

Enter your Social Security Number.

AMOUNTS DUE LOUISIANA	40	AMOUNT YOU OWE – If Line 24 is greater than Line 32, subtract Line 32 from Line 24.	<input type="text"/>
	41	ADDITIONAL DONATION TO THE MILITARY FAMILY ASSISTANCE FUND	<input type="text"/>
	42	ADDITIONAL DONATION TO THE COASTAL PROTECTION AND RESTORATION FUND	<input type="text"/>
	43	ADDITIONAL DONATION TO LOUISIANA FOOD BANK ASSOCIATION	<input type="text"/>
	44	INTEREST – From the Interest Calculation Worksheet, Line 5.	<input type="text"/>
	45	DELINQUENT FILING PENALTY – From the Delinquent Filing Penalty Calculation Worksheet Line 7.	<input type="text"/>
	46	DELINQUENT PAYMENT PENALTY – From Delinquent Payment Penalty Calculation Worksheet Line 7.	<input type="text"/>
	47	UNDERPAYMENT PENALTY – See the instructions for Underpayment Penalty and Form R-210NR. If you are a farmer, check the box. <input type="checkbox"/>	<input type="text"/>
48	BALANCE DUE LOUISIANA – Add Lines 40 through 47. If mailing to LDR, use address 1 below. For electronic payment options, see page 3 of the instructions.	PAY THIS AMOUNT.	<input type="text"/>

IMPORTANT!

DO NOT SEND CASH.

All four (4) pages of this return **MUST** be mailed in together along with your W-2s and completed schedules. Please paperclip. **Do not staple.**

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. If I made a contribution to the START Savings Program, I consent that my Social Security Number may be given to the Louisiana Office of Student Financial Assistance to properly identify the START Savings Program account holder. If married filing jointly, both Social Security Numbers may be submitted. I understand that by submitting this form I authorize the disbursement of individual income tax refunds through the method as described on Line 39.

Your Signature	Date (mm/dd/yyyy)	Spouse's Signature (If filing jointly, both must sign.)	Date (mm/dd/yyyy)
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PAID PREPARER USE ONLY	Print/Type Preparer's Name		Preparer's Signature		Date (mm/dd/yyyy)	Check if Self-employed
	Firm's Name ▶				Firm's FEIN ▶	
	Firm's Address ▶				Telephone ▶	

Enter the first 4 letters of your last name in these boxes.

**Individual Income Tax Return
Calendar year return due 5/15/2021**

PTIN, FEIN, or LDR Account Number of Paid Preparer

{ Address }

1

Mail Balance Due Return with Payment
TO: Department of Revenue
P. O. Box 3550
Baton Rouge, LA 70821-3550

2

Mail All Other Individual Income Tax Returns
TO: Department of Revenue
P. O. Box 3440
Baton Rouge, LA 70821-3440

For Office Use Only.

WEB

62168

