## 2019 PA Department of Revenue Tax Software Provider Letter of Intent

By submitting this Letter of Intent (LOI) to the PA Department of Revenue, you are agreeing to meet our standards for software provider registration, all tax preparation software, and substitute forms. Agreement and adherence to the national standards are required as a prerequisite to approval.

Failure to meet the standards or requirements set forth in the national standards and requirements form or in this LOI may result in the denial of your application or the removal of your organization as an approved software provider, and the rejection of all electronic or paper returns submitted using your products.

Please complete a registration form for each unique product your company offers. If you submit an incomplete form, your request to participate in electronic or paper submissions may be denied.

Name of Company	Product Name		State Software ID
DBA Name	NACTP Member Number		State Tax Account Number (if applicable)
Address	Product Addre	ss/URL	Company FEIN
City	State		Zip Code
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 Leads Reporting Contact	Phone		Email Address
Secondary Leads Reporting Contact	Phone		Email Address
Test EFIN(s)	-	Test ETIN(s)	
Production EFIN(s)		Production ETIN(s)	

## **Authorized access to the State Exchange System**

Please provide a list of employees within your organization that you are authorizing to have access to the State Exchange System. The list you provide should include the following information:

- Company name, if different than company name at top of LOI
- First and last name of authorized individual(s)
- Email address
- Phone number
- Tax types they are authorized to access (indicate all or individual, corporate, estate/trust, payroll etc.)

**NOTE:** If the individuals are the same as what you've listed on the first page, please include them in this section as well.

Company name	First and last name	Email address	Phone number	Authorized access   Tax t	/pes
Company name	First and last name	Email address	Phone number	Authorized access Tax to Forms E-file	ypes
Company name	First and last name	Email address	Phone number	Authorized access  Forms  E-file	ypes
Company name	First and last name	Email address	Phone number	Authorized access Forms E-file	ypes
Type of softwa  DIY/Consumer  DIY/Consumer	(Web-Based)	zeu users ir necess	Professional/I	Paid Preparer (Web-Based) Paid Preparer (Desktop)	
Tax types supp Please check all th					
Es	dividual Income Tax state/Trust/Fiduciary Tax artnership Tax		s	orporate/Franchise Tax -Corporation Return ass-Through Partnership/S-Co	orp

## **Rebranded software products**

Complete this section if your product is rebranded. If there are more than five software products that have been rebranded under a different name, please list them on a separate sheet and attach it to this submission.

**Note:** In order for the software to be considered rebranded, changes cannot be made to the software requirements and output(s). It is your responsibility to make sure the rebranded product reflects the current software requirements and output(s).

Rebranded Product Name	Contact Person	Phone	Email Address	National Software ID *
Rebranded Product Name	Contact Person	Phone	Email Address	National Software ID *
Rebranded Product Name	Contact Person	Phone	Email Address	National Software ID *
Rebranded Product Name	Contact Person	Phone	Email Address	National Software ID *
Rebranded Product Name	Contact Person	Phone	Email Address	National Software ID *
*If not available at the time of LOI submission, please provide it when available				

For Rebranded Products, the PA Department of Revenue has the following requirements for e-file ATS approval

Rebranded Products are not required to complete e-file ATS/paper form approval

# Forms and schedules supported (check all that apply)

Check the forms and schedules that you are supporting.

<u>Individual</u>	<u>Fiduciary</u>	<u>Partnership</u>	<u>Corporate</u>
PA40	PA41	PA-20S/PA-65	RCT-101
PA Sch A	PA Sch A	P/M/S Directory	RCT-101I
PA Sch B	PA Sch B	PA Sch D-I	RCT-103
PA Sch C	PA Sch C	PA Sch D-II	RCT-106
PA Sch D	PA Sch D	PA Sch D-III	REV-798
PA Sch D-1	PA Sch D-1	PA Sch D-IV	REV-853
PA Sch D-71	PA Sch D-71	PA Sch E	REV-860
PA Sch E	PA Sch E	PA Sch RK-1	REV-861
PA Sch F	PA Sch F	PA Sch NRK-1	REV-934
PA Sch G-L	PA Sch G-L	PA Sch M	REV-986
PA Sch J	PA Sch J	PA Sch OC	REV-1175
PA Sch W-2S	PA Sch DD	PA Sch H-Corp	REV-1834
PA Sch SP	PA Sch RK-1	PA-65 Corp	
PA Sch UE	PA Sch NRK-1	PA Sch CP	
PA Sch RK-1	PA Sch N	PA Sch A	
PA Sch NRK-1	PA Sch O	PA Sch B	
PA Sch O	PA Sch OI	PA Sch H	
PA Sch OC	REV-1630F	PA Sch NW	
PA Sch P	PA Sch 41X	PA Sch J	
PA Sch T	REV-276	PA Sch T	
REV-1630		PA Sch I	
REV-1630A		PA Sch KOZ	
PA Sch 19		PA-65 ESR	
PA Sch NRH		REV-276	
PA Sch 40X			
REV-276			
REV-459B			
☐ W-2 RW			

## **Communication and Expectations**

#### **Documents and materials**

Pennsylvania Department of Revenue e-file form documentation will be provided at the following locations:

FTA State Exchange System (SES) for schemas

### **Refund expectations**

Pennsylvania Department of Revenue is providing a URL and/or a statement about refund processing. Industry partners must use this statement and/or URL or other method prescribed by the jurisdiction in all products. The messages must be shown to end-users within the software in a way to maximize the likelihood the message is read.

url: https://revenue-

pa.custhelp.com/app/answers/detail/a\_id/351/session/L3RpbWUvMTUzNDg3MjA5My9zaWQvKm1sOGJPVW4%3D

**Statement:** If you filed electronically it takes approximately 4 weeks to process your tax return. However, if the department needs to verify information reported on your return or request additional information, the process will take longer. After your overpayment is processed, it normally takes an additional 3 to 4 week for your refund to be mailed or direct deposited.

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

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

#### For e-file returns:

Pennsylvania Department of Revenue requires the DL/ID Card information be included with the tax return but will not reject the e-file return

Pennsylvania Department of Revenue is providing a URL and/or a statement for the DL/ID Card. All Do It Yourself (DIY) and Tax Professional software packages must include this information in your software. The messages are expected to be shown to end-users within the software in a way to maximize the likelihood the message is read.

url: http://www.revenue.pa.gov/OnlineServices/PersonalIncomeTaxe-Services/efile/Pages/default.aspx

**Statement:** As part of a national effort by states to combat stolen-identity tax fraud, software programs are asking tax filers to provide their driver's license number or state-issued identification card number with their filing. Providing this information gives the Department of Revenue an extra security measure to help prevent refund fraud related to identity theft. Your return will not be rejected if you do not have a driver's license or state-issued identification. Providing the number is strictly voluntary and may help speed the processing of your return.

## **Questions, Requirements, Standards and Recommendations**

This section represents jurisdiction questions, requirements, and standards for tax software providers.

## **Specific questions**

- Do you support unlinked jurisdictional returns?
   a. Yes
   b. No
- 2. What refund products or payment vehicles do you offer your customers? If you partner with an entity to provide refunds, please provide the names and bank routing numbers (RTNs) of each company. Attach a separate sheet if necessary.

# **Filing Instruction**

Please e-mail your completed LOI for 2019 to the following:

For Individual and Fiduciary: RA-RV-BIT-MeF@pa.gov

For Corporate and S-Corporation: RA-FedStTestCorp1120@pa.gov

For Partnership and Pass-Through Partnership/S-Corp: RA-FedSt-TP1065@pa.gov

Acknowledgments and signature					
	I acknowledge all e-file ATS tests submitted during the approval process are created in, and originate from, the actual software.				
	I acknowledge all electronic returns received by Pennsylvania Department of Revenue generated from this software will be electronically filed from the initially approved product version, or a subsequent product update.				
	I acknowledge all paper returns received by Pennsylvania Department of Revenue generated from this software will be printed from the approved product version, or a subsequent product update.				
	I acknowledge Pennsylvania Department of Revenue will be notified of any incorrect and/or missing calculation or e-file data element for any paper or electronic returns submitted to Pennsylvania Department of Revenue.				
I acknowledge users/customers of desktop products who attempt to e-file 10 or more business days after a production release will be required to download and apply the product update.					
I agree to provide true, accurate, current, and complete information. By signing this agreement, my company agrees to all of the requirements listed in this document. The Pennsylvania Department of Revenue reserves the right to deny, suspend or terminate my company's ability to submit returns.					
AUTH	ORIZED REPRESENTATIVE PRINTED NAME	AUTHORIZED REPRESENTATIVE EMAIL ADDRI	ESS		
AUTH	ORIZED REPRESENTATIVE SIGNATURE	AUTHORIZED REPRESENTATIVE PHONE NUMBER	DATE		
Complete this signature line if this is an amended Letter of Intent					
AUTH	ORIZED REPRESENTATIVE SIGNATURE	AUTHORIZED REPRESENTATIVE PHONE NUMBER	AMENDED DATE		