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:

CFS W-2 Tape Disk

Field Flag

ANNUAL RECONCILIATION FORM L-3

1 Gross payroll for year	,, 00
2 Tax previously remitted	,, 00
3 # of W-2s attached or employees reported on magnetic media	
4 Total tax per W-2s	,, 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.

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	JAN	00	00	B	FEB	00	00	C	MAR	00	00
2	A	APR	00	00	B	MAY	00	00	C	JUN	00	00
3	A	JUL	00	00	B	AUG	00	00	C	SEP	00	00
4	A	OCT	00	00	B	NOV	00	00	C	DEC	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.

□□□,□□□,□□□00

Total amount remitted (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.)