

STATE OF ALABAMA

OFFICE OF INFORMATION TECHNOLOGY



FORM 640F1: FTI Confidentiality Statement

I. Authorized Use

Employees and contractors must maintain their authorization to access Federal Tax Information (FTI) through annual training and recertification. Prior to granting an agency employee or contractor access to FTI, each employee or contractor must certify his or her understanding of the agency's security policy and procedures for safeguarding IRS information by completing the training requirements as defined in Procedure 640P1: FTI Disclosure Awareness Training and IRS Publication 1075.

II. Consequences of Failure to Report Disclosure of FTI

An employee or contractor found to be in violation of the requirements of this agreement may face disciplinary action, up to and including termination. This action would, at a minimum, result in termination of the agreement allowing the individual to access FTI. In addition, the user may also face disciplinary action by their agency or State Personnel. In extreme cases, the user could face criminal or civil action based on state or federal laws regarding the care and use of FTI. Consequences may include fines and imprisonment as imposed under The Code of Alabama 1975, Title 40, Chapter 2A, Section 10 and United States Code, Sections 7213, 7213A, and 7431.

III. Acknowledgment and Agreement

By signing this FTI Confidentiality Statement, I agree to abide by each point listed above and certify that I have completed FTI Disclosure Awareness Training and understand Procedure 640P1: FTI Disclosure Awareness Training, the procedure governing this agreement. I understand that by failing to abide by this agreement that I will be subject to the consequences as defined herein, in addition to any disciplinary actions deemed appropriate by my supervisor, my agency/employer, or by State Personnel.

IV. Statement of Understanding

I (PRINT NAME): _______ understand upon discovering a possible improper inspection or disclosure of FTI, including breaches and security incidents, I must follow the proper incident reporting requirements to ensure the Office of Safeguards and the Treasury Inspector General for Tax Administration are notified of a possible issue involving FTI.

Employee Signature: _____

_____Date: _____

Certification Type (check one): \Box Initial or \Box Annual (recertification)

Form Routing and Retention: Forms, initial and annual recertification, shall be retained by the employee's agency for at least five years. After such time, form may be destroyed per agency policy on disposition of employee records. Forms may, upon request, be inspected by the Office of Information Technology or other authorized auditor to verify compliance.