Fourth 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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U	lse	th	is	form	for:

 Tax Period
 Due Date

 12/31/2021
 01/31/2022

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Account Number				DI FACE	DETUDN EN	TIDE DAGE	
				PLEASE	RETURN ENT	TIRE PAGE	
employer who withhole	yer's Quarterly Return of L ds, or who is required to ses, must file a quarterly L-	withhold Louisiana	a income tax	How do I prepare Form L-1? To ensure accurate processing,		ures as shown.	
	mounts required to be with			1 2 3 4 5 6 7	8 9 00		
Each return covers on deadline. A quarterly re	ne quarterly taxable period eturn must be filed even if	no taxes are withhe	eld during the	Lines 1-3 Enter the amount of Louisiana income tax withheld or required to be withheld from the wages of your employees for the appropriate month.			
When and how should Payments must be made	I to employees were not suffi I I remit tax withheld from e according to your mandated	my employees? payment frequency.	. Payments for	Line 4 Add Lines 1, 2 and 3. This is the total amount of taxes withheld for the quarter. Line 5 Calculate the total amount of withholding taxes that was remitted to the department during the quarter.			
	arter must be submitted with an L-1V payment voucher.	the L-1 return. All ot	ther payments	Lines 6 and 7 Self-explanatory			
When is the L-1 Return Quarterly and Monthly p following month after the	n due? payers should submit Form L e close of the calendar quar	-1 with payment on ter. The due dates a	the last day of tre as follows:		ustments for prior qu	arters cannot be made in the	
1 st Quarter	.April 30 th 2 nd Qu ctober 31 st 4 th Qu	ıarter ıarter Janı	July 31 st Jary 31, 2022	corrections were made. When fil	ing an amended retur		
	a weekend or holiday, the re-			for the quarter being amended, I Return" box.	report the corrected ar	nounts, and mark the "Amended	
1 Louisiana Withholdin October			00	5 Less remittance made during quarter 5		00	
Louisiana Withholdin November			00	6 If Line 4 is greater than Line 5, subtract Line 5 from Line 4. Pay this amount.		00	
3 Louisiana Withholdin December			00			: Louisiana Department of at <u>www.revenue.louisiana.gov</u> CASH)	
4 Total 4th Quarter Withholdings	4			7 If Line 4 is less than Line 5, subtract Line 4 from Line 5. This is your overpayment 7			
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	y, I declare that I have examined other than taxpayer) is based on a			s and statements, and to the best of my k v knowledge.	nowledge and belief, the	y are true, correct, and complete.	
Signature				,	Date (mm/	dd/yyyy)	
Print Name Title			Title		Telephone	9	
provided under the box. If a firm, the firm's FEIN mu	f the paid preparer has a PTIN, t	nat must be entered in rer use only" box. Failu	the space provid ire of paid prepar	arer use only" box, complete the informatic led under the box, otherwise enter the FEI er to sign or provide an identification numl ling identification number.	N or LDR account number	er. If paid preparer represents	
PAID	PARER Firm's Name >			gnature	Date (mm/dd/yyyy)	Check if Self-employed	
PREPARER					Firm's FEIN ➤		
USE ONLY	Firm's Address ➤				Telephone ➤		
	Mark this box		1				
	business has have stopped	closed or you paying wages.				_	
		s box if this is an	Enter the f	final date wages were paid. P7	IN, FEIN, or LDR A of Paid Pre		
	amende				For office use on	ily. 32108	

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