

Louisiana Department of Revenue
P.O. Box 91017, Baton Rouge, LA 70821-9017
IMPORTANT: All filers must complete the front and back of this form.

Withholding Tax Account Number
Filing deadline (or within 30 days after last month wages were paid)

For office use only

Mark box if address has changed.

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Mark box if amended return.

Please mark method of filing:

W-2 Tape Disk

Field Flag

ANNUAL RECONCILIATION FORM L-3

1 Gross payroll for year	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00
2 Tax previously remitted	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00
3 # of W-2s attached or employees reported on magnetic media	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4 Total tax per W-2s	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 00

TAX YEAR

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.

L-3 Do not send payment with this report.

Annual Reconciliation of State Income Tax Withheld (L-3)

	MONTH	1ST HALF	2ND HALF	MONTH	1ST HALF	2ND HALF	MONTH	1ST HALF	2ND HALF
1	A J A N	00	00	B F E B	00	00	C M A R	00	00
2	A A P R	00	00	B M A Y	00	00	C J U N	00	00
3	A J U L	00	00	B A U G	00	00	C S E P	00	00
4	A O C T	00	00	B N O V	00	00	C D E C	00	00

Semi-monthly Filers: Please enter the amount withheld in the appropriate 1st and 2nd half boxes.

Monthly Filers: Please enter the amount withheld in the 2nd half box.

Quarterly Filers: Please enter the amount withheld in the 2nd half box for March, June, September, and December.

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Total amount withheld (Please enter the total withholdings for the year in the space provided, then enter this amount on Line 2 on the face of the return.)