## Third Quarter Employer's Return of Louisiana Withholding Tax Form L1

Mail your Return and Payment to: Louisiana Department of Revenue

P.O. Box 91017 Baton Rouge, LA 70821-9017 We encourage you to file and pay electronically at www.revenue.louisiana.gov

Tax Year **2021** 

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Tax Period	Due Date
09/30/2021	10/31/2021

**WEB** 

Account Number				DIFACE	DETUDN EN	TIDE DAGE
				PLEASE	RETURN EN	TIRE PAGE
employer who withhold from wages of employer to withhold and pay ar amounts.  Each return covers on deadline. A quarterly requarter or if wages paid When and how should Payments must be madd the last period of the qumust be submitted with a When is the L-1 Return Quarterly and Monthly pfollowing month after the 1st Quarter 3rd Quarter	payers should submit Form L- e close of the calendar quart .April 30 <sup>th</sup> 2 <sup>nd</sup> Qu ctober 31 <sup>st</sup> 4 <sup>th</sup> Qu a weekend or holiday, the rel	withhold Louisiana I return. Any emploied is personally lia and must be filed to taxes are withhe cient to require withle my employees? payment frequency, the L-1 return. All other. I with payment on the control of t	income tax yer who fails able for such by the filing Id during the holding.  Payments for her payments he last day of re as follows: July 31st ary 31, 2022	Lines 1-3 Enter the amount of withheld from the wages of your Line 4 Add Lines 1, 2 and 3. This Line 5 Calculate the total am department during the quarter.  Lines 6 and 7 Self-explanatory How do I amend an L-1?  Form L-1 is used to reconcile to amount of taxes withheld. Adjuctivent quarter. It will be necessive corrections were made. When fill	f Louisiana income employees for the a s is the total amount ount of withholding the payments made ustments for prior quary to file amended ng an amended return.	tax withheld or required to be
1 Louisiana Withholdin July	o .		00	5 Less remittance made during quarter 5		00
2 Louisiana Withholding Tax August			6 If Line 4 is greater than Line 5, subtract Line 5 from Line 4.  Pay this amount 6		00	
3 Louisiana Withholding Tax September3			00			o: Louisiana Department of at <u>www.revenue.louisiana.gov</u> <b>CASH</b> )
4 Total 3rd Quarter Withholdings	4	<u> </u>	00	7 If Line 4 is less than Line 5, subtract Line 4 from Line 5. This is your <b>overpayment7</b>		00
	v, I declare that I have examined other than taxpayer) is based on a			s and statements, and to the best of my ki y knowledge.	nowledge and belief, the	ey are true, correct, and complete.
Signature					Date (mm.	/dd/yyyy)
Print Name Title			Title		Telephon	е
provided under the box. If a firm, the firm's FEIN mu	f the paid preparer has a PTIN, tl	nat must be entered in er use only" box. Failu	the space provid re of paid prepar	arer use only" box, complete the information and under the box, otherwise enter the FEI er to sign or provide an identification number.	N or LDR account numb	er. If paid preparer represents
PAID	Print/Type Preparer's Nam	e	Preparer's Si	gnature	Date (mm/dd/yyyy)	Check if Self-employed
PREPARER USE ONLY	Firm's Name ➤				Firm's FEIN ➤	
USE ONLY	Firm's Address >				Telephone >	
	Mark this box business has	closed or you				
				inal date wages were paid. PT	IN, FEIN, or LDR of Paid Pre	
	Mark this amended	box if this is an return.			For office use of	22107

Field Flag FOR OFFICE USE ONLY