-digit code assigned to the credit by the department. A list of available credits for a nonresident can be found in the relevant instruction booklet for the nonresident's normal return filing.



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