XML Schema Definition: ALC-PS

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								for bulk filing. Refer to the directions for each section to find out which fields are required and which are opt			
	2. This of	docume	nt describ	es how	each fiel	d should be populated (e	e.g., calculations, constants).				
									<u> </u>		
Schema	Element	I		1	1	1		M	aps To		
	Parent	Child	Grand child	Great- grand child	Great- great- grand child	Great-great-grand child	Contents/Reject Rules	Form Id	Source Field for this data:		
ORTran	smission	•		•			All the fields listed below in the IDORTransmission Section are required. Any additional fields that are in the schema header are not required.				
	Count						This is an attribute and the value should always be "1".		Constant		
	xsmnSch	ssmnSchemaVersion					This is an attribute and the value should always be "IDORSpecialTaxTransmission2014V1.0".		Constant		
	Transmis	sionId					Must be the DOR assigned vendor code (VendorCD) concatenated with the Julian Date concatenated with a six digit unique identifier, generally sequential.				
	VendorCo	endorCd					DOR will provide this code during the Bulk File registration and certification process.		Constant		
	ProcessT ReturnSta	<i>,</i> ,					T for TEST or P for Production file.		Constant		
							This is an attrribute and the value should always be "IDORSpecialTax2014V1.0"		Constant		
		Return	HeaderSta	ıte							
			Jurisdicti	on			Two Character State Code = IN		Constant		
			TimeSta	mp			Date/Time Stamp of the transmission. All Timestamps should look like this: YYYY-MM-DDTHH:MM:SSZ. The embedded "T" and "Z" are required. Use the System Time of your job to set it.				
		TaxPeriodBeginDate					The first day of the period month being filed. Format is YYYY-MM-DD. Example: For an October 2014 return this element would be 2014-10-01.	ALC-PS	Tax Period being filed.		
		TaxPeriodEndDate			е		The last day of the period month being filed. Format is YYYY-MM-DD. Example: For a October 2014 return this element would be 2014-10-31.	ALC-PS	Tax Period being filed.		
			TaxYear				YYYY format will contain the tax year being processed. Example: 2014	ALC-PS	Tax Year being filed		
			Preparer	•							
				Name			Name of person who approves this electronic submission.				
	SSN or PTIN				PTIN		The SSN or the PTIN of the person who approves this electronic submission. You are not required to put an individual's SSN. You are permitted to put any 9 numbers. For example, "111111111." Do not include hyphens.				
				Phone			The phone number of the person who approves this electronic submission. Do not include hyphens.				
				EmailAd	ldress		The email address of the person who approves this electronic submission.				
			Originato	or							
				EFIN			"123456"		Constant		
				Туре			"ERO"		Constant		
			Software				"SUBMITTER"		Constant		
			ReturnTy	/pe			"ALCPS"	ALC-PS	Constant		

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Schema	Element							N		
	Parent C		child	Great- grand child	Great- great- grand child	Great-great-great-grand child	Contents/Reject Rules	Form Id	Source Field for this data:	
			Filer							
				Busines	sEntity					
					FEIN		Federal ID number of taxpayer. Do not include hyphens.	ALC-PS	FID Number	
					EntityNa	ıme				
						BusinessNameLine1	The entity name as it appears on the Indiana Alcoholic Beverage Permit. The XML will not accept the following special characters: comma (,), period (.), semi-colon (;), colon (:), plus sign (+), and equal sign (=).	ALC-PS	Name	
				Address						
					USAddr	ess				
						AddressLine1	Business street address (physical address)	ALC-PS	Physical Street Address	
		l			1	City	City (physical address)	ALC-PS	Physical City	
	i e	l	t	l	1	State	State (physical address)	ALC-PS	Physical State	
						ZipCode	Zip (physical address)	ALC-PS	Physical Zip Code	
				StateId			Ten digit Indiana Taxpayer ID code	ALC-PS	IN TID Number	
				LocNbr			Three digit Indiana business location code			
			EmailAdo	dress			Provide the email address of the person DOR should contact if there is a problem with this electronic submission.			
			FilingMet	hodCd			"ELF"		Constant	
			ReturnSc				"FTP"		Constant	
			InputSou	rceMetho	odCd		"BULK"		Constant	
		FormVersionCode			"0614"	ALC-PS	ALC-PS Form Revision Month and Year			
			TaxType	Cd			"ALC"		Constant	
		SubmissionId			Submission Id is generated by using the following format: Prefix of T for Test file or P for Production file, Followed by Department assigned id number plus six digit unique sequence number.					
		Return	DataState							
			FormALC	PS						
				ReturnS	ectionA		All the fields in ReturnSectionA are required. If you have no activity to report for the month you must specify either "ONA" or "ANA" for the ReturnFilingType.			
		ReturnFilingTyp		ılingType	Return Filing Type Valid codes are: "O" = Original, "A" = Amended, "ONA" = Original - No Activity, "ANA" = Amended - No Activity		Constant			
				ReturnS	ectionB		If you have a ReturnFilingType of "O" or "A", please follow the directions below to determine the value of each field. If you have no activity to report for the month (i.e. a ReturnFilingType of "ONA" or "ANA"), then do not include ReturnSectionB in your transmission.			
						ScheduleRepeatSection				

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Schema	Element							N	Maps To	
	Parent	Child	Grand child	grand child	Great- great- grand child	Great-great-great-grand child		Form Id	Source Field for this data:	
						AlcoholType	Alcohol type being invoiced. Valid codes are: "W" for wine, "L" for liquor, "B" for beer, "C" for cider"	ALC-PS	Alcohol Type (1.)	
						DocumentType	Document Type Valid codes are: "C" = Confirmation, "I" = Invoice, "O" = Other, "PO" = Purchase Order, "CM" = Credit Memo, "A" = Affidavit, "RG" = Returned Goods Authorization	ALC-PS	Document Type (2.)	
						DocumentDate	Format is YYYY-MM-DD.	ALC-PS	Document Date (3.)	
						DocumentNumber	Document Number assigned to each sale to wholesaler.	ALC-PS	Document Number (4.)	
						PermitNumber	Indiana Alcohol Beverage Permit Number of wholesaler making the purchase.	ALC-PS	Alcoholic Beverage Permit Number (5.)	
						FID	FEIN for wholesaler making the purchase.	ALC-PS	Federal Identification Number (6.)	
						Name	Entity/business name of the wholesaler.	ALC-PS	Name (7.)	
						Address	Street address of the wholesaler.	ALC-PS	Address (8.)	
						City	City of the wholesaler.	ALC-PS	Address (8.)	
						State	State of the wholesaler.	ALC-PS	Address (8.)	
						ZipCode	Zip code of the wholesaler.	ALC-PS	Address (8.)	
						Gallons	Total gallons per document number. Round gallons to four decimal places (0.0000).	ALC-PS	Total Gallons (9.)	
Revisio	ns:									
/8/2014				•						
	d Instructi									
	Instruction									
Added	content to	IDORTra	ınsmissioı	n (Row 7)	in Conte	nts/Reject Rules column.				

- 4. Changed content to SSN or PTIN (Row 23) in Contents/Reject Rules column.
- 5. Changed content to Phone (Row 24) in Contents/Reject Rules column.
- 6. Changed content to FEIN (Row 33) in Contents/Reject Rules column.
- 7. Changed content to BusinessNameLine1 (Row 35) in Contents/Reject Rules column.
- 8. Added content to ReturnSectionA (Row 53) in Contents/Reject Rules column.
- 9. Added content to ReturnSectionB (Row 55) in Contents/Reject Rules column.