



| Pass-Through Entity Information | | | | | | |
|---------------------------------------|----------|--|--|--|--|--|
| Name of Entity | FEIN | | | | | |
| Address | | | | | | |
| City, State, ZIP Code | | | | | | |
| Type of Pass-Through Entity: | | | | | | |
| Partnership S Corporation Estate True | ıst | | | | | |
| 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. | | | | | | | |
|--|---|--|---|---|--|--|--|
| | _ | | | | | | |
| | Claimed | | | | _ | | |
| | Passive activity losses (list amount allowable) (10) | | | | _ | | |
| | Claimed | | | | _ | | |
| | Indiana net operating losses (list amount allowable) (11) | | | 1) | _ | | |
| | Claimed | | | | | | |
| The tax owed by the entity is reduced by either Indiana credit carryforwards or Indiana credits from othe sources. List the credit, amount, the year in which the credit was earned, and the FEIN or Social Securit number of the source. (12) | | | | | | | |
| (3- | Credit digit code) | Amount | Year Earned | FID of Source | | | |
| | | | | | | | |
| | | | | | | | |
| do ł List | business in Indiana the FID if the corp | a and is remitting es poration otherwise s | stimated payments of | on the income from th g is different than the | a Secretary of State to the pass-through entity. a corporation reporting | | |
| any tax that I co and righ to adjus requests State Re | due as a result of nsent to the jurisd ts of appeal. I furtl tments resulting fr s, and amended re evenue ("Departme | the pass-through er iction of the state of her agree that this v om Indiana or feder aturns. This agreem | ntity's income derive f Indiana with regard vaiver of withholding al adjustments, incl ent may be revoked | ed from Indiana sourc d to any income, retur g does not apply if a p uding audits, adminis | n filing, assessment, partnership is subject strative adjustment adiana Department of | | |
| Name: _ | | | Name (printe | ed): | | | |
| Title (if a | 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 <u>required</u> 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 passthrough 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.

