WEB



Mail your Return and Payment to: Louisiana Department of Revenue P.O. Box 91017

TATIOI	TICI A NIA	Louisiana Department of Revenue		•	Use this form for:			WEB
DEPART	TMENT of REVENUE	P.O. Box 91017 Baton Rouge, LA			Tax Period 09/30/202	23 Due D	Date 31/2023	
Account Number				Federa	I Employer Iden	tification Numbe	ar.	
_egal Name				reuera	i Employer iden	uncation Number	zı	
Frade Name				PL	EASE RE	TURN ENT	ΓIRE PAG	E
Address								
City		State ZIP						
/hat is an L-1?				How do I prepare Fo	rm I -12			
orm L-1 is the Emplo	oyer's Quarterly Return ds, or who is require	of Louisiana Withh	nolding Tax. Every	To ensure accurate pr		e enter your figu	ures as shown.	
om wages of employed withhold and pay ar	ees, must file a quarter mounts required to be	ly L-1 return. Any e	employer who fails	1 2 3 4 5	6 7 8	9 00		
eadline. A quarterly re	ne quarterly taxable per eturn must be filed eve	n if no taxes are w	ithheld during the	Lines 1-3 Enter the withheld from the wag	es of your empl	oyees for the ap	propriate mont	h.
uarter or if wages paid to employees were not sufficient to require withholding. Ihen and how should I remit tax withheld from my employees? ayments must be made according to your mandated payment frequency. Payments for e last period of the quarter must be submitted with the L-1 return. All other payments				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.				
nust be submitted with an L-1V payment voucher. //hen is the L-1 Return due? //tuarterly and Monthly payers should submit Form L-1 with payment on the last day of blowing month after the close of the calendar quarter. The due dates are as follows:				Lines 6 and 7 Self-explanatory How do I amend an L-1? Form L-1 is used to reconcile the payments made within this quarter to the actuamount of taxes withheld. Adjustments for prior quarters cannot be made in the second secon				
^t Quarter	. April 30 th	nd Quarter th Quarter	July 31 st	current quarter. It will corrections were mad	be necessary to	o file amended	returns for all o	juarters in wh
the due date falls on a	a weekend or holiday, that on the following day.		•	for the quarter being a Return" box at the bot	mended, report	the corrected ar		
Louisiana Withholdin July	•	<u> </u>	00	5 Less remittance mad during quarter		Ш,		
Louisiana Withholdin August			00	6 If Line 4 is greater that subtract Line 5 from Line 5 from Line 5 from Line 1 from Line 1 from Line 2 from Line	ne 4.			
Louisiana Withholdin September			00		R	lake payment to evenue, or pay a DO NOT SEND	at <u>www.revenue</u>	partment of e.louisiana.go
Total 3rd Quarter Withholdings	4		00	7 If Line 4 is less than Li subtract Line 4 from Li This is your overpaym	ne 5.			
		jj_		This is your overpayin	ent /	<u> </u>	<u> </u>	
	y, I declare that I have exar other than taxpayer) is base			es and statements, and to the by knowledge.	est of my knowled	lge and belief, the	y are true, correct	, and complete.
Signature						Date (mm/dd/yyyy)		
Print Name Title			Title			Telephone		
provided under the box. It a firm, the firm's FEIN mu	f the paid preparer has a P	TIN, that must be ente preparer use only" box	red in the space provide. Failure of paid prepai	arer use only" box, complete the dunder the box, otherwise e rer to sign or provide an identifular ding identification number.	nter the FEIN or LI	DR account number	er. If paid prepare	r represents
PAID	Print/Type Preparer's Name			Preparer's Signature		e (mm/dd/yyyy)	Check _ if Self-emp	
PREPARER	Firm's Name ➤		•			Firm's FEIN ➤		
USE ONLY	Firm's Address ➤					Telephone >		
	business	s box if your has closed or you						
	have sto	pped paying wages		final date wages were paid.	PTIN, F	EIN, or LDR A	Account Numb	er
		k this box if this is a	ın		1 0	of Paid Pre		
	ame	ended return.				For office use on	ıly.	3230

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