Louisiana Department of Revenue
P.O. Box 91017, Baton Rouge, LA 70821-9017

You must file on this basis

Tax Period Covered

Withholding Tax Account Number

SPEC CODE

Please print the address below.

Mark box if address has changed.

10

Amended

Mark box if this is a final return.

Month Day Year

Enter date business sold/closed.

Field Flag

Employer's Return of Louisiana Withholding Tax Form L-1

1 **Louisiana Withholding tax**	0 0
2 **Penalty** (See instructions.)	0 0
3 **Interest** (See instructions.)	0 0
4 **Total amount due** (Add Lines 1, 2, and 3.)	0 0

For office use only.

Filing deadline

Signature | Title | Date | Telephone

Under the penalties of perjury, I declare that I have examined this return, including all accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete. Make payment to: Louisiana Department of Revenue, or pay at ***www.revenue.louisiana.gov*** (**Do not send cash.**)