

This form must be completed and submitted to Brhiannon Schauf by October 29, 2021.

# **Indiana Department of Revenue**

# 2021 Tax Software Provider Indiana Department of Revenue Letter of Intent

Welcome to the Income Tax Letter of Intent (LOI). If your software company intends to submit electronic and/or paper returns to the Indiana Department of Revenue (DOR) you will need to complete this form and submit it to Brhiannon Schauf at altfilemgr@dor.in.gov.

By submitting this Letter of Intent (LOI) to the Indiana Department of Revenue, you agree to meet our standards for software provider registration, tax preparation software, and substitute forms. If you do not meet the standards and requirements explained in this LOI, we may deny your application or revoke your approved software provider status and reject all electronic and/or paper returns submitted using your products.

You must complete a separate LOI for each unique product your company offers. We may reject an incomplete Letter of Intent.

**Note:** If you are a new Software Provider who has not filed city/state income tax returns with any city or state agencies, you must have passed assurance testing with the IRS. Attach documentation from the IRS demonstrating you have successfully tested with the IRS.

### **Important dates**

The Indiana Department of Revenue has important key dates to ensure we are ready for the filing season and taxpayers can file anaccurate and timely tax return. Please note the following key dates:

- Complete and submit this form by October 29, 2021.
- Form's approval must be completed by March 31, 2022.
- Assurance testing (ATS) begins on October 1, 2021.

## **Company information**

List your company information.

Name of Company	Product Name	City/State Issued Software ID
DBA Name	NACTP Vendor ID	
Address	Product Address/URL	Company FEIN
City	State	Zip Code
If you have more than one product name, list yo	our other product names here:	

#### IRS issued electronic identification numbers

List your IRS electronic identification numbers.

Test EFIN(s)	Test ETIN(s)
Production EFIN(s)	Production ETIN(s)

### **Contact information**

List the contact information for each area identified.

Regulatory/Compliance Contact	Phone	Email Address
Primary Individual MeF Contact	Phone	Email Address
Secondary Individual MeF Contact	Phone	Email Address
Primary Business MeF Contact	Phone	Email Address
Secondary Business MeF Contact	Phone	Email Address
Primary Fiduciary (Estate/Trust) MeF Contact	Phone	Email Address
Secondary Fiduciary (Estate/Trust) MeF Contact	Phone	Email Address
Primary Leads Reporting Contact	Phone	Email Address
Secondary Leads Reporting Contact	Phone	Email Address
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# **Authorized access to the State Exchange System**

On page 11, provide information for each employee you are authorizing for access to the State Exchange System.

# Software products and tax types supported

Check all that apply.

Forms E-File
Forms E-File
Forms E-File
Forms E-File
Forms E-File

### **Rebranded software products**

Complete this section only if your product is rebranded.

For software to be considered rebranded, changes cannot be made to the software requirements and output(s). As the Software company selling and/or licensing your product to a third-party, it is your responsibility to make sure the rebranded product reflects the current software requirements and output(s). List each of your rebranded products below.

Use one of the following class codes for each product:

- Class Code 1: Software products sold/licensed to a third-party user and the third-party user can add their own logos and/or splash screens, but they cannot modify calculations in the program.
- Class Code 2: Software products sold/licensed to a third-party user and the third-party can modify calculations in the program.

Rebranded Product Name	Class Code	ETIN (if applicable)	Contact Person	Phone	Email Address
Rebranded Product Name	Class Code	ETIN (if applicable)	Contact Person	Phone	Email Address
Rebranded Product Name	Class Code	ETIN (if applicable)	Contact Person	Phone	Email Address
Rebranded Product Name	Class Code	ETIN (if applicable)	Contact Person	Phone	Email Address
Rebranded Product Name	Class Code	ETIN (if applicable)	Contact Person	Phone	Email Address

Attach additional sheets if needed.

For Rebranded Products, the Indiana Department of Revenue requires to complete the full e-file ATS/paper form approval process for both Class Code 1 and Class Code 2

### **Substitute forms registration**

attach it to this submission.

Complete this section only if your product will provide substitute forms.

Agency Substitute Forms Software Number				
Primary Individual Forms Contact	Phone	Email Address		
Trimary marviadari orms contact	THORE	Email / ladi ess		
Secondary Individual Forms Contact	Phone	Email Address		
Primary Business Forms Contact	Phone	Email Address		
Secondary Business Forms Contact	Phone	Email Address		
Note: If you have separate contacts for ea	ach business tax typ	e, please list them by tax type on a separate sheet and		

# Forms and schedules supported (check all that apply)

Check the boxes of the forms and schedules your company supports. If there is a check in the "mandated for E-file" column, your company is required to submit these returns electronically.

Tax Type and Forms	E-file Mandated	Forms	E-File	E-File Amended
Individual Income Tax				
IT-40 Return				
IT-40 Schedule 1-7				
IT-40 Schedule CT-40				
IT-40PNR Return				
IT-40PNR Schedule A-H				
IT-40PNR Schedule CT-40PNR				
IT-40PNR Schedule IN-PRO				
IT-40RNR Return				
Schedule IN-529				
Schedule IN-DEP				
Schedule IN-EIC				
Schedule CC-40				
Schedule IN-CR				
Schedule IN-H				
Schedule IN-2058SP				
Schedule IT-2210				
Schedule IT-2210A				
Schedule IT-2240				
Schedule IT-40NOL				
Schedule IT-40PNRA				
Schedule IT-40QEC				
Schedule IN-OPT				
ES-40				
IT-9				
SC-40				
Schedule IT-8453OL				
Schedule IT-8879				
IT-40ES				
PFC-IND				
Fiduciary Tax				
IT-41 Return				
IT-41 Schedule 1				
IT-41 Schedule IN K-1				
IT-41ES				

Corporate Tax		
IT-20 Return		
IT-20 Schedule F		
IT-20S Return		
IT-65 Return		
Schedule E		
Schedule E-7		
Schedule Composite		
Schedule Composite - COR		
Schedule 8-D		
Schedule IT-20FSD		
Schedule IT-20NOL		
Schedule IT-20PIC		
Schedule IT-20REC		
Schedule IT-2220		
Schedule M		
IT-8879C		
IT-6		
IT-6WTH		
PFC-COR		
E-6		
MISC. Forms		
NP-20 Return		
IT-20NP Return		
URT-1 Return		
FIT-20 Return		
FIT-20 Form FT-ES		
FIT-20 Schedule E-U		
FIT-20 Schedule FIT-20NOL		
FIT-20 Schedule FIT-NRTC		
FIT-20 Schedule H/Schedule FIT-2220		
Trust/WTH Forms		
WH3		
Common/Shared Forms		_
Schedule IN-EDGE		
Schedule IN-EDGE-R		
Schedule IN-OCC		
IT-20S/IT-65 Schedule IN K-1		

### **Agency requirements**

This section identifies agency requirements and expectations of new and existing Software Providers and the software product.

#### Issue notification and resolution requirements

This section represents the Indiana Department of Revenue issue notification and issue resolution standards.

Data breaches, security incidents, or other improper disclosures of taxpayer data that by law require reporting to the Indiana Attorney General Office must also be reported to the Indiana Department of Revenue.

### **Production return submission requirements**

All returns generated from this software must be e-filed or printed from the approved software or a subsequent product update.

#### **Product updates**

Desktop product users who attempt to file 10 or more business days after a production release must be required to download and apply the product update.

#### **Schemas**

Your software must follow the schema requirements. Find Indiana Department of Revenue schema requirements on the FTA State Exchange Site.

#### **System security requirements**

DOR is committed to the maximum protection of taxpayer information. To realize this goal, it follows National Institute of Standards and Technology (NIST) security guidance and uses Defense Information Security Agency (DISA) Security Technical Implementation Guides (STIG) checklists to technically implement it.

DOR requires tax e-filing vendors connecting to, transmitting data to, and receiving data from the DOR's network and systems to adhere to the same guidance. Vendors should review the Complete Security Roadmap, posted on [add the site where this will be posted he] for the explanation of how to comply with DOR's requirements. Questions should be directed to the DOR Security Team at IDOR\_Security\_Office@dor.in.gov.

#### **Testing and submissions**

All e-file ATS and substitute forms tests submitted during the approval process must be created in, and originate from, the actual software.

#### **Customer Notices**

This section identifies information Indiana Department of Revenue is requiring the software providers to communicate with customers.

#### Disclosure and use of information language expectations.

You must include the following consent language with electronic filing software.

#### For Do-It-Yourself software:

By using a computer system and software to prepare and file my tax return(s) electronically, I consent to the transmission of my return(s) and to the disclosure of all information about my use of the system and software to the Indiana Department of Revenue.

#### For Tax Professional software:

By using a computer system and software to prepare and file my client's return(s), I consent to the transmission of my client's return(s) and to the disclosure of all information about my use of the system and software Indiana Department of Revenue.

#### For Business software:

By using a computer system and software to prepare and file this business tax return(s), I consent to the transmission of the return(s) and to the disclosure of all information about the use of the system and software to the Indiana Department of Revenue.

#### Driver's license/ID card expectations

Indiana Department of Revenue is providing the following expectations and information:

#### For e-file returns:

Indiana Department of Revenue requests the DL/ID card be included with the tax return but won't reject it if it's not included.

# Acknowledgments and signature

I agree to provide true, accurate, current, and complete information. By signing this agreement, my company agreesto all the requirements listed in this document. The Indiana Department of Revenue reserves the right to deny, suspend or terminate my company's ability to submit returns.

AUTHORIZED REPRESENTATIVE PRINTED NAME	AUTHORIZED REPRESENTATIVE EMAIL ADDRE	ESS
AUTHORIZED REPRESENTATIVE SIGNATURE	AUTHORIZED REPRESENTATIVE PHONE NUMBER	DATE

# Complete this signature line if this is an amended Letter of Intent

AUTHORIZED REPRESENTATIVE SIGNATURE	AUTHORIZED REPRESENTATIVE PHONE NUMBER	AMENDED DATE

# Authorized access to the State Exchange System

Access to the State Exchange System should be limited to those with a business need. You are allowed up to six users.

Company name	First and last name	Email address
Phone number	Authorized access  Forms E-file	Tax types
Company name	First and last name	Email address
Phone number	Authorized access  Forms E-file	Tax types
Company name	First and last name	Email address
Phone number	Authorized access  Forms E-file	Tax types
Company name	First and last name	Email address
Phone number	Authorized access  Forms E-file	Tax types
Company name	First and last name	Email address
Phone number	Authorized access  Forms E-file	Tax types
Company name	First and last name	Email address
Phone number	Authorized access Forms E-file	Tax types
Company name	First and last name	Email address
Phone number	Authorized access Forms E-file	Tax types
Company name	First and last name	Email address
Phone number	Authorized access  Forms E-file	Tax types
Provide information for each employee y hould include all the tax types individua		Exchange System. The tax type box