

XML Schema Definition: CIG-RM

| General Instructions: | | | | | | | | | |
|--|---------------------------------|-------|-------------|-------------------|-------------------------|--|---------|--|--|
| 1. This document provides the list of all the fields that are applicable for bulk filing. Refer to the the directions for each section to find out which fields are required and which are optional. | | | | | | | | | |
| 2. This document describes how each field should be populated (e.g. calculations, constraints) | | | | | | | | | |
| Schema | Element | | | | | Contents/Reject Rules | Form Id | Maps To | |
| | Parent | Child | Grand child | Great-grand child | Great-great-grand child | | | Source Field for this data: | |
| IDORTransmission | Count | | | | | All the fields listed below in the IDORTransmission Section are required. Any additional fields that are in the schema header are not required. | | | |
| | xsmnSchemaVersion | | | | | This is an attribute and the value should always be "1". | | Constant | |
| | TransmissionId | | | | | This is an attribute and the value should always be "IDORSpecialTaxTransmission2022". | | Constant | |
| | VendorCd | | | | | Must be the DOR assigned vendor code (VendorCd) concatenated with the Julian Date concatenated with a six digit unique identifier, generally sequential. | | | |
| | ProcessType | | | | | DOR will provide this code during the Bulk File registration and certification process. | | Constant | |
| | ReturnState | | | | | "P" | | Constant | |
| | stateSchemaVersion | | | | | This is an attribute and the value should always be "IDORSpecialTax2022" | | Constant | |
| | ReturnHeaderState | | | | | | | | |
| | Jurisdiction | | | | | Two character state code = IN | | Constant | |
| | TimeStamp | | | | | 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 2022 return this element would be 2022-10-01. | CIG-RM | Tax Period being filed | |
| | TaxPeriodEndDate | | | | | The last day of the period month being filed. Format is YYYY-MM-DD. Example: For an October 2022 return this element would be 2022-10-31. | CIG-RM | Tax Period being filed | |
| | TaxYear | | | | | YYYY format will contain the tax year being processed. Example: 2022 | CIG-RM | Tax being year filed | |
| | Preparer | | | | | | | | |
| | Name | | | | | Name of person who approves this electronic submission | | | |
| | SSN or 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. | | | |
| | EmailAddress | | | | | The email address of the person who approves this electronic submission. | | | |
| | Originator | | | | | | | | |
| | EFIN | | | | | "123456" | | Constant | |
| | Type | | | | | "ERO" | | Constant | |
| | SoftwareId | | | | | "SUBMITTER" | | Constant | |
| | ReturnType | | | | | "CIGRM" | | Constant | |
| | File | | | | | | | | |
| | BusinessEntity | | | | | | | | |
| | FEIN | | | | | Federal ID number of taxpayer. Do not include hyphens. | | | |
| | EntityName | | | | | | | | |
| | BusinessNameLine1 | | | | | The Entity name. The XML will not accept the following special characters: comma (,), period (.), semi-colon (;), colon (:), plus sign (+), and equal sign (=). | | | |
| | Address | | | | | | | | |
| | USAddress | | | | | | | | |
| | AddressLine1 | | | | | Business street address (physical address) | | | |
| | City | | | | | City (physical address) | | | |
| | State | | | | | State (physical address) | | | |
| | ZipCode | | | | | Zip (physical address) | | | |
| | StateId | | | | | Ten-digit Indiana Taxpayer ID code. | | | |
| | LocNbr | | | | | Three-digit Indiana business location code. | | | |
| | EmailAddress | | | | | Provide the email address of the person DOR should contact if there is a problem with this electronic submission. | | | |
| | FilingMethodCd | | | | | "ELF" | | Constant | |
| | ReturnSourceCd | | | | | "FTP" | | Constant | |
| | InputSourceMethodCd | | | | | "BULK" | | Constant | |
| | FormVersionCode | | | | | "0722" | | Constant | |
| | TaxTypeCd | | | | | "CIG" | | Constant | |
| | SubmissionId | | | | | Submission id is generated by using the following format: Prefix T for Test file or P for Production file, Followed by Department assigned id number plus six digit unique sequence number. | | | |
| | ReturnDataState | | | | | | | | |
| | FormCIGRM | | | | | | | | |
| | CIGRMReturnSection | | | | | | | | |
| | ReturnFilingType | | | | | Required: Valid codes are "O" = Original, "A" = Amended, "ONA" = Original No Activity, "ANA" = Amended No Activity. | | | |
| | CIGSSBeginInvSection | | | | | All fields in CIGSSBeginInvSection are required. If you have no activity to report for the month you must specify either "ONA" or "ANA" for ReturnFilingType. You must also enter zero in all fields, otherwise the file will be rejected. | | | |
| | BeginningCount | | | | | Beginning Inventory Count: The physical inventory number of unaffixed Indiana Stamp 20 and Indiana Stamp 25 from the previous month's ending inventory. | CIG-SS | Beginning Inventory Count | |
| | BeginningGrossValue | | | | | Beginning Inventory Gross Value: The total gross value of unaffixed Indiana Stamp 20 and Indiana Stamp 25 from the previous month's ending inventory. | CIG-SS | Beginning Inventory Gross Value | |
| | CIGSSPurchasesSection | | | | | If you have no activity to report for the month you must specify either "ONA" or "ANA" for ReturnFilingType. You must also enter zero in all fields, otherwise the file will be rejected. | | | |
| | CIGSSPurchasesRepeatSection | | | | | | | | |
| | PurchaseDateReceived | | | | | Date of the transaction listed on the given document. Format is YYYY-MM-DD | CIG-SS | Date Received | |
| | PurchaseOrderConfirmationNumber | | | | | The purchase order confirmation number for the cigarette stamps received | CIG-SS | Purchase Order/ Confirmation Number | |
| | PurchaseRollIDSequenceNumber | | | | | The roll ID number or sequence number associated with the stamps received | CIG-SS | Roll ID/ Sequence Number | |
| | PurchaseTaxJurisdiction | | | | | Always enter "IN" as the applicable tax jurisdiction code. | CIG-SS | Tax Jurisdiction | |
| | PurchasesAttribute | | | | | Not Required | CIG-SS | Attribute | |
| | PurchaseUnitOfMeasure | | | | | Enter "20" for packs of 20 or "25" for packs of 25 | CIG-SS | Unit of Measure | |
| | PurchaseCount | | | | | Total count for the cigarette stamps being reported | CIG-SS | Count | |
| | PurchaseGrossValue | | | | | Gross value of each type of cigarette stamp where shown | CIG-SS | Gross Value | |
| | CIGSSAdJSection | | | | | If you have no activity to report for the month you must specify either "ONA" or "ANA" for ReturnFilingType. You must also enter zero in all fields, otherwise the file will be rejected. | | | |
| | CIGSSAdJRepeatSection | | | | | | | | |
| | AdjDocumentDate | | | | | Date the adjustment was made | CIG-SS | Date | |
| | AdjExplanation | | | | | Brief explanation to support the adjustment | CIG-SS | Explanation | |
| | AdjTaxJurisdiction | | | | | Always enter "IN" as the applicable tax jurisdiction code. | CIG-SS | Tax Jurisdiction | |
| | AdjAttribute | | | | | Not Required | CIG-SS | Attribute | |
| | AdjUnitOfMeasure | | | | | Enter "20" for packs of 20 or "25" for packs of 25 | CIG-SS | Unit of Measure | |
| | AdjCount | | | | | Total count for the cigarette stamps being reported | CIG-SS | Count | |
| | AdjGrossValue | | | | | Gross value of each type of cigarette stamp where shown | CIG-SS | Gross Value | |
| | AdjType | | | | | Type of adjustment given. Adjustment types are: Damaged, Destroyed, Floor Stock, Small Cigar, Counting Error, Returned, Shipment Error, Stolen, Transfer, Shrinkage, Timing | CIG-SS | Type | |
| | CIGSSEndInvSection | | | | | | | | |
| | PhysicalEndingCount | | | | | The total physical count of unaffixed Indiana Stamp 20 and Indiana Stamp 25 at the close of business on the last working day of the reporting period | CIG-SS | Physical Ending Inventory of Cigarette Stamps, Count | |
| | PhysicalEndingGrossValue | | | | | The total gross value of the unaffixed Indiana Stamp 20 and Indiana Stamp 25 at the close of business on the last working day of the reporting period. | CIG-SS | Physical Ending Inventory of Cigarette Stamps, Gross Value | |
| | TotalAffixedCount | | | | | The total number of stamps affixed for Indiana. Beginning inventory, plus purchases, less adjustments, less physical ending inventory | CIG-SS | Total Cigarette Stamps Affixed, Count | |
| | TotalAffixedGrossValue | | | | | The gross value of the number of stamps affixed for Indiana | CIG-SS | Total Cigarette Stamps Affixed, Gross Value | |
| | CIGSSBeginInvSection | | | | | | | | |
| | TotalCigarettes | | | | | Required. Total cigarette sticks from the previous month's inventory | CIG-IS | Beginning Inventory, Total Cigarettes (Number of Sticks) | |

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| Schema | Element | | | | | Contents/Reject Rules | Maps To | |
|--------|---------|-------|-------------|-----------------------------------|--|-----------------------|--|-----------------------------|
| | Parent | Child | Grand child | Great-grand child | Great-great-grand child | | Form Id | Source Field for this data: |
| | | | | CIGISAdjSection | | | | |
| | | | | CIGISAdjRepeatSection | | | | |
| | | | | AdjType | Type of adjustment given. Adjustment types are: Damaged, Destroyed, Floor Stock, Small Cigar, Counting Error, Returned, Shipment Error, Stolen, Transfer, Shrinkage, Timing | CIG-IS | Type | |
| | | | | AdjFedDescription | Type of cigarette based on the federal definition: Cigarette or Small Cigar | CIG-IS | Fed Desc | |
| | | | | AdjMSAStatus | OPM, SPM, or NPM. Indicating if the cigarette was manufactured by an original participating, subsequent participating, or non-participating to the Master Settlement Agreement | CIG-IS | MSA Status | |
| | | | | AdjTaxJurisdiction | Enter the applicable tax jurisdiction code. | CIG-IS | Tax Jurisdiction | |
| | | | | AdjUPCNumber | Universal Product Code assigned to the product brand reported. | CIG-IS | UPC Number | |
| | | | | AdjUnitOfMeasure | Unit of Measure of the UPC being reported: "PAK" = Pack, "CAR" = Carton, "CSE" = Case | CIG-IS | UPC's Unit of Measure(UOM) | |
| | | | | AdjManufacturer | Manufacturer of the product reported | CIG-IS | Manufacturer | |
| | | | | AdjBrand | Brand family of the product reported. This should agree with the UPC identified in the UPC number field | CIG-IS | Brand Family | |
| | | | | AdjQuantity | Total quantity of the packs being reported. | CIG-IS | Quantity | |
| | | | | AdjSticksPerPack | Total number of sticks per pack you are reporting | CIG-IS | Sticks Per Pack | |
| | | | | AdjTotalCigarettes | Total number of cigarettes reported | CIG-IS | Total Cigarettes(No. of Sticks) | |
| | | | | CIGISEndInvSection | | | | |
| | | | | CIGISScheduleRepeatSection | | | | |
| | | | | PhysicalFedDesc | Type of cigarette based on the federal definition: Cigarette or Small Cigar | CIG-IS | Fed Desc | |
| | | | | PhysicalMSAStatus | OPM, SPM, or NPM. Indicating if the cigarette was manufactured by an original participating, subsequent participating, or non-participating to the Master Settlement Agreement | CIG-IS | MSA Status | |
| | | | | PhysicalTaxJurisdiction | Enter the applicable tax jurisdiction code. | CIG-IS | Tax Jurisdiction | |
| | | | | PhysicalUPCNumber | Universal Product Code assigned to the product brand reported. | CIG-IS | UPC Number | |
| | | | | PhysicalUnitOfMeasure | Unit of Measure of the UPC being reported: "PAK" = Pack, "CAR" = Carton, "CSE" = Case | CIG-IS | UPC's Unit of Measure(UOM) | |
| | | | | PhysicalManufacturer | Manufacturer of the product reported | CIG-IS | Manufacturer | |
| | | | | PhysicalBrand | Brand family of the product reported. This should agree with the UPC identified in the UPC number field | CIG-IS | Brand Family | |
| | | | | PhysicalQuantity | Total quantity of the packs being reported. | CIG-IS | Quantity | |
| | | | | PhysicalSticksPerPack | Total number of sticks per pack you are reporting | CIG-IS | Sticks Per Pack | |
| | | | | PhysicalTotalCigarettes | Total number of cigarettes reported | CIG-IS | Total Cigarettes(No. of Sticks) | |
| | | | | CIGTSPurchasedSoldSection | | | | |
| | | | | CIGTSPurchasedSoldRepeatSection | | | | |
| | | | | ScheduleCode | Code that describes the movement of product: 1A, 1B, 1C, 1D, 2A, 2B, 2C, 2D | CIG-TS | Schedule Code | |
| | | | | DocumentDate | Date provided on the vendor/customer invoice. If multiple dates listed, use the date the product was picked up by the carrier for delivery. | CIG-TS | Document Date | |
| | | | | DocumentType | Code for document type: Invoice, Purchase Order, Credit Memo, Affidavit, Returned Goods Authorization, Bill of Lading, Confirmation | CIG-TS | Document Type | |
| | | | | DocumentNumber | Invoice or Document number as provided | CIG-TS | Document Number | |
| | | | | PurchaserSellerType | Type of customer: Subjobber, Employee, Customer, Wholesaler, Delivery Seller, Native American, Government, Military, InterBranch Transfer, Distribution Center | CIG-TS | Type of Customer | |
| | | | | PurchaserSellerName | Name of the entity purchased from | CIG-TS | Name | |
| | | | | PurchaserSellerFEIN | Customer FEIN | CIG-TS | Customer FEIN | |
| | | | | PurchaserSellerTaxIDNum | Not Required | CIG-TS | Customer ID | |
| | | | | PurchaserSellerAddress | Customer Street Address | CIG-TS | Street Address | |
| | | | | PurchaserSellerCity | Customer City | CIG-TS | City | |
| | | | | PurchaserSellerState | Customer State | CIG-TS | State | |
| | | | | PurchaserSellerCountry | Customer Country | CIG-TS | Country | |
| | | | | PurchaserSellerZip | Customer Zip | CIG-TS | ZIP Code | |
| | | | | CIGTSTransactionSection | | | | |
| | | | | CIGTSTransactionRepeatSection | | | | |
| | | | | ScheduleCode | Code that describes the movement of product: 1A, 1B, 1C, 1D, 2A, 2B, 2C, 2D | CIG-TS | Schedule Code(From matching purchaser) | |
| | | | | DocumentNumber | Invoice or Document number as provided | CIG-TS | Document Number(From matching purchaser) | |
| | | | | SaleFedDescription | Type of cigarette based on the federal definition: Cigarette or Small Cigar | CIG-TS | Fed Desc | |
| | | | | SaleMSAStatus | OPM, SPM, or NPM. Indicating if the cigarette was manufactured by an original participating, subsequent participating, or non-participating to the Master Settlement Agreement | CIG-TS | MSA Status | |
| | | | | SalePrice | Sale price of the cigarettes | CIG-TS | Price | |
| | | | | SaleTaxJurisdiction | Enter the applicable tax jurisdiction code. | CIG-TS | Tax Jurisdiction | |
| | | | | SaleUPCNumber | Universal Product Code assigned to the product brand reported. | CIG-TS | UPC Number | |
| | | | | SaleUPCUOM | Unit of Measure of the UPC being reported: "PAK" = Pack, "CAR" = Carton, "CSE" = Case | CIG-TS | UPC's Unit of Measure(UOM) | |
| | | | | SaleManufacturer | Manufacturer of the product reported | CIG-TS | Manufacturer | |
| | | | | SaleManufacturerFEIN | Manufacturer FEIN | CIG-TS | Manufacturer FEIN | |
| | | | | SaleBrand | Brand family of the product reported. This should agree with the UPC identified in the UPC number field | CIG-TS | Brand Family | |
| | | | | SaleQuantity | Total quantity of the packs being reported. | CIG-TS | Quantity | |
| | | | | SaleSticksPerPack | Total number of sticks per pack you are reporting | CIG-TS | Sticks Per Pack | |
| | | | | SaleTotalCigarettes | Total number of cigarettes reported | CIG-TS | Total Cigarettes(No. of Sticks) | |
| | | | | CIGTSDeliverySection | | | | |
| | | | | CIGTSDeliverySectionRepeatSection | | | | |
| | | | | DocumentNumber | Invoice or Document number as provided | CIG-TS | Document Number(From matching purchaser) | |
| | | | | DeliveryName | Company name of delivery service | CIG-TS | Name | |
| | | | | DeliveryAddress | Location address of delivery service | CIG-TS | Street Address | |
| | | | | DeliveryCity | City of delivery service | CIG-TS | City | |
| | | | | DeliveryState | State of delivery service | CIG-TS | State | |
| | | | | DeliveryZIP | ZIP of delivery service | CIG-TS | ZIP | |
| | | | | DeliveryCountry | Country of delivery service | CIG-TS | Country | |
| | | | | DeliveryPhoneNumber | Phone number of delivery service | CIG-TS | Telephone Number | |
| | | | | DeliveryFEIN | FEIN of delivery service | CIG-TS | FEIN | |