Specifications for Form CIFT-620-2D (2021 Income / 2022 Franchise)

General Requirements

The 2021 Louisiana Corporation Income Tax Return and 2022 Franchise Tax Return (CIFT-620) is a scannable form processed on high-speed scanners. All substitute returns (CIFT-620-2D) **MUST** incorporate variable data fields in **exact placement** as specified on Pages 3 through 19 of this document and a 2-D barcode as specified on page 4 of this document. All pages of the return and any applicable schedules and/or worksheets **MUST** be submitted by the taxpayer (s) for proper processing. Please note it is critical that all pages of the return be submitted. Any return received that is missing any page will **not** be processed and will be returned to the taxpayer as an unapproved form. Also, the signature(s) of an officer (s) of the corporation on the substitute form must be original.

Software Developer Identification Number: Each software developer who develops a substitute of Form CIFT-620-2D, must have a four-digit software developer's identification number approved by the Louisiana Department of Revenue. This number remains the same year after year. If you do not have an approved identification number or are unsure what yours is, please send a request/inquiry by email to Substitute.Inquiries@LA.gov.

Paper Requirements: All pages of the return, schedules, and worksheets, must be printed on 8-1/2" x 11" white paper. The minimum weight of the paper used should be 20-pound bond. Recycled paper should not be used. Your end users should be instructed on the minimum requirements.

Printers: To print a readable barcode, a printer capable of 200 dots per inch (DPI) **minimum** is required; however, **300 DPI or higher is recommended.**

Ink: Black ink only must be used to print the form.

Grid Line and Position Numbers: Grid line numbers are based on **6 lines per vertical inch** (pica spacing)—66 lines per 11-inch page length. Grid position numbers are based on **10 characters per horizontal inch** (10-pitch spacing)—85 characters per 8-1/2-inch page width.

Fonts: The only acceptable font for the printed variable data fields and document identification numbers is **12-point Courier (MUST be 10 characters per inch)**. It is requested that this font be set as the default.

Document Identification Numbers: A document identification number has been assigned to each page of the return and each accompanying schedule. The numbers must be printed in a **bold 12-point Courier font** and positioned on Line 63 in Positions 76-80 of each page and are as follows:

Form/Schedule	Doc ID
Return, Page 1	22241
Return, Page 2	22242
Return, Page 3	22243
Barcode, Page4	22244
Schedule NRC-P1 and RC-P4	22245
Schedule NRC-P3	22246
Schedule RC-P2	22247
Schedules A and B	22250
Schedule C	22251
Schedule D	22252
Schedules E and G	22253
Schedule F	22254
Schedule G-1	22255
Schedule H	22256
Schedule I	22257
Schedules J, J-1, and K	22258
Schedules L, M and N	22259

Registration Marks: Registration marks are placed in various positions throughout the form and must be positioned exactly as specified on Pages 3,4,5,7,8,9,11,12,13,14,15,16,17,18,19 and 20 of this document. These marks must be printed as follows:

Reference Points: Print a black-filled rectangle measuring 1/10" (1 grid position) horizontally and 1/6" (1 grid line) vertically as illustrated below.

Barcodes: A "three of nine" type barcode measuring 1/2" in height must be printed on all pages of the return and schedules and must be positioned 1/2" from the left edge and 1/2" from the bottom edge. The characters that the barcode represents should <u>not</u> be printed with the barcode. These barcodes must read (same as document identification numbers) as follows:

Form/Schedule	Doc ID
Return, Page 1	22241
Return, Page 2	22242
Return, Page 3	22243
Barcode, Page4	22244
Schedule NRC-P1 and RC-P4	22245
Schedule NRC-P3	22246
Schedule RC-P2	22247
Schedules A and B	22250
Schedule C	22251
Schedule D	22252
Schedules E and G	22253
Schedule F	22254
Schedule G-1	22255
Schedule H	22256
Schedule I	22257
Schedules J, J-1 and K	22258
Schedules L, M and N	22259

Printed Variable Data: The printed variable data fields on Pages 1 through 3 of the CIFT-620-2D return, Schedules NRC-P1, RC-P4, NRC-P3, and RC-P2 and on Schedules A through N must be positioned exactly as specified on Pages 3 through 18. However, the printed variable data fields on Schedules A through N do not need to meet exact placement or format requirements.

Exact Placement Specifications – CIFT-620-2D Return (Page 1)

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Reference Points (6): 1 positioned on Line 6 in Position 28.

1 positioned on Line 23 in Position 45. 1 positioned on Line 53 in Position 45. 1 positioned on Line 61 in Position 26.

1 positioned on Line 61 in Position 80.

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

• 1/2" from the left edge, and

• 1/2" from the bottom edge.

Document Identification Number: The document identification number (22241) must be printed as specified on Page 1 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (**must** be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed on Page 1 of the return, except for Lines B, E, F, 1A, 1B, 1E, 5A, and 5C. In order to denote the value on those lines as a negative, <u>do not</u> use a negative sign or parentheses; instead, use the negative indicator fields. For the required specifications of the related printed fields, see the specifications below.

	Printed Variable Data Fields – CIFT-620-2D Return (Page 1)				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 5 Position(s) 50-60	Numeric	10	
Calendar Year Box	Check this box if it for Calendar Year Only	Line 12 Position(s) 30	<mark>Alpha</mark>	1	
Fiscal Year Filer Box	Check this box if it for Fiscal Year Only	Line 14 Position(s) 30	<mark>Alpha</mark>	1	
Short Period Filer	Check this box if it for Short Period Filer	Line 16 Position(s) 30	<mark>Alpha</mark>	1	
Income Tax Fiscal Year Beginning	This field should be formatted as "mmddyy".	Line 19 Position(s) 8-13	Numeric (with slash)	<mark>6</mark>	
Income Tax Fiscal Year Ending	This field should be formatted as "mmddyy".	Line 21 Position(s) 8-13	Numeric (with slash)	<mark>6</mark>	
Franchise Tax Fiscal Year Beginning	This field should be formatted as "mmddyy".	Line 19 Position(s) 22-27	Numeric (with slash)	<mark>6</mark>	
Franchise Tax Fiscal Year Ending	This field should be formatted as "mmddyy".	Line 21 Position(s) 22-27	Numeric (with slash)	6	

	Printed Variable Data Fields - CIFT-620-2D Return	(Page 1) -	- continued		
Field Name	Comments	Exact F	Placement on Grid	Field Type	Field Length
Name Change Indicator		Line 8	Position(s) 36	Alpha	1
Address Change Indicator		Line 10	Position(s) 36	Alpha	1
Amended Return Indicator	Print an "X" (uppercase) in the specified position in order to	Line 12	Position(s) 36	Alpha	1
Franchise Tax Filing Not Required Indicator	denote the indicator. Do not print a box, only the "X" if	Line 14	Position(s) 36	Alpha	1
Income Tax Filing Not Required Indicator	applicable.	Line 16	Position (s) 36	Alpha	1
First-time Filing Indicator		Line 18	Position(s) 36	Alpha	1
Final Return Indicator		Line 20	Position(s) 36	Alpha	1
Legal Name	The legal name of the corporation.	Line 8	Position(s) 50-79	Alphanumeric	30
Trade Name	The trade name or DBA name of the corporation. Leave blank if not applicable.	Line 10	Position(s) 50-79	Alphanumeric	30
Address Line 1		Line 12	Position(s) 50-79	Alphanumeric	30
Unit Type		Line 14	Position(s) 50-64	Alphanumeric	15
Unit Number	Composation's modified address	Line 14	Position(s) 66-79	Alphanumeric	14
City	ornoration's mailing address	Line 16	Position(s) 50-66	Alphanumeric	17
State		Line 16	Position(s) 69-70	Alpha	2
ZIP		Line 16	Position(s) 73-79	Numeric	5
Foreign Nation, if not United States (do not abbreviate)	Foreign Nation, if not United States (do not abbreviate)	Line 18	Position(s) 50-74	Alphanumeric	25
Return Line A	Federal Employer Identification Number (FEIN) – This field should be formatted as "########".	Line 25	Position(s) 33-41	Numeric (with hyphen)	9
Negative Indicator (Return Line B)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 27	Position(s) 29	Alpha	1
Return Line B	Federal Taxable Income	Line 27	Position(s) 31-41	Numeric	12
Return Line C	Federal Income Tax	Line 29	Position(s) 32-41	Numeric	11
Return Line D	Income Tax Apportionment Percentage – Round the percentage to 2 decimal places (###.##).	Line 31	Position(s) 36-41	Numeric (with decimal point)	6
Negative Indicator (Return Line E)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 33	Position(s) 25	Alpha	1
Return Line E	Gross Revenues	Line 33	Position(s) 27-41	Numeric	15
Negative Indicator (Return Line F)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 35	Position(s) 25	Alpha	1
Return Line F	Total Assets	Line 35	Position(s) 27-41	Numeric	15
Return Line G	NAICS Code	Line 37	Position(s) 36-41	Numeric	6
Return Line H	Principal Place of Business – Enter the state abbreviation for the location.	Line 39	Position(s) 39-40	Alpha	2
Return Line I—Yes	One or the other of these indicators must be marked. Print an "X" (uppercase) in the specified position in order to	Line 41	Position(s) 34	Alpha	1
Return Line I—No	denote the appropriate indicator. Do not print a box, only the "X" if applicable.	Line 41	Position(s) 40	Alpha	1

	Printed Variable Data Fields – CIFT-620-2D Return	(Page 1) -	- continued		
Field Name	Field Name		Exact Placement on Grid	Field Type	Field Type
Return Line J—Yes	One or the other of these indicators must be marked. Print an "X" (uppercase) in the specified position in order to	Line 43	Position(s) 34	Alpha	1
Return Line J—No	denote the appropriate indicator. Do not print a box, only the "X" if applicable.	Line 43	Position(s) 40	Alpha	1
Return Line K	If answered "Yes" on Line J, enter FEIN of consolidated federal income tax return.	Line 45	Position(s) 33-41	Numeric (with hyphen)	10
Return Line L—Yes	One or the other of these indicators must be marked. Print an "X" (uppercase) in the specified position in order to	Line 47	Position(s) 34	Alpha	1
Return Line L—No	denote the appropriate indicator. Do not print a box, only the "X" if applicable.	Line 47	Position(s) 40	Alpha	1
Return Line M	Code of the Federal Form Filed	Line 49	Position(s) 40	Numeric	1
Return Line N	Code of the Entity Type	Line 51	Position(s) 40	Numeric	1
Return Line O	Pass-through Entity Tax Election	Line 53	Position(s) 40	Numeric	1
Negative Indicator (Return Line 1A)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 21	Position(s) 69	Alpha	1
Return Line 1A	Louisiana Net Income before Loss Adjustments and Federal Income Tax Deduction	Line 21	Position(s) 71-79	Numeric	9
Negative Indicator (Return Line 1B)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 23	Position(s) 69	Alpha	1
Return Line 1B	Subchapter S Corporation Exclusion	Line 23	Position(s) 71-79	Numeric	9
Return Line 1C	Loss Carryforward less Federal Tax Refund Applicable to Loss	Line 26	Position(s) 69-79	Numeric	11
Return Line 1C1	Loss Carryforward Utilized	Line 29	Position(s) 71-79	Numeric	12
Return Line 1D	Federal Income Tax Deduction	Line 31	Position(s) 72-79	Numeric	8
Return Line 1D1	Federal Disaster Relief Credits	Line 33	Position(s) 73-79	Numeric	7
Negative Indicator (Return Line 1E)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 35	Position(s) 69	Alpha	1
Return Line 1E	Louisiana Taxable Income	Line 35	Position(s) 71-79	Numeric	7
Exemption Code (Return Line 2)	Print the Income Exemption Code in the specified position in order to denote the Exemption Code indicator. Do not print a box, only the numeric code applicable.	Line 37	Position(s) 70	Numeric	1
Return Line 2	Louisiana Income Tax	Line 37	Position(s) 72-79	Numeric	8
Return Line 3	Total Nonrefundable Income Tax Credits	Line 39	Position(s) 72-79	Numeric	8
Return Line 4	Income Tax after Nonrefundable Credits	Line 41	Position(s) 72-79	Numeric	8
Negative Indicator (Return Line 5A)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 45	Position(s) 66	Alpha	1
Return Line 5A	Total Capital Stock, Surplus, and Undivided Profits	Line 45	Position(s) 68-79	Numeric	12

Return Line 5B	Franchise Tax Apportionment Percentage – Round the percentage to 2 decimal places (###.##).	Line 47	Position(s) 74-79	Numeric (with decimal point)	6
	Printed Variable Data Fields - CIFT-620-2D Return ((Page 1) -	- continued		
Negative Indicator (Return Line 5C)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 49	Position(s) 68	Alpha	1
Return Line 5C	Franchise Tax Base	Line 49	Position(s) 70-79	Numeric	10
Return Line 6	Amount of Assessed Value of Real and Personal Property in Louisiana in 2021	Line 51	Position(s) 70-79	Numeric	10
Exemption Code (Return Line 7)	Print the Franchise Exemption Code in the specified position in order to denote the Exemption Code indicator. Do not print a box, only the numeric code applicable.	Line 53	Position(s) 66	Numeric	1
Return Line 7	Louisiana Franchise Tax	Line 53	Position(s) 72-79	Numeric	8
Return Line 8	Total Nonrefundable Franchise Tax Credits	Line 55	Position(s) 72-79	Numeric	8
Return Line 9	Franchise Tax after Nonrefundable Credits	Line 57	Position(s) 72-79	Numeric	8
Software Developer ID	Software Developer Identification Number (4-digit number) preapproved by LDR	Line 62	Position(s) 63-66	Numeric	4

NOTE: On Line 1C, the fields for the loss carryforward and the applicable federal tax refund are not listed above because those fields do not need to meet any particular specifications. However, they MUST be completed when applicable.

Exact Placement Specifications – CIFT-620-2D Return (Page 2)

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Reference Points (6):

1 positioned on Line 10 in Position 27.
1 positioned on Line 10 in Position 60.
1 positioned on Line 55 in Position 60.
1 positioned on Line 56 in Position 27.
1 positioned on Line 61 in Position 26.
1 positioned on Line 61 in Position 80.

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22242) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (must be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

	Printed Variable Data Fields - CIFT-620-2	2D Return (Page 2)		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10
Column 1 (Income Tax)			•	
Return Line 10	Tax liability after priority 1 credits	Line 10 Position(s) 30-37	Numeric	8
Return Line 11	Refundable credits from Schedule RC-P2	Line 12 Position(s) 30-37	Numeric	8
Return Line 12	Tax liability after priority 2 credits	Line 14 Position(s) 30-37	Numeric	8
Return Line 13	Overpayment after priority 2 credits	Line 16 Position(s) 30-37	Numeric	8
Return Line 14	Nonrefundable credits from Schedule NRC-P3	Line 18 Position(s) 30-37	Numeric	8
Return Line 15	Tax liability after priority 3 credits	Line 20 Position(s) 30-37	Numeric	8
Return Line 16A	Overpayment after priority 2 credits	Line 22 Position(s) 30-37	Numeric	8
Return Line 16B	Refundable credits from Schedule RC-P4	Line 24 Position(s) 30-37	Numeric	8

	Printed Variable Data Fields - CIFT-620-2D Return (Page 2) – continued		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Column 1 (Income Tax) – continued				
Return Line 16C	Credit carryforward from prior year return	Line 26 Position(s) 30-37	Numeric	8
Return Line 16D	Estimated payments	Line 28 Position(s) 30-37	Numeric	8
Return Line 16E	Payment made with extension	Line 30 Position(s) 30-37	Numeric	8
Return Line 16F	Total refundable credits and payments	Line 32 Position(s) 30-37	Numeric	8
Return Line 17	Overpayment	Line 34 Position(s) 30-37	Numeric	8
Return Line 18	Tax due	Line 36 Position(s) 30-37	Numeric	8
Return Line 21	Interest	Line 42 Position(s) 30-37	Numeric	8
Return Line 22	Delinquent filing penalty	Line 44 Position(s) 30-37	Numeric	8
Return Line 23	Delinquent payment penalty	Line 46 Position(s) 30-37	Numeric	8
Return Line 24	Additional donation to The Military Family Assistance Fund	Line 48 Position(s) 30-37	Numeric	8
Return Line 25	Total amount due	Line 50 Position(s) 30-37	Numeric	8
Column 2 (Franchise Tax)				
Return Line 10	Tax liability after priority 1 credits	Line 10 Position(s) 49-56	Numeric	8
Return Line 11	Refundable credits from Schedule RC-P2	Line 12 Position(s) 49-56	Numeric	8
Return Line 12	Tax liability after priority 2 credits	Line 14 Position(s) 49-56	Numeric	8
Return Line 13	Overpayment after priority 2 credits	Line 16 Position(s) 49-56	Numeric	8
Return Line 14	Nonrefundable credits from Schedule NRC-P3	Line 18 Position(s) 49-56	Numeric	8
Return Line 15	Tax liability after priority 3 credits	Line 20 Position(s) 49-56	Numeric	8
Return Line 16A	Overpayment after priority 2 credits	Line 22 Position(s) 49-56	Numeric	8
Return Line 16B	Refundable credits from Schedule RC-P4	Line 24 Position(s) 49-56	Numeric	8
Return Line 16C	Credit carryforward from prior year return	Line 26 Position(s) 49-56	Numeric	8
Return Line 16E	Payment made with extension	Line 30 Position(s) 49-56	Numeric	8
Return Line 16F	Total refundable credits and payments	Line 32 Position(s) 49-56	Numeric	8
Return Line 17	Overpayment	Line 34 Position(s) 49-56	Numeric	8
Return Line 18	Tax due	Line 36 Position(s) 49-56	Numeric	8
Return Line 19	Amount of income tax overpayment applied to franchise tax	Line 38 Position(s) 49-56	Numeric	8
Return Line 20	Net tax due	Line 40 Position(s) 49-56	Numeric	8
Return Line 21	Interest	Line 42 Position(s) 49-56	Numeric	8
Return Line 22	Delinquent filing penalty	Line 44 Position(s) 49-56	Numeric	8
Return Line 23	Delinquent payment penalty	Line 46 Position(s) 49-56	Numeric	8
Return Line 24	Additional donation to The Military Family Assistance Fund	Line 48 Position(s) 49-56	Numeric	8
Return Line 25	Total amount due	Line 50 Position(s) 49-56	Numeric	8
Column 3 (Total)				
Return Line 15	Tax liability after priority 3 credits	Line 20 Position(s) 68-75	Numeric	9
Return Line 17	Overpayment	Line 34 Position(s) 68-75	Numeric	9
Return Line 25	Total amount due	Line 50 Position(s) 68-75	Numeric	9

Exact Placement Specifications – CIFT-620-2D Return (Page 3)

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Reference Points (5): 1 positioned on Line 10 in Position 27.

1 positioned on Line 10 in Position 80. 1 positioned on Line 16 in Position 80. 1 positioned on Line 61 in Position 26. 1 positioned on Line 61 in Position 80.

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22243) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

	Printed Variable Data Fields - CIFT-620-2D R	eturn (Page 3)		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10
Column 2 (Franchise Tax)				
Return Line 26	Net overpayment	Line 10 Position(s) 49-56	Numeric	8
Column 3 (Total)				
Return Line 26	Net overpayment	Line 10 Position(s) 67-75	Numeric	9
Return Line 27	Amount of overpayment donated to The Military Family Assistance Fund	Line 12 Position(s) 67-75	Numeric	9
Return Line 28	Amount of overpayment to be refunded	Line 14 Position(s) 67-75	Numeric	9
Return Line 29	Amount of overpayment to be credited to 2022	Line 16 Position(s) 67-75	Numeric	9
Declaration and Signature(s) of Officer/Pre	parer			
Paid Preparer's ID	Social Security Number, PTIN, FEIN, or SSN of Paid Preparer	Line 54 Position(s) 64-72	Alphanumeric	10

Exact Placement Specifications – CIFT-620-2D Return (Page 4)

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22244) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

Requirements:

- The 2-D barcode should be placed on Page 4 of the return on Lines 8-18 in Positions 22-68. The barcode must fit within this area of the form.
- The 2-D barcode should be placed on Page 4 of the return on Lines 28-38 in Positions 22-68. The barcode must fit within this area of the form.
- The 2-D barcode should be placed on Page 4 of the return on Lines 48-58 in Positions 22- 68. The barcode must fit within this area of the form.
- Use a carriage return <CR> to delimit fields. Each barcode field should have a carriage return, even if no information is contained in the field. This carriage return should measure as 1 byte of data.
- No punctuation is allowed in any field. No hyphens, dashes, parentheses, or other separators should be used.
- All alpha characters must be in uppercase.
- If a field is not applicable, leave blank unless specifically instructed otherwise.
- Negative amounts are not accepted. If less than zero, enter zero.
- Only whole dollar amounts should be entered.
- Do not include supplemental information in the barcode.
- Error correction level should be set to 4.

Exact Placement Specifications – CIFT-620-2D Schedules NRC-P1 and RC-P4

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Reference Points (6): 1 positioned on Line 11 in Position 51.

1 positioned on Line 21 in Position 51. 1 positioned on Line 39 in Position 46. 1 positioned on Line 47 in Position 46. 1 positioned on Line 61 in Position 27. 1 positioned on Line 61 in Position 80.

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22245) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

Printed V	Printed Variable Data Fields – CIFT-620-2D Schedules NRC-P1 and RC-P4				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Schedule NRC-P1 (Nonrefundable Priority 1 Tax Credits)					
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10	
Nonrefundable Priority 1 Tax Credit Code (Line 1)		Line 11 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 1 Tax Credit Code (Line 2)		Line 13 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 1 Tax Credit Code (Line 3)		Line 15 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 1 Tax Credit Code (Line 4)	Enter 3-digit credit code. If not applicable, leave	Line 17 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 1 Tax Credit Code (Line 5)		Line 19 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 1 Tax Credit Code (Line 6)		Line 21 Position(s) 42-44	Numeric	3	

Printed Variab	le Data Fields – CIFT-620-2D Schedule NRC	-P1 and RC-P4 – continued		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Schedule NRC-P1 (Nonrefundable Priority 1 Tax Credit		Exact Flacement on Ona	i icia i ypc	Longin
NRC-P1 Amount Claimed Against Income Tax (Line 1)	,	Line 11 Position(s) 52-59	Numeric	8
NRC-P1 Amount Claimed Against Income Tax (Line 2)		Line 13 Position(s) 52-59	Numeric	8
NRC-P1 Amount Claimed Against Income Tax (Line 3)	Enter amount of allowable credit claimed against	Line 15 Position(s) 52-59	Numeric	8
NRC-P1 Amount Claimed Against Income Tax (Line 4)	corporation income tax in Column A.	Line 17 Position(s) 52-59	Numeric	8
NRC-P1 Amount Claimed Against Income Tax (Line 5)		Line 19 Position(s) 52-59	Numeric	8
NRC-P1 Amount Claimed Against Income Tax (Line 6)		Line 21 Position(s) 52-59	Numeric	8
Total NRC-P1 Income Tax Credits (Line 7)	Add credit amounts claimed against Income Tax (Column A, Lines 1-6).	Line 23 Position(s) 52-59	Numeric	8
NRC-P1 Amount Claimed Against Franchise Tax (Line 1)	L Enter amount of allowable credit claimed against	Line 11 Position(s) 69-76	Numeric	8
NRC-P1 Amount Claimed Against Franchise Tax (Line 2)		Line 13 Position(s) 69-76	Numeric	8
NRC-P1 Amount Claimed Against Franchise Tax (Line 3)		Line 15 Position(s) 69-76	Numeric	8
NRC-P1 Amount Claimed Against Franchise Tax (Line 4)		Line 17 Position(s) 69-76	Numeric	8
NRC-P1 Amount Claimed Against Franchise Tax (Line 5)		Line 19 Position(s) 69-76	Numeric	8
NRC-P1 Amount Claimed Against Franchise Tax (Line 6)		Line 21 Position(s) 69-76	Numeric	8
Total NRC-P1 Franchise Tax Credits (Line 8)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-6).	Line 25 Position(s) 69-76	Numeric	8
	rinted Variable Data Fields – CIFT-620-2D Sc	hedule RC-P4		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Schedule RC-P4 (Refundable Priority 4 Tax Credits)				
Refundable Priority 4 Tax Credit Code (Line1)		Line 38 Position(s) 42-44	Alphanumeric	3
Refundable Priority 4 Tax Credit Code (Line 2)		Line 40 Position(s) 42-44	Alphanumeric	3
Refundable Priority 4 Tax Credit Code (Line 3)	Enter 3-character credit code. If not applicable, leave blank.	Line 42 Position(s) 42-44	Alphanumeric	3
Refundable Priority 4 Tax Credit Code (Line 4)	Tours signific	Line 44 Position(s) 42-44	Alphanumeric	3
Refundable Priority 4 Tax Credit Code (Line 5)		Line 47 Position(s) 42-44	Alphanumeric	3
RC-P4 Amount Claimed Against Income Tax (Line 1)		Line 38 Position(s) 52-59	Numeric	8
RC-P4 Amount Claimed Against Income Tax (Line 2)	Enter amount of allowable credit claimed against	Line 40 Position(s) 52-59	Numeric	8
RC-P4 Amount Claimed Against Income Tax (Line 3)	corporation income tax in Column A.	Line 42 Position(s) 52-59	Numeric	8
RC-P4 Amount Claimed Against Income Tax (Line 4)		Line 44 Position(s) 52-59	Numeric	8

RC-P4 Amount Claimed Against Income Tax (Line 5)		Line 46 Position(s) 52-59	Numeric	8
Printed Vari	able Data Fields – CIFT-620-2D Schedule NRC	-P1 and RC-P4 - continued		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Schedule RC-P4 (Refundable Priority 4 Tax Credits)	– continued			
Total RC-P4 Income Tax Credits (Line 6)	Add credit amounts claimed against Income Tax (Column A, Lines 1-5).	Line 48 Position(s) 52-59	Numeric	8
RC-P4 Amount Claimed Against Franchise Tax (Line 1)	L	Line 38 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against Franchise Tax (Line 2)		Line 40 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against Franchise Tax (Line 3)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 42 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against Franchise Tax (Line 4)	·	Line 44 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against Franchise Tax (Line 5)		Line 46 Position(s) 69-76	Numeric	8
Total RC-P4 Franchise Tax Credits (Line 7)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-5).	Line 50 Position(s) 69-76	Numeric	8

NOTE: The fields for the descriptions of the credits are not listed above because those fields do not need to meet any particular specifications. However, they MUST be completed when applicable.

Exact Placement Specifications – CIFT-620-2D Schedule NRC-P3 (Nonrefundable Priority 3 Tax Credits)

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Reference Points (5): 1 positioned on Line 11 in Position 47.

1 positioned on Line 21 in Position 47. 1 positioned on Line 36 in Position 46. 1 positioned on Line 61 in Position 26. 1 positioned on Line 61 in Position 80.

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22246) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

Printed Variable Data Fields – CIFT-620-2D Schedule NRC-P3					
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Louisiana Revenue Account Number	This field should be formatted as "########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10	
Part I – Nontransferable					
Nonrefundable Priority 3 Tax Credit Code (Line 1)		Line 11 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 3 Tax Credit Code (Line 2)		Line 13 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 3 Tax Credit Code (Line 3)	Enter 3-digit credit code. If not applicable, leave	Line 15 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 3 Tax Credit Code (Line 4)	blank.	Line 17 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 3 Tax Credit Code (Line 5)		Line 19 Position(s) 42-44	Numeric	3	
Nonrefundable Priority 3 Tax Credit Code (Line 6)		Line 21 Position(s) 42-44	Numeric	3	

Printed	d Variable Data Fields – CIFT-620-2D Schedule	NRC-P3 – continued		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Part I - Nontransferable - continued			7	
NRC-P3 Amount Claimed Against Income Tax (Line 1)		Line 11 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Income Tax (Line 2)		Line 13 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Income Tax (Line 3)	Enter amount of allowable credit claimed against	Line 15 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Income Tax (Line 4)	corporation income tax in Column A.	Line 17 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Income Tax (Line 5)		Line 19 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Income Tax (Line 6)		Line 21 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 1)		Line 11 Position(s) 68-75	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 2)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 13 Position(s) 68-75	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 3)		Line 15 Position(s) 68-75	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 4)		Line 17 Position(s) 68-75	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 5)		Line 19 Position(s) 68-75	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 6)		Line 21 Position(s) 68-75	Numeric	8
Part II – Transferable				
Transferable, Nonrefundable Priority 3 Tax Credit Code (Line 7)		Line 37 Position(s) 42-44	Numeric	3
Transferable, Nonrefundable Priority 3 Tax Credit Code (Line 8)	Enter 3-digit credit code. If not applicable, leave blank.	Line 41 Position(s) 42-44	Numeric	3
Transferable, Nonrefundable Priority 3 Tax Credit Code (Line 9)		Line 45 Position(s) 42-44	Numeric	3
NRC-P3 Amount Claimed Against Income Tax (Line 7)		Line 37 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Income Tax (Line 8)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 41 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Income Tax (Line 9)	orporation moonie tax in obtainin A.	Line 45 Position(s) 51-58	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 7)		Line 37 Position(s) 68-75	Numeric	8
NRC-P3 Amount Claimed Against Franchise Tax (Line 8)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 41 Position(s) 68-75	Numeric	8

Printed Variable Data Fields - CIFT-620-2D Schedule NRC-P3 - continued					
Field Name	Field Name		Exact Placement on Grid	Field Type	Field Length
NRC-P3 Amount Claimed Against Franchise Tax (Line 9)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 45	Position(s) 68-75	Numeric	8
Part II - Transferable - continued	·				
LDR State Certification Number (Line 7A)	Enter the LDD State Cartification Number from	Line 39	Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 8A)	Enter the LDR State Certification Number from Form R-6135.	Line 43	Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 9A)	Folili K-0135.	Line 47	Position(s) 9-34	Alphanumeric	26
Total NRC-P3 Income Tax Credits (Line 10)	Add credit amounts claimed against Income Tax (Column A, Lines 1-9).	Line 49	Position(s) 56-63	Numeric	8
Total NRC-P3 Franchise Tax Credits (Line 11)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-9).	Line 51	Position(s) 68-75	Numeric	8

NOTE: The fields for the descriptions of the credits are not listed above because those fields do not need to meet any particular specifications. However, they MUST be completed when applicable.

Exact Placement Specifications – CIFT-620-2D Schedule RC-P2 (Refundable Priority 2 Tax Credits)

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Reference Points (6):

1 positioned on Line 10 in Position 46.
1 positioned on Line 18 in Position 46.
1 positioned on Line 25 in Position 46.
1 positioned on Line 41 in Position 46.
1 positioned on Line 61 in Position 26.
1 positioned on Line 61 in Position 80.

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22247) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (must be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

Printed Variable Data Fields – CIFT-620-2D Schedule RC-P2				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10
Part I – Nontransferable				
Refundable Priority 2 Tax Credit Code (Line 1)		Line 11 Position(s) 42-44	Numeric	3
Refundable Priority 2 Tax Credit Code (Line 2)		Line 13 Position(s) 42-44	Numeric	3
Refundable Priority 2 Tax Credit Code (Line 3)	Enter 3-digit credit code. If not applicable, leave	Line 15 Position(s) 42-44	Numeric	3
Refundable Priority 2 Tax Credit Code (Line 4)	blank.	Line 17 Position(s) 42-44	Numeric	3
Refundable Priority 2 Tax Credit Code (Line 5)	L	Line 19 Position(s) 42-44	Numeric	3

Printed	l Variable Data Fields – CIFT-620-2D Schedul	e RC-P2 – continued		Field
Field Name	Comments	Exact Placement on Grid	Field Type	Length
Part I - Nontransferable - continued				
RC-P2 Amount Claimed Against Income Tax (Line 1)		Line 11 Position(s) 51-57	Numeric	7
RC-P2 Amount Claimed Against Income Tax (Line 2)		Line 13 Position(s) 51-57	Numeric	7
RC-P2 Amount Claimed Against Income Tax (Line 3)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 15 Position(s) 51-57	Numeric	7
RC-P2 Amount Claimed Against Income Tax (Line 4)	corporation meetine tax in column 7.	Line 17 Position(s) 51-57	Numeric	7
RC-P2 Amount Claimed Against Income Tax (Line 5)		Line 19 Position(s) 51-57	Numeric	7
RC-P2 Amount Claimed Against Franchise Tax (Line 1)		Line 11 Position(s) 68-74	Numeric	7
RC-P2 Amount Claimed Against Franchise Tax (Line 2)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 13 Position(s) 68-74	Numeric	7
RC-P2 Amount Claimed Against Franchise Tax (Line 3)		Line 15 Position(s) 68-74	Numeric	7
RC-P2 Amount Claimed Against Franchise Tax (Line 4)		Line 17 Position(s) 68-74	Numeric	7
RC-P2 Amount Claimed Against Franchise Tax (Line 5)		Line 19 Position(s) 68-74	Numeric	7
Part II - Transferable				
Transferable, Refundable Priority 3 Tax Credit Code (Line 6)		Line 26 Position(s) 41-45	Alphanumeric	3
Transferable, Refundable Priority 3 Tax Credit Code (Line 7)	Enter 3-character credit code. If not applicable, leave blank. The value should be hard-coded	Line 30 Position(s) 41-45	Alphanumeric	3
Transferable, Refundable Priority 3 Tax Credit Code (Line 8)	to 62F.	Line 34 Position(s) 41-45	Alphanumeric	3
RC-P2 Amount Claimed Against Income Tax (Line 6)		Line 26 Position(s) 51-58	Numeric	8
RC-P2 Amount Claimed Against Income Tax (Line 7)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 30 Position(s) 51-58	Numeric	8
RC-P2 Amount Claimed Against Income Tax (Line 8)		Line 34 Position(s) 51-58	Numeric	8
LDR State Certification Number (Line 6A)		Line 28 Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 7A)	Enter the LDR State Certification Number from	Line 32 Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 8A)	Form R-6135.	Line 36 Position(s) 9-34	Alphanumeric	26

Printed Variable Data Fields - CIFT-620-2D Schedule RC-P2 - continued					
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Part II - Transferable - continued					
Total RC-P2 Income Tax Credits (Line 9)	Add credit amounts claimed against Income Tax (Column A, Lines 1-8).	Line 38 Position(s) 51-58	Numeric	8	
Total RC-P2 Franchise Tax Credits (Line 10)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-5).	Line 40 Position(s) 68-74	Numeric	8	

NOTE: The fields for the descriptions of the credits are not listed above because those fields do not need to meet any particular specifications. However, they MUST be completed when applicable.

Exact Placement Specifications - CIFT-620-2D Schedule A and Schedule B

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

•

Document Identification Number: The document identification number (22250) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

	Printed Variable Data Fields – CIFT-620-2D	Schedule A		
				Field
Field Name	Comments	Exact Placement on Grid	Field Type	Length
Louisiana Revenue Account Number	This field should be formatted as "########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10
Schedule A- Line 1 Yes	At the end of the tax year, did you directly or indirectly own	Line 10 Position(s) 54	Alpha	1
	50% or more of the voting stock of any corporation or an			
	interest of any partnership, including any entity treated as a			
	corporation or partnership?			
	Print an "X" (uppercase) in the specified position in order to			
	denote the indicator. Do not print a box, only the "X" if			
	applicable.			
Schedule A- Line 1 No	At the end of the tax year, did you directly or indirectly own	Line 13 Position(s) 54	Alpha	1
Concadie // Line / No	50% or more of the voting stock of any corporation or an	Line to Tosidon(s) 54	/ lipila	'
	interest of any partnership, including any entity treated as a			
	corporation or partnership?			
	Print an "X" (uppercase) in the specified position in order to			
	denote the indicator. Do not print a box, only the "X" if applicable.			
	арріїсавіе.			
Line 1(1)	Federal Employer Identification Number	Line 10 Position(s) 61-70	Numeric w hyphen	10
Line 1(1)	Percentage	Line 10 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(2)	Federal Employer Identification Number	Line 12 Position(s) 61-70	Numeric w hyphen	10
Line 1(2)	Percentage	Line 12 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(3)	Federal Employer Identification Number	Line 13 Position(s) 61-70	Numeric w hyphen	10
Line 1(3)	Percentage	Line 13 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(4)	Federal Employer Identification Number	Line 15 Position(s) 61-70	Numeric w hyphen	10
Line 1(4)	Percentage	Line 15 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(5)	Federal Employer Identification Number	Line 16 Position(s) 61-70	Numeric w hyphen	10
Line 1(5)	Percentage	Line 16 Position(s) 74-79	Numeric(w/Decimal)	6
Schedule A- Line 2 Yes	At the end of the tax year, did any corporation, individual,	Line 19 Position(s) 54	Alpha	1
	partnership, trust, or association directly or indirectly own			
	50% or more of your voting stock?			
	Print an "X" (uppercase) in the specified position in order to			
	denote the indicator. Do not print a box, only the "X" if			
	applicable.			
	I of the seconds	1	1	

Printed Variable Data Fields - CIFT-620-2D Schedule A - continued				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Schedule A- Line 2 No	At the end of the tax year, did any corporation, individual, partnership, trust, or association directly or indirectly own 50% or more of your voting stock? Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 22 Position(s) 54	Alpha	1
Line 2(1)	Federal Employer Identification Number	Line 18 Position(s) 61-70	Numeric w hyphen	10
Line 2(1)	Percentage	Line 18 Position(s) 74-79	Numeric(w/Decimal)	6
Line 2(2)	Federal Employer Identification Number	Line 20 Position(s) 61-70		10
Line 2(2)	Percentage	Line 20 Position(s) 74-79		6
Line 2(3)	Federal Employer Identification Number	Line 22 Position(s) 61-70	Numeric w hyphen	10
Line 2(3)	Percentage	Line 22 Position(s) 74-79	Numeric(w/Decimal)	6
Line 2(4)	Federal Employer Identification Number	Line 23 Position(s) 61-70	Numeric w hyphen	10
Line 2(4)	Percentage	Line 23 Position(s) 74-79	Numeric(w/Decimal)	6
Line 2(5)	Federal Employer Identification Number	Line 25 Position(s) 61-70	Numeric w hyphen	10
Line 2(5)	Percentage	Line 25 Position(s) 74-79	Numeric(w/Decimal)	6
Schedule A- Line 3 Yes	If you answered yes to Line I on CIFT 620, list the FEIN of five of those entities. Also, attach a schedule listing the names, addresses FEIN of all entities. Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 28 Position(s) 54	Alpha	1
Schedule A- Line 3 No	If you answered No to Line I on CIFT 620, list the FEIN of five of those entities. Also, attach a schedule listing the names, addresses FEIN of all entities. Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 31 Position(s) 54	Alpha	1
Line 3(1)	Federal Employer Identification Number	Line 27 Position(s) 61-70	Numeric w hyphen	10
Line 3(1)	Percentage	Line 27 Position(s) 74-79		6
Line 3(2)	Federal Employer Identification Number	Line 29 Position(s) 61-70		10
Line 3(2)	Percentage	Line 29 Position(s) 74-79	Numeric(w/Decimal)	6
Line 3(3)	Federal Employer Identification Number	Line 31 Position(s) 61-70	Numeric w hyphen	10
Line 3(3)	Percentage	Line 31 Position(s) 74-79	Numeric(w/Decimal)	6

	Printed Variable Data Fields - CIFT-620-2D Schee	dule A- continued		
Field Name	O-mmonts.	Frank Blandmant on Orid	Field Tone	Field
Field Name	Comments Fordered Franciscon Identification Number	Exact Placement on Grid		Length
Line 3(4)	Federal Employer Identification Number	Line 32 Position(s) 61-70		10
Line 3(4)	Percentage	Line 32 Position(s) 74-79		6
Line 3(5)	Federal Employer Identification Number	Line 34 Position(s) 61-70		10
Line 3(5)	Percentage	Line 34 Position(s) 74-79	Numeric(w/Decimal)	6
	Printed Variable Data Fields – CIFT-620-2D	Schedule B		
Field Name	Comments		Field Type	Field Length
Line 1A	Total Amount of Sales- Net Sales of Merchandise and / or Charges	Line 41 Position(s) 43-54	Alpha	12
Line 1A	Total Amount of Sales Net Sales of Merchandise and / or Charges Louisiana Taxable Income	Line 41 Position(s) 56-67	Numeric	12
Line 1B	Net Sales of Merchandise and / or Charges -Total Charges for Services	Line 43 Position(s) 43-54	Numeric	12
Line 1B	Net Sales of Merchandise and / or Charges -Louisiana Amount-Charges for Services	Line 43 Position(s) 56-67	Numeric	12
Line 1C	Net Sales of Merchandise and / or Charges -Total Amount Other Gross Apportionable Income	Line 45 Position(s) 43-54	Numeric	12
Line 1C	Net Sales of Merchandise and / or Charges -LA Amount Other Gross Apportionable Income	Line 45 Position(s) 56-67	Numeric	12
Line 1D	Total Net Sales of Merchandise and / or Charges- Add the Amounts in Columns 1 and 2	Line 47 Position(s) 43-54	Numeric	12
Line 1D	Total LA Amount - Net Sales of Merchandise and / or Charges- Total Add the Amounts in Columns 1 and 2	Line 47 Position(s) 56-67	Numeric	12
Line 1D	Percentage	Line 47 Position(s) 73-78	Numeric(w/Decimal)	6
Line 2	For certain oil & gas businesses only. Wages, salaries, and other personal service compensation paid during the year. (See instructions.)Ratio not used. Check box.	Line 49 Position(s) 41	Alpha	1
	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.			
Line 2	For Certain Oil and Gas Only- Wages, salaries, and other personal service compensation paid during the year/Total Amount	Line 49 Position(s) 43-54	Numeric	12
Line 2	For Certain Oil and Gas Only- Wages, salaries, and other personal service compensation paid during the year/Total Amount/ LA Amount	Line 49 Positions(s) 56-67		12
Line 2	Percentage	Line 49 Positions(s) 73-78	Numeric(w/Decimal)	6

	Printed Variable Data Fields - CIFT-620-2D Schedule B- continued				
Field Name	Comments		Field Type	Field Length	
Line 3	For Certain Oil and Gas Only-Income tax property ratio-Income Tax Property Ratio Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 51 Positions(s) 55	Alpha	1	
Line 3	Percentage	Line 51 Positions(s) 73-78	Numeric(w/Decimal)	6	
Line 4	Percentage- ONLY corporations primarily in the oil and gas business, enter ratio from Line 1D, Column 4 (See Instructions.)	Line 53 Positions(s) 73-78	Numeric	6	
Line 5	Total of Percent in Column 3	Line 55 Position(s) 73-78	Numeric(w/Decimal)	6	
Line 6	Average of Percent — Divide Line 5 by applicable number of ratios. Enter here and on CIFT-620, Line D	Line 57 Position(s) 73-78	Numeric(w/Decimal)	6	

Exact Placement Specifications – CIFT-620-2D Schedule C

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22251) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed except for Line 3, Line 9, Lines 13 and 15.

	Printed Variable Data Fields – CIFT-620-2D	Schedule C		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Louisiana Revenue Account Number	This field should be formatted as "########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10
Intangible Assets- Located Everywhere				
Line 1	Cash - Beginning of Year	Line 11 Position(s) 27-38	Numeric	12
Line 1	Cash - End of Year	Line 11 Position(s) 41-52	Numeric	12
Line 2	Notes and Accounts Receivable - Beginning of Year	Line 13 Position(s) 27-38	Numeric	12
Line 2	Notes and Accounts Receivable – End of Year	Line 13 Position(s) 41-52	Numeric	12
(Line 3)	Reserve for Bad Debts- Beginning of Year- Negative Amount	Line 15 Position(s) 27-38	Numeric	12
(Line 3)	Reserve for Bad Debts- End of Year- Negative Amount	Line 15 Position(s) 41-52	Numeric	12
Line 4	Investment in U.S. govt. obligations- Beginning of Year	Line 17 Position(s) 27-38	Numeric	12
Line 4	Investment in U.S. govt. obligations- End of Year	Line 17 Position(s) 41-52	Numeric	12

Printed Variable Data Fields – CIFT-620-2D Schedule C (continued)

Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
			1	
Line 5	Stock and Obligation Assets- Beginning of Year	Line 19 Position(s) 27-38	Numeric	12
Line 5	Stock and Obligation Assets- End of Year	Line 19 Position(s) 41-52	Numeric	12
Line 6	Other Investments- Beginning of Year	Line 21 Position(s) 27-38	Numeric	12
Line 6	Other Investments- End of Year	Line 21 Position(s) 41-52	Numeric	12
Line 7	Loans to Stockholders- Beginning of Year	Line 23 Position(s) 27-38	Numeric	12
Line 7	Loans to Stockholders- End of Year	Line 23 Position(s) 41-52	Numeric	12
Line 8	Other Intangible Assets- Beginning of Year	Line 25 Position(s) 27-38	Numeric	12
Line 8	Other Intangible Assets- End of Year	Line 25 Position(s) 41-52	Numeric	12
(Line 9)	Accumulated Depreciation- Beginning of Year	Line 27 Position(s) 27-38	Numeric	12
(Line 9)	Accumulated Depreciation- End of Year	Line 27 Position(s) 41-52	Numeric	12
Line 10	Total Intangible Assets Add Line 1-9- Beginning of Year	Line 29 Position(s) 27-38	Numeric	12
Line 10	Total Intangible Assets Add Line 1-9- End of Year	Line 29 Position(s) 41-52	Numeric	12
Real and Tangible Assets- Located Ever				
Line 11	Inventories- Beginning of Year	Line 32 Position(s) 27-38	Numeric	12
Line 11	Inventories- End of Year	Line 32 Position(s) 41-52	Numeric	12
Line 12	Blds, and other depreciable Assets- Beginning of Year	Line 34 Position(s) 27-38	Numeric	12
Line 12	Blds, and other depreciable Assets- End of Year	Line 34 Position(s) 41-52	Numeric	12
(Line 13)	Accumulated Depreciation- Beginning of Year	Line 36 Position(s) 27-38	Numeric	12
(Line 13)	Accumulated Depletion- End of Year	Line 36 Position(s) 41-52	Numeric	12
Line 14	Depletable Assets- Beginning of Year	Line 38 Position(s) 27-38	Numeric	12
Line 14	Depletable Assets- Beginning of Year	Line 38 Position(s) 41-52	Numeric	12
(Line 15)	Accumulated Depletion- Beginning of Year	Line 40 Position(s) 27-38	Numeric	12
(Line 15)	Accumulated Depletion- End of Year	Line 40 Position(s) 41-52	Numeric	12
Line 16	Land- Beginning of Year	Line 42 Position(s) 27-38	Numeric	12
Line 16	Land- End of Year	Line 42 Position(s) 41-52	Numeric	12
Line 17	Other Real and Tangible Assets- Beginning of Year	Line 44 Position(s) 27-38	Numeric	12
Line 17	Other Real and Tangible Assets - End of Year	Line 44 Position(s) 41-52	Numeric	12
Line 18	Excessive Reserves. Assets not reflected on books, or	Line 46 Position(s) 27-38	Numeric	12
	undervalued assets- Beginning of Year			
Line 18	Excessive Reserves. Assets not reflected on books, or	Line 46 Position(s) 41-52	Numeric	12
	undervalued assets- End of Year	, ,		
Line 19	Total Real and Tangible Assets- Add Lines 11 through 18-	Line 48 Position(s) 27-38	Numeric	12
	Beginning of Year			
Line 19	Total Real and Tangible Assets- Add Lines 11 through 18-	Line 48 Position(s) 41-52	Numeric	12
	End of Year			
Line 20	Less real and tangible assets not used in production of net	Line 50 Position(s) 27-38	Numeric	12
	apportionable income- Beginning of Year			
Line 20	Less real and tangible assets not used in production of net	Line 50 Position(s) 41-52	Numeric	12
	apportionable income- End of Year			

	Printed Variable Data Fields – CIFT-620-2D Scheo	lule C (cont	inued)		
Field Name	Comments			Field Type	Field Length
Line 21	Balance- Subtract line 20 from Line 19- Beginning of Year	Line 52	Position(s) 27-38	Numeric	12
Line 21	Balance- Subtract line 20 from Line 19- Beginning of Year	Line 52	Position(s) 41-52	Numeric	12
Line 22	Beginning of year balance- End of Year	Line 54	Position(s) 41-52	Numeric	12
Line 23	Total Add Lines 21 and 22- End of Year	Line 56	Position(s) 41-52	Numeric	12
Real and Tangible Assets- Located in Lou					
Line 11	Inventories- Beginning of Year	Line 32	Position(s) 54-65	Numeric	12
Line 11	Inventories- End of Year	Line 32	Position(s) 68-79	Numeric	12
Line 12	Blds, and other depreciable Assets- Beginning of Year	Line 34	Position(s) 54-65	Numeric	12
Line 12	Blds, and other depreciable Assets- End of Year	Line 34	Position(s) 68-79	Numeric	12
(Line 13)	Accumulated Depreciation- Beginning of Year	Line 36	Position(s) 54-65	Numeric	12
(Line 13)	Accumulated Depletion- End of Year	Line 36	Position(s) 68-79	Numeric	12
Line 14	Depletable Assets- Beginning of Year	Line 38	Position(s) 54-65	Numeric	12
Line 14	Depletable Assets- End of Year	Line 38	Position(s) 68-79	Numeric	12
(Line 15)	Accumulated Depletion- Beginning of Year	Line 40	Position(s) 54-65	Numeric	12
(Line 15)	Accumulated Depletion- End of Year	Line 40	Position(s) 68-79	Numeric	12
Line 16	Land- Beginning of Year	Line 42	Position(s) 54-65	Numeric	12
Line 16	Land- End of Year	Line 42	Position(s) 68-79	Numeric	12
Line 17	Other Real and Tangible Assets- Beginning of Year	Line 44	Position(s) 54-65	Numeric	12
Line 17	Other Real and Tangible Assets- End of Year	Line 44	Position(s) 68-79	Numeric	12
Line 18	Excessive Reserves. Assets not reflected on books, or	Line 46	Position(s) 54-65	Numeric	12
	undervalued assets- Beginning of Year		(-, -		
Line 18	Excessive Reserves. Assets not reflected on books, or	Line 46	Position(s) 68-79	Numeric	12
	undervalued assets- End of Year		()		
Line 19	Total Real and Tangible Assets- Add Lines 11 through 18-	Line 48	Position(s) 54-65	Numeric	12
	Beginning of Year		()		
Line 19	Total Real and Tangible Assets- Add Lines 11 through 18-	Line 48	Position(s) 68-79	Numeric	12
	End of Year		()		
Line 20	Less real and tangible assets not used in production of net	Line 50	Position(s) 54-65	Numeric	12
	apportionable income- Beginning of Year				
Line 20	Less real and tangible assets not used in production of net	Line 50	Position(s) 68-79	Numeric	12
	apportionable income- End of Year		()		
Line 21	Balance- Subtract line 20 from Line 19- Beginning of Year	Line 52	Position(s) 54-65	Numeric	12
Line 21	Balance- Subtract line 20 from Line 19- End of Year	Line 52	Position(s) 68-79	Numeric	12
Line 22	Beginning of year balance- End of Year	Line 54	Position(s) 68-79	Numeric	12
Line 23	Total Add Lines 21 and 22- End of Year	Line 56	Position(s) 68-79	Numeric	12
Line 24	Income Tax Property Ratio(Line 23, Column 4/Line23,	Line 58	Position(s) 75-78	Numeric (w Decimal)	6
	Column 2)		(-)		
	,				+

Exact Placement Specifications - CIFT-620-2D Schedule D

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22252) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (must be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should <u>not</u> be left blank, unless specifically directed to do so. Use "0" (zero) as the default.

Printed Variable Data Fields – CIFT-620-2D Schedule D					
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10	
Line 1A	Total- Gross Receipts	Line 10 Position(s) 28-39	Numeric	12	
Line 1B	Total- Less returns and allowances	Line 12 Position(s) 28-39	Numeric	12	
Line 1C	Balance, Subtract Line 1B from Line 1A	Line 14 Position(s) 28-39	Numeric	12	
Line 2	Less: Cost of goods sold and/ or operations- Attach Schedule	Line 16 Position(s) 28-39	Numeric	12	
Line 3	Gross Profit- Subtract Line 2 from Line 1C	Line 18 Position(s) 28-39	Numeric	12	

Printed Variable Data Fields - CIFT-620-2D Schedule D - continued				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Line 4	Gross Rents	Line 20 Position(s) 28-39	Numeric	12
Line 5	Gross Royalties	Line 22 Position(s) 28-39	Numeric	12
Line 6	Income from estates, trusts, and partnerships	Line 24 Position(s) 28-39	Numeric	12
Line 7	Income from construction, repair, etc.	Line 26 Position(s) 28-39	Numeric	12
Line 8	Other Income- Attach Schedule	Line 28 Position(s) 28-39	Numeric	12
Line 9	Add Lines 3 through 8.	Line 30 Position(s) 28-39	Numeric	12
Line 10	Compensation of Officers	Line 32 Position(s) 28-39	Numeric	12
Line 11	Salaries and wages (not deducted elsewhere)	Line 34 Position(s) 28-39	Numeric	12
Line 12	Repairs	Line 36 Position(s) 28-39	Numeric	12
Line 13	Bad Debt	Line 38 Position(s) 28-39	Numeric	12
Line 14	Rent	Line 40 Position(s) 28-39	Numeric	12
Line 15	Taxes and Licenses	Line 42 Position(s) 28-39	Numeric	12
Line 16	Interest	Line 44 Position(s) 28-39	Numeric	12
Line 17	Charitable Contributions	Line 46 Position(s) 28-39	Numeric	12
Line 18	Depreciation	Line 48 Position(s) 28-39	Numeric	12
Line 19	Depletion	Line 50 Position(s) 28-39	Numeric	12
Line 20	Advertising	Line 52 Position(s) 28-39	Numeric	12
Line 21	Pension, Profit Sharing, Stock Bonus, and Annuity Plans	Line 54 Position(s) 28-39	Numeric	12
Line 22	Other employee benefit plans	Line 10 Position(s) 66-77	Numeric	12
Line 23	Other Deductions	Line 12 Position(s) 66-77	Numeric	12
Line 24	Total Deductions- Add Line 10 through 23	Line 14 Position(s) 66-77	Numeric	12
Line 25	Net Income from All Sources- subtract Line 24 from 9	Line 16 Position(s) 66-77	Numeric	12
Line 26A	Net rents and royalties form immovable or corporeal movable property	Line 20 Position(s) 66-77	Numeric	12
Line 26B	Royalties from the use of patents, trademarks, etc.	Line 22 Position(s) 66-77	Numeric	12
Line 26C	Income from estates, trusts, and partnerships	Line 24 Position(s) 66-77	Numeric	12
Line 26D	Income from construction, repair, etc	Line 26 Position(s) 66-77	Numeric	12
Line 26E	Other Allocable Income	Line 28 Position(s) 66-77	Numeric	12
(Line 26F)	Allocable Expenses	Line 30 Position(s) 66-77	Numeric	12
Line 26G	Net allocable income from all sources	Line 32 Position(s) 66-77	Numeric	12
Line 27	Net income subject to apportionment- Subtract Line 26G from Line 25	Line 34 Position(s) 66-77	Numeric	12
Line 28	Net income apportioned to Louisiana	Line 36 Position(s) 66-77	Numeric	12
Line 29A	Net rents and Royalties and Royalties from immovable or corporeal movable property	Line 40 Position(s) 66-77	Numeric	12
Line 29B	Royalties form the use of patents, trademarks, etc.	Line 42 Position(s) 66-77	Numeric	12

Printed Variable Data Fields - CIFT-620-2D Schedule D- continued					
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Line 29C	Royalties form the use of patents, trademarks, etc.	Line 44 Position(s) 66-77	Numeric	12	
Line 29D	Income from construction, repair, etc.	Line 46 Position(s) 66-77	Numeric	12	
Line 29E	Other Allocable Income	Line 48 Position(s) 66-77	Numeric	12	
(Line 29F)	Allocable Expenses	Line 50 Position(s) 66-77	Numeric	12	
Line 29G	Net Allocable Income from Louisiana Sources	Line 52 Position(s) 66-77	Numeric	12	
Line 30	Louisiana Net Income before loss adjustments and federal income tax deduction- Add Line 28 and Line 29G	Line 54 Position(s) 66-77	Numeric	12	

Exact Placement Specifications – CIFT-620-2D Schedule E and Schedule G

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22253) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

Printed Variable Data Fields – CIFT-620-2D Schedule E				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Louisiana Revenue Account Number	This field should be formatted as "#########".	Line 4 Position(s) 70-80	Numeric	10
	NOTE: This is not the FEIN.			
Schedule E- Reconciliation of Income Per I	Books with Income Per Return			
Line 1	Net income per books	Line 8 Position(s) 31-42	Numeric	12
Line 2	Louisiana Income Tax	Line 10 Position(s) 31-42	Numeric	12
Line 3	Excess of Capital Loss over Capital Gains	Line 12 Position(s) 31-42	Numeric	12
Line 4	Taxable Income not recorded on books this year, but not	Line 14 Position(s) 31-42	Numeric	12
	deducted in this return:			
	Line 5 Expenses Recorded on books this	s year		_
Line 5a	Depreciation	Line 18 Position(s) 31-42	Numeric	12
Line 5b	Depletion	Line 20 Position(s) 31-42	Numeric	12
Line 5c	Other	Line 22 Position(s) 31-42	Numeric	12
Line 6	Total- Add Line 1 through 5c	Line 8 Position(s) 69-80	Numeric	12

	Printed Variable Data Fields – CIFT-620-2D Scheo	lule E - Continues		
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Line 7	Income recorded on books this yea, but not included in this return	Line 10 Position(s) 69-80	Numeric	12
Line 8 Deductions				
Line 8a	Depreciation	Line 14 Position(s) 69-80	Numeric	12
Line 8b	Depletion	Line 16 Position(s) 69-80	Numeric	12
Line 8c	Other	Line 18 Position(s) 69-80	Numeric	12
Line 9	Total- Add Lines 7 and 8c	Line 20 Position(s) 69-80	Numeric	12
Line 10	Net Income from all Sources per return- Subtract Line 9 from Line 6	Line 22 Position(s) 69-80	Numeric	12
	Printed Variable Data Fields - CIFT-620-2	D Schedule G		
Field Name	Comments		Field Type	Field Length
Liabilities and Capital from Balance	e Sheet- Beginning of Year			
Line 1, Col 1	Accounts Payable	Line 27 Position(s) 52-63	Numeric	12
Line 2, Col 1	Mortgages, notes, and bonds payable one year old or less at balance sheet date and having a maturity of one year or less from original date incurred	Line 29 Position(s) 52-63	Numeric	12
Line 3, Col 1	Other current liabilities	Line 31 Position(s) 52-63	Numeric	12
Line 4, Col 1	Loans from stockholders	Line 33 Position(s) 52-63	Numeric	12
Line 5, Col 1	Due to subsidiaries and affiliates	Line 35 Position(s) 52-63	Numeric	12
Line 6, Col 1	Mortgages, notes, and bonds payable more than one year old at balance sheet date or having a maturity of more than one year from original date incurred	Line 37 Position(s) 52-63	Numeric	12
Line 7, Col 1	Other liabilities	Line 39 Position(s) 52-63	Numeric	12
Line 8, Col 1	Capital stock: a. Preferred Stock	Line 41 Position(s) 52-63	Numeric	12
Line 8, Col 1	Capital stock: b. Common Stock	Line 43 Position(s) 52-63	Numeric	12
Line 9, Col 1	Paid-in or capital surplus	Line 45 Position(s) 52-63	Numeric	12
2.110 0, 001 1	raiu-iii oi capitai surpius	2.110 40 1 03111011(3) 02-03	Talliono	12
Line 10, Col 1	Surplus reserves	Line 47 Position(s) 52-63	Numeric	12
Line 11, Col 1	Earned surplus and undivided profits	Line 49 Position(s) 52-63	Numeric	12
Line 12, Col 1	Excessive reserves or undervalued assets	Line 51 Position(s) 52-63	Numeric	12
Line 13, Col 1	Total- Add Lines 1 through 12.	Line 53 Position(s) 52-63	Numeric	12

Field Name	Comments			Field Type	Field Length
Liabilities and Capital from E	Balance Sheet- End of Year				<u> </u>
Line 1, Col 2	Accounts Payable	Line 27	Position(s) 67-78	Numeric	12
Line 2, Col 2	Mortgages, notes, and bonds payable one year old or less	Line 29	Position(s) 67-78	Numeric	12
	at balance sheet date and having a maturity of one year or				
	less from original date incurred				
Line 3, Col 2	Other current liabilities	Line 31	Position(s) 67-78	Numeric	12
Line 4, Col 2	Loans from stockholders	Line 33	Position(s) 67-78	Numeric	12
Line 5, Col 2	Due to subsidiaries and affiliates	Line 35	Position(s) 67-78	Numeric	12
Line 6, Col 2	Mortgages, notes, and bonds payable more than one year	Line 37	Position(s) 67-78	Numeric	12
	old at balance sheet date or having a maturity of more than				
	one year from original date incurred				
Line 7, Col 2	Other liabilities	Line 39	Position(s) 67-78	Numeric	12
Line 8, Col 2	Capital stock: a. Preferred Stock	Line 41	Position(s) 67-78	Numeric	12
Line 8, Col 2	Capital stock: a. Common Stock	Line 43	Position(s) 67-78	Numeric	12
Line 9, Col 2	Paid-in or capital surplus	Line 45	Position(s) 67-78	Numeric	12
Line 10, Col 2	Surplus reserves	Line 47	Position(s) 67-78	Numeric	12
Line 11, Col 2	Earned surplus and undivided profits	Line 49	Position(s) 67-78	Numeric	12
Line 12, Col 2	Excessive reserves or undervalued assets	Line 51	Position(s) 67-78	Numeric	12
Line 13, Col 2	Total- Add Lines 1 through 12.	Line 53	Position(s) 67-78	Numeric	12

Exact Placement Specifications - CIFT-620-2D Schedule F

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22254) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should <u>not</u> be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

Printed Variable Data Fields – CIFT-620-2D Schedule F				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Schedule F Reconciliation of Federal and Louisiana N	et Income			
Louisiana Revenue Account Number	This field should be formatted as "########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10
Line 1, Col 1	Enter the total net income calculated under federal law before special deductions	Line 12 Position(s) 67-78	Numeric	12
Line 2 Additions to Federal Net Income				
Line 2a, Col 1	Louisiana income Tax	Line 16 Position(s) 67-78	Numeric	12
Line 2b, Col 1	Related Members, interest\ intangible\management fee expenses or cost. From Form R- 6950	Line 18 Position(s) 67-78	Numeric	12
Line 2c, Col 1	Donation to School Tuition Organization Credit	Line 20 Position(s) 67-78	Numeric	12
Line 2d, Col 1	Other Additions.	Line 22 Position(s) 67-78	Numeric	12
Line 2e, Col 1	Total Additions- Add Line 2a through 2d.	Line 24 Position(s) 67-78	Numeric	12

Printed Variable Data Fields – CIFT-620-2D Schedule F- Continues					
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Subtractions from Federal Net Income					
Line 3a, Col 1	Bank Dividends	Line 28 Position(s) 67-78	Numeric	12	
Line 3b, Col 1	All other Dividends	Line 30 Position(s) 67-78	Numeric	12	
Line 3c, Col 1	Interest	Line 32 Position(s) 67-78	Numeric	12	
Line 3d, Col 1	Road Home- The amount included in federal taxable income	Line 34 Position(s) 67-78	Numeric	12	
Line 3e, Col 1	LA depletion in excess federal depletion	Line 36 Position(s) 67-78	Numeric	12	
Line 3f, Col 1	Expenses not deducted on the federal return due to IRS Code Section 280C	Line 38 Position(s) 67-78	Numeric	12	
Line 3g, Col 1	Exempt amount of related members interest\intangible\management fee expenses or costs, From Form R- 6950	Line 40 Position(s) 67-78	Numeric	12	
Line 3h, Col 1	Compensation for Disaster Services	Line 42 Position(s) 67-78	Numeric	12	
Line 3i, Col 1	Expenses NOT Deducted	Line 44 Position(s) 67-78	Numeric	12	
Line 3j, Col 1	Covid Relief Benefits	Line 46 Position(s) 67-78	Numeric	<mark>12</mark>	
Line 3k, Col 1	Other Subtractions	Line 48 Position(s) 67-78			
Line 3I, Col 1	Total Subtractions	Line 50 Position(s) 67-78	Numeric	12	
Line 4	Louisiana Net Income from All Sources- This amount should agree with Schedule D, Line 25	Line 52 Position(s) 67-78	Numeric	12	

Exact Placement Specifications – CIFT-620-2D Schedule G1

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22255) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are **not** allowed.

Printed Variable Data Fields – CIFT-620-2D Schedule G1					
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10	
G-1 Computation of Franchise Tax Base					
Line 1A	Common Stock- Include paid – in or Capital Surplus	Line 13 Position(s) 66-77	Numeric	12	
Line 1B	Preferred Stock- Include paid in or Capital Surplus	Line 15 Position(s) 66-77	Numeric	12	
Line 2	Total Capital Stock- Add Line 1A and 1B	Line 17 Position(s) 66-77	Numeric	12	
Line 3	Surplus and Undivided Profits	Line 19 Position(s) 66-77	Numeric	12	
Line 4	Surplus Reserves- include any excessive reserves or undervalued assets	Line 21 Position(s) 66-77	Numeric	12	
Line 5	Total Add Lines 2,3, and 4	Line 23 Position(s) 66-77	Numeric	12	

Printed Variable Data Fields – CIFT-620-2D Schedule G1- Continues				
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Line 6	Due to Subsidiaries and Affiliates- Do not net the receivables	Line 25 Position(s) 66-77	Numeric	12
Line 7	Deposit Liabilities to Affiliates- Include in the amount on Line 7	Line 27 Position(s) 66-77	Numeric	12
Line 8	Accounts Payable less than 180 days old- Include in the amount on Line 6	Line 29 Position(s) 66-77	Numeric	12
Line 9	Adjusted Debt to Affiliates-Subtract Line 7 and 8 from 6	Line 31 Position(s) 66-77	Numeric	12
Line 10 a	If Line 9 is greater than zero, AND Line 5 is greater than or equal to zero, subtract Line 5 from Line 9, IF both conditions of this line do not apply, skip to Line10B	Line 33 Position(s) 66-77	Numeric	12
Line 10b	If Line 9 is greater than zero, AND Line 5 is less than or equal to zero, subtract Line 5 from Line 9. Multiply the difference by 50 percent and enter the result here.	Line 35 Position(s) 66-77	Numeric	12
Line 11	Additional Surplus and Undivided Profits- See Instructions	Line 37 Position(s) 66-77	Numeric	12
Schedule G1- Total Franchise Taxable Base				
Line 12	Capital Stock: Common Stock	Line 40 Position(s) 66-77	Numeric	12
Line 12	Capital Stock: Preferred	Line 42 Position(s) 66-77	Numeric	12
Line 13	Paid in or Capital Surplus- Include Items of paid- in capital in excess of par value	Line 44 Position(s) 66-77	Numeric	12
Line 14	Surplus Reserves- Attach Schedule	Line 46 Position(s) 66-77	Numeric	12
Line 15	Earned Surplus and Undivided Profits	Line 48 Position(s) 66-77	Numeric	12
Line 16	Excessive Reserves or Undervalued Assets	Line 50 Position(s) 66-77	Numeric	12
Line 17	Additional Surplus and Undivided Profits- From Line 11 above	Line 52 Position(s) 66-77	Numeric	12
Line 18	Allowable Deductions- See instructions	Line 54 Position(s) 66-77	Numeric	12
Line 19	Total Capital, Surplus, and Undivided Profits- Add Lines 12 through 18. Also enter the total on CIFT-620, Lin e5A. Round to the nearest dollar	Line 56 Position(s) 66-77	Numeric	12

Exact Placement Specifications - CIFT-620-2D Schedule H

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22256) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (must be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should not be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed, except for Line 3, Line 9, Lines 13 and 15.

Printed Variable Data Fields – CIFT-620-2D Schedule H						
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length		
Louisiana Revenue Account Number	This field should be formatted as "########". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric	10		
End of Year- Located Everywhere		·				
Line 1	Cash	Line 11 Position(s) 37-48	Numeric	12		
Line 2	Notes and accounts receivables	Line 13 Position(s) 37-48	Numeric	12		
(Line 3)	Reserve for bad debts	Line 15 Position(s) 37-48	Numeric	12		
Line 4	Investment in U.S. govt. obligations	Line 17 Position(s) 37-48	Numeric	12		
Line 5	Stock and Obligations of subsidiaries	Line 19 Position(s) 37-48	Numeric	12		
Line 6	Other Investments- Attach Schedule	Line 21 Position(s) 37-48	Numeric	12		
Line 7	Loans to Stockholders	Line 23 Position(s) 37-48	Numeric	12		
Line 8	Other Intangible Assets- Attach Schedule	Line 25 Position(s) 37-48	Numeric	12		
(Line 9)	Accumulated Depreciation	Line 27 Position(s) 37-48	Numeric	12		
Line 10	Total Intangible Assets- Add Line 1-9	Line 29 Position(s) 37-48	Numeric	12		
Lin e11	Inventories	Line 31 Position(s) 37-48	Numeric	12		
Line 12	Bldgs, and other depreciable assets	Line 33 Position(s) 37-48	Numeric	12		

Printed Variable Data Fields – CIFT-620-2D Schedule H- Continues					
=	0	E Bl	F:	Field	
Field Name	Comments	Exact Placement on Grid	Field Type	Length	
(Line 13)	Accumulated Depreciation	Line 35 Position(s) 37-48	Numeric	12	
Lin e14	Depletable Assets	Line 37 Position(s) 37-48	Numeric	12	
(Line 15)	Accumulated Depletion	Line 39 Position(s) 37-48	Numeric	12	
Line 16	Land	Line 41 Position(s) 37-48	Numeric	12	
Line 17	Other real & tangible assets	Line 43 Position(s) 37-48	Numeric	12	
Line 18	Excessive reserves, assets not reflected on books, or undervalued assets	Line 45 Position(s) 37-48	Numeric	12	
Line 19	Total real and tangible assets- Add Line 11 through 18	Line 47 Position(s) 37-48	Numeric	12	
Line 20 Total Assets	Total Assets- Add Line 10 and 19	Line 49 Position(s) 37-48	Numeric	12	
End of Year- Located In Louisiana					
Line 1	Cash	Line 11 Position(s) 62-73	Numeric	12	
Line 2	Notes and accounts receivables	Line 13 Position(s) 62-73	Numeric	12	
(Line 3)	Reserve for bad debts	Line 15 Position(s) 62-73	Numeric	12	
Line 4	Investment in U.S. govt. obligations	Line 17 Position(s) 62-73	Numeric	12	
Line 5	Stock and Obligations of subsidiaries	Line 19 Position(s) 62-73	Numeric	12	
Line 6	Other Investments- Attach Schedule	Line 21 Position(s) 62-73	Numeric	12	
Line 7	Loans to Stockholders	Line 23 Position(s) 62-73	Numeric	12	
Line 8	Other Intangible Assets- Attach Schedule	Line 25 Position(s) 62-73	Numeric	12	
(Line 9)	Accumulated Depreciation	Line 27 Position(s) 62-73	Numeric	12	
Line 10	Total Intangible Assets- Add Line 1-9	Line 29 Position(s) 62-73	Numeric	12	
Lin e11	Investories	Line 31 Position(s) 62-73	Numeric	12	
Line 12	Bldgs, and other depreciable assets	Line 33 Position(s) 62-73	Numeric	12	
(Line 13)	Accumulated Depreciation	Line 35 Position(s) 62-73	Numeric	12	
Lin e 14	Depletable Assets	Line 37 Position(s) 62-73	Numeric	12	
(Line 15)	Accumulated Depletion	Line 39 Position(s) 62-73	Numeric	12	
Line 16	Land	Line 41 Position(s) 62-73	Numeric	12	
Line 17	Other real & tangible assets	Line 43 Position(s) 62-73	Numeric	12	
Line 18	Excessive reserves, assets not reflected on books, or undervalued assets	Line 45 Position(s) 62-73	Numeric	12	
Line 19	Total real and tangible assets- Add Line 11 through 18	Line 47 Position(s) 62-73	Numeric	12	
Line 20	Total Assets- Add Line 10 and 19	Line 49 Position(s) 62-73	Numeric	12	
Lin e 21	Franchise Tax Property Ratio – Line 20, Column 2/ Line 20, Col 1	Line 51 Position(s) 73-77	Numeric(w/ Decimal)	6	

Exact Placement Specifications – CIFT-620-2D Schedule I- Computation of Corporate Franchise Tax Apportionment Percentage

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22257) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (must be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

Printed Variable Data Fields - CIFT-620-2D Schedule I					
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length	
Louisiana Revenue Account Number	This field should be formatted as "#########".	Line 4 Position(s) 70-80	Numeric	10	
	NOTE: This is not the FEIN.				
Line 1 Net sales of merchandise, charges	for services, and other revenues				
Line 1A	Net sales of merchandise- Total Amount	Line 12 Position(s) 43-54	Numeric	12	
Line 1A	Net Sales- Louisiana Amount	Line 12 Position(s) 56-67	Numeric	12	
Line 1B	Charges for Services- Total Amount	Line 14 Position(s) 43-54	Numeric	12	
Line 1B	Charges for services- LA Amount	Line 14 Position(s) 56-67	Numeric	12	
Line 1Ci	Other Revenues- Rents and Royalties- Total Amount	Line 18 Position(s) 43-54	Numeric	12	
Line 1Ci	Other Revenues- Rents and Royalties- LA Amount	Line 18 Position(s) 56-67	Numeric	12	
Lin e1Cii	Other Revenues- Dividends and Interest- Total Amount	Line 20 Position(s) 43-54	Numeric	12	
Line 1Cii	Other Revenues- Dividends and Interest- LA Amount	Line 20 Position(s) 56-67	Numeric	12	
Line 1Ciii	Other Dividends and Interest- Total Amount	Line 22 Position(s) 43-54	Numeric	12	
Line 1Ciii	Other Dividends and Interest- LA Amount	Line 22 Position(s) 56-67	Numeric	12	

	Printed Variable Data Fields - CIFT-620-2D Schedule I- Continues				
Field Name	Comments	Exact PI	acement on Grid	Field Type	Field Length
Line 1Civ	All Other Revenue- Total Amount	Line 24	Position(s) 43-54	Numeric	12
Line 1Civ	All Other Revenue-LA Amount	Line 24	Position(s) 56-67	Numeric	12
1D	If ration is not used check the box. Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 26	Position(s) 38	Alpha	1
1D	Total- Total Amount	Line 26	Position(s) 43-54	Numeric	12
1D	Total- LA Amount	Line 26	Position(s) 56-67	Numeric	12
1D	Total- Percent	Line 26	Position(s) 73-78	Numeric w/ Decimal)	6
Line 2	Franchise Tax Property Ratio Check Box- Schedule H, Line 21 Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 28	Position(s) 63	Alpha	1
Line 2	Franchise Tax Property Ratio - Schedule H, Line 21	Line 28	Position(s) 73-78	Numeric	6
Line 3	Total of Percents in Column 3	Line 30	Position(s) 73-78	Numeric	6
Line 4	Average of Percents- Divide Line 3 by number of Ratios. Enter here and on CIFT-620, Line 5B	Line 32	Position(s) 73-78	Numeric(w/ Decimal)	6

Exact Placement Specifications – CIFT-620-2D Schedule J, Schedule J-1, and Schedule K,

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22258) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (<u>must</u> be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should <u>not</u> be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are **not** allowed.

Pri	Printed Variable Data Fields – CIFT-620-2D Schedule J- Calculation of Income Tax					
Field Name	Comments	Exact Pl	acement on Grid	Field Type	Field Length	
Louisiana Revenue Account Number	This field should be formatted as "#########". NOTE: This is not the FEIN.	Line 4	Position(s) 70-80	Numeric	10	
Schedule J- Calculation of Income Tax						
Line 1	Short Period Filers Checkbox Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 8	Position(s) 64	Alpha	1	
Line 1	Enter the amount of net taxable income from CIFT-620, Line 1E	Line 8	Position(s) 67-78	Numeric	12	
Line 2a	First \$25,000 of net taxable income – Net income in Each Bracket	Line 12	Position(s) 55-59	Numeric	5	
Line 2a	First \$25,000 of net taxable income- Tax	Line 12	Position(s) 67-78	Numeric	12	

Pr	rinted Variable Data Fields – CIFT-620-2D Schedule J- Calcul	lation of Income Tax- Continu	ues	
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Line 2b	Next \$25,000 – Net Income in Each Bracket	Line 14 Position(s) 55-59	Numeric	5
Line 2b	Next \$25,000 – Tax	Line 14 Position(s) 67-78	Numeric	12
Line 2c	Next \$50,000- Net Income in Each Bracket	Line 16 Position(s) 55-59	Numeric	5
Line 2c	Next \$50,000- Tax	Line 16 Position(s) 67-78	Numeric	12
Line 2d	Next \$100,000, - Net Income in Each Bracket	Line 18 Position(s) 55-60	Numeric	6
Line 2d	Next \$100,000, - Tax	Line 18 Position(s) 67-78	Numeric	12
Line 2e	Next \$200,000- Net Income in Each Bracket	Line 20 Position(s) 53-61	Numeric	9
Line 2e	Next \$200,000- Tax	Line 20 Position(s) 67-78	Numeric	12
Line 3	Add amounts in Column 1, Line 2a through 2e and enter the result	Line 22 Position(s) 53-61	Numeric	9
Line 4	Add amounts in Column 2, Line 2a through 2e, Round to the nearest dollar. Enter the result in Column 2 and on CIFT-620, Line 2	Line 24 Position(s) 67-79	Numeric	13
	Printed Variable Data Fields - CIFT-620-2D Schedule J-1	Pass Through Entity Tax		
Line 1	Short Period Filers-Indicator Box	Line 28 Position(s) 64	Alpha	1
Line 1	Amount of Net Taxable Income from CIFT-620 1E	Line 28 Position(s) 67-79	Numeric	13
Line 2a; Column 1	Next \$25,000 – Net Income in Each Bracket	Line 32 Position(s) 53-61	Numeric	9
Line 2a; Column 2	Next \$25,000 – Tax	Line 32 Position(s) 67-79	Numeric	13
Line 2b	Next \$50,000- Net Income in Each Bracket	Line 34 Position(s) 53-61	Numeric	9
Line 2b	Next \$50,000- Tax	Line 34 Position(s) 67-79	Numeric	13
Line 2c	Next \$100,000, - Net Income in Each Bracket	Line 36 Position(s) 53-61	Numeric	9
Line 2c	Next \$100,000, - Tax	Line 36 Position(s) 67-79	Numeric	13
Line 3	Add amounts in Column 1, Lines 2a through 2c and enter the result.	Line 38 Position(s) 53-61	Numeric	9
Line 4	Add the amounts in Column 2, Lines 2a through 2c. Enter the amount in Column 2 and on CIFT-620, Line2.	Line 40 Position(s) 67-79	Numeric	13
	Schedule K – Summary of Estimated Tax	Payments		Field
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Line 1	Credit from Prior Year- Date This field should be formatted as "mmddyyyy".	Line Position(s) 58-65 47	Numeric	8
Line 1	Credit from prior year return- Amount	Line Position(s) 70-78	Numeric	9
Line 2	First Quarter Estimated Payment- Check Number	Line Position(s) 46-54 49	Numeric	9
Line 2	Date -This field should be formatted as "mmddyyyy".	Line Position(s) 58-65 49	Numeric	8
Line 2	First Quarter Estimated Payment- Amount	Line Position(s) 70-78 49	Alpha	9

Line 3	Second quarter Estimated Payment- Check Number	Line51	Position(s) 46-54	sition(s) 46-54 Numeric		
Line 3	Date- This field should be formatted as "mmddyyyy".	Line51	Position(s) 58-65	Numeric	8	
	Schedule K – Summary of Estimated Tax Payr	nents Cont	inued			
Line 3	Second quarter Estimated Payment - Amount	Line 51	Position(s) 70-78	Numeric	9	
Line 4	Third Quarter Estimated Payment- Check Number	Line53	Position(s) 46-54	Numeric	9	
Line 4	Date- This field should be formatted as "mmddyyyy".	Line53	Position(s) 58-65	Numeric	8	
Line 4	Third Quarter Estimated Payment- Amount	Line53	Position(s) 70-78	Numeric	9	
Line 5	Fourth Quarter Estimated Payment- Check Number	Line55	Position(s) 46-54	Numeric	9	
Line 5	Date- This field should be formatted as "mmddyyyy".	Line55	Position(s) 58-65	Numeric	8	
Line 5	Fourth Quarter Estimated Payment- Amount	Line55	Position(s) 70-78	Numeric	9	
Line 6	Payment Made with Extension- Check Number	Line57	Position(s) 46-54	Numeric	9	
Line 6	Date- This field should be formatted as "mmddyyyy".	Line57	Position(s) 58-65	Numeric	8	
Line 6	Payment Made with Extension - Amount	Line57	Position(s) 70-78		9	

Exact Placement Specifications - CIFT-620-2D Schedule L, M, and N

Registration Marks: Registrations marks must be printed as specified on Page 2 of this document and in the following locations:

Barcode: The barcode must be printed as specified on Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.

Document Identification Number: The document identification number (22259) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

- 12-point Courier font (must be 10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points, except where specified below.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts should **not** be left blank, unless specifically directed to do so. Use "0" (zero) as the default.
- Negative amounts are <u>not</u> allowed.

F	Printed Variable Data Fields – CIFT-620-2D Schedule L Ca	Iculation of Franchise Tax		
Field Name	Comments	Exact Placement on Grid	Field Tyme	Field
Louisiana Revenue Account Number	Comments This field should be formatted as "#########".	Line 4 Position(s) 70-80	Field Type Numeric	Length 10
	NOTE: This is not the FEIN.	. ,		10
Line 1	Short Period Check Box	Line 8 Position(s) 64	Alpha	1
Line 1	Enter the amount from CIFT-620, Line 5C or Line 6, whichever is greater	Line 8 Position(s) 67-78	Numeric	12
Line 2	Enter the amount of Line 1 or \$300,000, whichever is less	Line 10 Position(s) 71-76	Numeric	6
Line 3	Multiply the amount on line 2 by \$1.50 for each \$1,000 or major fraction and enter the result	Line 12 Position(s) 72-74	Numeric	3
Line 4	Subtract Line 2 from Lin e1 and enter the result.	Line 14 Position(s) 67-78	Numeric	12
Line 5	Multiply the amount on line 4 by \$3.00 for each \$1,000 or major fraction and enter the result	Line 16 Position(s) 69-77	Numeric	9
Line 6	Add Lines 3 and 5. Round to the nearest dollar. Enter the result here and on CIFT-620, Line 7	Line 18 Position(s) 69-77	Numeric	9
Schedule M- Analysis of Schedule				
Line 1	Balance at beginning of year	Line 22 Position(s) 24-35	Alpha	12
Line 2	Net Income Per Books	Line 24 Position(s) 24-35	Numeric	12
Line 3	Other increases- Attach Schedule	Line 26 Position(s) 24-35	Numeric	12
Line 4	Total – Add Line 1, 2, and 3	Line 28 Position(s) 24-35	Numeric	12
Line 5a	Distributions- Cash	Line 30 Position(s) 24-35	Numeric	12
Line 5b	Distributions- stock	Line 22 Position(s) 66-77	Numeric	12
Line 5c	Distributions- Property	Line 24 Position(s) 66-77	Numeric	12
Line 6	Other Decreases- Attach Schedule	Line 26 Position(s) 66-77	Numeric	12
Line 7	Total – Add Lines 5a through 6	Line 28 Position(s) 66-77	Numeric	12
Line 8	Balance at end of year- Subtract Line 7 from Line 4	Line 30 Position(s) 66-77	Numeric	12
Schedule N- Additional Information	n Required			<u>'</u>
Line 1	Nature of Business Principal Products or Service in LA	Line 38 Position(s) 8-41	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service in LA	Line 40 Positions(s) 8-41	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service in LA	Line 42 Positions(s) 8-41	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service Elsewhere	Line 45 Position(s) 8-41	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service Elsewhere	Line 47 Position(s) 8-41	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service Elsewhere	Line 49 Position(s) 8-41	Alpha/Numeric	26
Line 2	Date and State of Incorporation	Line 34 Position(s) 67-69	Numeric	13
Line 3	Parishes in which Property is located	Line 37 Position(s) 45-78	Alpha/Numeric	26
Line 3	Parishes in which Property is located	Line 39 Position(s) 45-78	Alpha/Numeric	26
Line 3	Parishes in which Property is located	Line 41 Position(s) 45-78	Alpha/Numeric	26

Requirements: Page 4

Document Identification Number: The document identification number (22241) must be printed as specified on the **Exact Placement Specifications** section of this document and positioned on Line 63 in Positions 76-80.

Barcode: The barcode must be printed as specified on the Exact Placement Specifications section Page 2 of this document and positioned as follow:

- 1/2" from the left edge, and
- 1/2" from the bottom edge.
- The 2-D barcode should be placed on Page 4 of the return on Lines 10-16 in Positions 27-61. The barcode must fit within this area of the form. This barcode is 1 of 3 printed on page of the substitute document.
- Use a carriage return <CR> to delimit fields. Each barcode field should have a carriage return, even if no information is contained in the field. This carriage return should measure as 1 byte of data.
- No punctuation is allowed in any field. No hyphens, dashes, parentheses, or other separators should be used.
- All alpha characters must be in uppercase.
- If a field is not applicable, leave blank unless specifically instructed otherwise.
- Negative amounts are not accepted. If less than zero, enter zero.
- Only whole dollar amounts should be entered.
- Do not include supplemental information in the barcode.
- Error correction level should be set to 4.

Barcode Layout:

- 1. Header Information
- 2. Government Specific Data
- 3. Trailer

Header Information – This information is placed first in the barcode data stream. The first six fields in the barcode comprise the official header. This information must be consistent among all barcodes and is defined below.

- **Header Version Number** will be incremented each time the standards group alters the physical structure of the barcodes that were created using multiple header formats. This value is static for all barcodes and is currently T1.
- **Developer Code** is a four-digit code used to identify the software developer whose application produced the barcode. The purpose of the field is to allow forms to be traced to the vendor producing them. Software developer codes are assigned through the NACTP and may differ from software developer ID for the form that is assigned by LDR.
- **Jurisdiction** is an alphanumeric identifier indicating the taxing jurisdiction. Use the U.S. Postal Service's official state abbreviations. For Louisiana, use LA.
- **Description** is an alphanumeric identifier used to describe the form being processed. Use 22241 for the Corporation Income and Franchise Return (CIFT-620-2D).
- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.
- **Software/Form Version** is a vendor-defined version number that reflects the software and form revision used to produce the barcode.

Government Specific Data - For a detailed layout of the government specific data, see Pages 24 through 32 of this document.

Trailer – The trailer is the last field in the barcode data stream. The trailer is used to indicate the end of data has been reached. A static string of *EOD* is used as the trailer value. If a trailer is not found upon scanning the barcode, this indicates that some data may not be included in the barcode due to data size restrictions.

Example of 2-D Barcode: T1<CR> (Header Version Number)

9999<CR> (Developer Code) LA<CR> (Jurisdiction) 6173<CR> (Description)

0<CR> (Specification Version) 1.0<CR> (Software Version)

...

EOD<CR>

Information to Provide to Customers: We are requesting that all participating vendors provide to their customers a few short statements that describe what a two-dimensional barcode is and why it is being utilized. The following information should be provided to the customer:

Louisiana Corporate Income/Franchise Tax Return

The Louisiana Department of Revenue is utilizing two-dimensional (2-D) barcode technology. The barcode contains the information that was entered into your return. You will find this barcode on Page 4 of your completed return. Below, is an example of the 2-D barcode.

2-D Barcode Sample



2-D Barcode Fields for Form CIFT-620

Doc ids 22241- 22047, Schedule A, G, K, N

	Header Information				
Field		Field			
No.	Field Type	Length	Field Name	Comments	
1	Alphanumeric	2	Header Version	Value is T1 .	
2	Numeric	4	Developer Code	4-digit code (See Appendix 1 of the <u>2-D Bar Coding Standards.</u>) used to identify the software developer whose application produced the barcode and may differ from the software developer ID in Field 7 below	
3	Alpha	2	Jurisdiction	Value is LA .	
4	Numeric	5	Description	Value is 22241 .	
5	Numeric	1	Specification Version	Value is 0 .	
6	Alphanumeric	10	Software/Form Version	Vendor-defined version number that reflects the software and form revision used to produce the barcode.	

CIFT-6	320 2D Return ((Page 1)		
CIFT -	620 Corporatio	n and Fra	nchise Return Page 1	
Field No.	Field Type	Max. Field Length	Field Name	Comments
7	Numeric	10	Louisiana Revenue Account Number	Louisiana Revenue Account Number NOTE: This is not the FEIN.
8	Binary	1	Calendar Year Check Box	Mark "1" for "Calendar Year Return)". Mark "0" if not applicable
9	Binary	1	Fiscal Year Filer Box	Mark "1" for "Calendar Year Return)". Mark "0" if not applicable
10	Binary	1	Short Period Filer Box	Mark "1" for "Calendar Year Return)". Mark "0" if not applicable
11	Numeric	8	Income Tax Fiscal Year Beginning	This field should be formatted as "mmddyyyy".
12	Numeric	8	Income Tax Fiscal Year Ending	This field should be formatted as "mmddyyyy".
13	Numeric	8	Franchise Tax Fiscal Year Beginning	This field should be formatted as "mmddyyyy".
14	Numeric	8	Franchise Tax Fiscal Year Ending	This field should be formatted as "mmddyyyy".
15	Binary	1	Name Change Indicator	Mark "1" if name has changed. Mark "0" if not applicable.
16	Binary	1	Address Change Indicator	Mark "1" if name has changed. Mark "0" if not applicable.
17	Binary	1	Amended Return Indicator	Mark "1" for an amended return. Mark "0" if not applicable.
18	Binary	1	Franchise Tax Filing Not Required Indicator	Mark "1" for a Not required to file Franchise Tax. Mark "0" if not applicable
19	Binary	1	Income Tax Filing Not Required Indicator	Mark "1" for a Not required to file Income Tax. Mark "0" if not applicable
20	Binary	1	First-time Filing Indicator	Mark "1" for a First –Time Filing Indicator. Mark "0" if not applicable
21	Binary	1	Final Return Indicator	Mark "1" for a Final Return Indicator. Mark "0" if not applicable

	Government Specific Data (continued)					
Field No.	Field Type	Max. Field Length	Field Name	Comments		
22	Alphanumeric	30	The legal name of the corporation.	The legal name of the corporation.		
23	Alphanumeric	30	Trade Name	The trade name or DBA name of the corporation. Leave blank if not applicable.		
24	Alphanumeric	30	Address Line 1	Corporation's mailing address.		
25	Alphanumeric	30	Unit Type	Unit Type- Post Office Abbreviation		
26	Alphanumeric	14	Unit Number	Unit Number		
27	Alphanumeric	21	City	Corporation's mailing address- City		
28	Alpha	2	State	Corporation's mailing address- State		
29	Alphanumeric	5	ZIP	Corporation's mailing address- Zip		
30	Alphanumeric	25	Foreign Nation	Foreign Nation, if not United States (do not abbreviate)		
31	Numeric	9	Return Line A	Federal Employer Identification Number (FEIN)		
32	Binary	1	Negative Indicator (Return Line B)	Mark "1" for "Negative Indicator - Return Line B)". Mark "0" if not applicable		
33	Numeric	12	Return Line B	Federal Taxable Income		
34	Numeric	11	Return Line C	Federal Income Tax		
35	Numeric	5	Return Line D	Income Tax Apportionment Percentage		
36	Binary	1	Negative Indicator (Return Line E)	Mark "1" for "Negative Indicator Return Line E". Mark "0" if not applicable		
37	Numeric	15	Return Line E- Gross Revenues	Gross Revenues		
38	Binary	1	Negative Indicator (Return Line F)	Mark "1" for "Negative Indicator Return Line F". Mark "0" if not applicable		
39	Numeric	15	Return Line F	Total Assets		
40	Numeric	6	Return Line G	NAICS Code		
41	Alpha	2	Return Line H	Principal Place of Business – Enter the state abbreviation for the location.		
42	Binary	1	Return Line I—Yes	Mark "1" for "Return Line I". Mark "0" if not applicable.		
43	Binary	1	Return Line J—Yes	Mark "1" for "Return Line J -Yes". Mark "0" if not applicable.		
44	Numeric	9	Return Line K	If answered "Yes" on Line J, enter FEIN of consolidated federal income tax return.		
45	Binary	1	Return Line L—Yes	Mark "1" for "Negative Indicator Return Line I- Yes". Mark "0" if not applicable		
46	Binary	1	Return Line M	Enter Code for Federal Form		
47	Binary	1	Return Line N	Enter Type of Entity Code		
48	Binary	1	Return Line O	Pass-through Entity Tax Election		
49	Binary	1	Negative Indicator (Return Line 1A)	Mark "1" for "Negative Indicator Return Line IA- Yes". Mark "0" if not applicable		
50	Numeric	12	Return Line 1A	Louisiana Net Income before Loss Adjustments and Federal Income Tax Deduction		
51	Binary	1	Negative Indicator (Return Line 1B)	Mark "1" for "Negative Indicator Return Line I- Return Line 1B". Mark "0" if not applicable		
52	Numeric	12	Return Line 1B	Subchapter S Corporation Exclusion		
53	Numeric	12	Return Line 1C	Loss Carryforward less Federal Tax Refund Applicable to Loss		

			Government Specific I	Data (continued)		
	OUET 200 OD Datama (Data A) Constituted					
Field No.	Field Type	Max. Field Length	CIFT-620 2D Return (Pa	age 1) Continued Comments		
54	Numeric	12	Return Line 1C1	Loss Carryforward Utilized		
55	Numeric	10	Return Line 1D	Federal Income Tax Deduction		
56	Numeric	10	Return Line 1D1	Federal Disaster Relief Credits		
57	Binary	1	Negative Indicator (Return Line 1E)	Mark "1" for "Negative Indicator Return Line IE- Yes". Mark "0" if not applicable		
58	Numeric	11	Return Line 1E	Louisiana Taxable Income		
59	Binary	1	Return Line 2	Mark "1" for "Public Law 86-272". Mark "0" if not applicable. Mark '2" for all other reasons		
60	Numeric	9	Return Line 2	Louisiana Income Tax		
61	Numeric	8	Return Line 3	Total Nonrefundable Income Tax Credits.		
62	Numeric	8	Return Line 4	Income Tax after Nonrefundable Credits		
63	Binary	1	Negative Indicator (Return Line 5A)	Mark "1" for "Negative Indicator Return Line 5A- Yes". Mark "0" if not applicable		
64	Numeric	12	Return Line 5A	Total Capital Stock, Surplus, and Undivided Profits		
65	Numeric	5	Return Line 5B	Franchise Tax Apportionment Percentage –		
66	Binary	1	Negative Indicator (Return Line 5C)	Mark "1" for "Negative Indicator Return Line 5C- Yes". Mark "0" if not applicable		
67	Numeric	11	Return Line 5C	Franchise Tax Base		
68	Numeric	9	Return Line 6	Amount of Assessed Value of Real and Personal Property in Louisiana in 2021		
69	Binary	1	Return Line 7	Mark "1-5" for "Louisiana Franchise Indicator". See Line 7 Instructions for Details.		
70	Numeric	8	Return Line 7	Louisiana Franchise Tax		
71	Numeric	8	Return Line 8	Total Nonrefundable Franchise Tax Credits		
72	Numeric	8	Return Line 9	Franchise Tax after Nonrefundable Credits		
73	Numeric	4	Software Developer ID	Software Developer Identification Number (4-digit number) preapproved by LDR		
			Government Specific I			
Field No.	Field Type	Max. Field Length	Field Name	Comments		
Colum	n 1 Income Tax	(
74	Numeric	8	Return Line 10	Tax liability after priority 1 credits		
75	Numeric	8	Return Line 11	Refundable credits from Schedule RC-P2		
76	Numeric	8	Return Line 12	Tax liability after priority 2 credits		
77	Numeric	8	Return Line 13	Overpayment after priority 2 credits		
78	Numeric	8	Return Line 14	Nonrefundable credits from Schedule NRC-P3		
79	Numeric	8	Return Line 15	Tax liability after priority 3 credits		

Overpayment after priority 2 credits

8

Return Line 16A

Numeric

80

	CIFT- 620 2D Page 2				
81	Numeric	8	Return Line 16B	Refundable credits from Schedule RC-P4	
82	Numeric	8	Return Line 16C	Credit carryforward from prior year return	
83	Numeric	8	Return Line 16D	Estimated payments	
84	Numeric	8	Return Line 16E	Payment made with extension	
85	Numeric	8	Return Line 16F	Total refundable credits and payments	
86	Numeric	8	Return Line 17	Overpayment.	
87	Numeric	8	Return Line 18	Tax due	
88	Numeric	8	Return Line 21	Interest	
89	Numeric	8	Return Line 22	Delinquent filing penalty	
90	Numeric	8	Return Line 23	Delinquent payment penalty	
91	Numeric	8	Return Line 24	Additional donation to The Military Family Assistance Fund	
92	Numeric	8	Return Line 25	Total amount due	
	n 2 Franchise				
93	Numeric	8	Return Line 10	Tax liability after priority 1 credits	
94	Numeric	8	Return Line 11	Refundable credits from Schedule RC-P2	
95	Numeric	8	Return Line 12	Tax liability after priority 2 credits	
96	Numeric	8	Return Line 13	Overpayment after priority 2 credits	
97	Numeric	8	Return Line 14	Nonrefundable credits from Schedule NRC-P3	
98	Numeric	8	Return Line 15	Tax liability after priority 3 credits	
99	Numeric	8	Return Line 16A	Overpayment after priority 2 credits	
100	Numeric	8	Return Line 16B	Refundable credits from Schedule RC-P4	
101	Numeric	8	Return Line 16C	Credit carryforward from prior year return	
102	Numeric	8	Return Line 16E	Payment made with extension	
103	Numeric	8	Return Line 16F	Total refundable credits and payments	
104	Numeric	8	Return Line 17	Overpayment	
105	Numeric	8	Return Line 18	Tax due	
106	Numeric	8	Return Line 19	Amount of income tax overpayment applied to franchise tax	
107	Numeric	8	Return Line 20	Net tax due	
108	Numeric	8	Return Line 21	Interest	
109	Numeric	8	Return Line 22	Delinquent filing penalty	
110	Numeric	8	Return Line 23	Delinquent payment penalty	
111	Numeric	8	Return Line 24	Additional donation to The Military Family Assistance Fund	
112	Numeric	8	Return Line 25	Total amount due	
	n 3 (Total)				
113	Numeric	9	Return Line 15	Tax liability after priority 3 credits	
114	Numeric	9	Return Line 17	Overpayment	
115	Numeric	9	Return Line 25	Total amount due	

			CIET 6202D	Daga 2
Colum	n 2 (Franchise	Toy	CIFT-6202D	Page 3
Field	Field Type	Max.	Field Name	Comments
No.	rieiu Type	Field Length	Field Name	Comments
116	Numeric	8	Return Line 26, Column 2	Net overpayment
Colum	n 3 (Total)			
117	Numeric	9	Return Line 26	Net overpayment
118	Numeric	9	Return Line 27	Amount of overpayment donated to The Military Family Assistance Fund.
119	Numeric	9	Return Line 28	Amount of overpayment to be refunded
120	Numeric	9	Return Line 29	Amount of overpayment to be credited to 2021
Declar	ation and Sign	ature(s) o	f Officer/ Preparer	
121	Alphanumeric	10	Paid Preparer's ID	Social Security Number, PTIN, or FEIN of Paid Preparer
			and RC-P4 Page 5	
	Field Type	Max.	ole Priority 1 Tax Credits) Field Name	Comments
Field No.	rieid Type	Field	rieid Name	Comments
NO.		Length		
122	Numeric	3	Nonrefundable Priority 1 Tax Credit Code (Line 1)	
123	Numeric	3	Nonrefundable Priority 1 Tax Credit Code (Line 2)	-
124	Numeric	3	Nonrefundable Priority 1 Tax Credit Code (Line 3)	Enter 3-digit credit code. If not applicable, leave blank.
125	Numeric	3	Nonrefundable Priority 1 Tax Credit Code (Line 4)	
126	Numeric	3	Nonrefundable Priority 1 Tax Credit Code (Line 5)	7
127	Numeric	3	Nonrefundable Priority 1 Tax Credit Code (Line 6)	7
128	Numeric	8	NRC-P1 Amount Claimed Against Income Tax	Adjusted Overpayment – Return Line 36
120	- rumono	· ·	(Line 1)	riajustou e verpayment - rietam Enie ee
129	Numeric	8	NRC-P1 Amount Claimed Against Income Tax	
			(Line 2)	
130	Numeric	8	NRC-P1 Amount Claimed Against Income Tax	Enter amount of allowable credit claimed against corporation income tax in Column
			(Line 3)	
131	Numeric	8	NRC-P1 Amount Claimed Against Income Tax	1
			(Line 4)	
132	Numeric	8	NRC-P1 Amount Claimed Against Income Tax	A.
			(Line 5)	
133	Numeric	8	NRC-P1 Amount Claimed Against Income Tax	
			(Line 6)	

134	Numeric	8	Total NRC-P1 Income Tax Credits (Line 7)	Total NRC-P1 Income Tax Credits (Line 7)
Sched Field No.	ule NRC-P-1 (N Field Type	onrefund Max. Field Length	able Priority 1 Tax Credits)- continued Field Name	Comments
135	Numeric	8	NRC-P1 Amount Claimed Against Franchise Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
136	Numeric	8	NRC-P1 Amount Claimed Against Franchise Tax (Line 2)	
137	Numeric	8	NRC-P1 Amount Claimed Against Franchise Tax (Line 3)	
138	Numeric	8	NRC-P1 Amount Claimed Against Franchise Tax (Line 4)	
139	Numeric	8	NRC-P1 Amount Claimed Against Franchise Tax (Line 5)	
140	Numeric	8	NRC-P1 Amount Claimed Against Franchise Tax (Line 6)	
141	Numeric	8	Total NRC-P1 Franchise Tax Credits (Line 8)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-6).
Sched	ule RC-P4 (Ref	undable P	riority Tax Credits	
142	Alphanumeric	3	Refundable Priority 4 Tax Credit Code (Line1)	Enter 3-character credit code. If not applicable, leave blank.
143	Alphanumeric	3	Refundable Priority 4 Tax Credit Code (Line 2)	
144	Alphanumeric	3	Refundable Priority 4 Tax Credit Code (Line 3)	
145	Alphanumeric	3	Refundable Priority 4 Tax Credit Code (Line 4)	
146	Alphanumeric	3	Refundable Priority 4 Tax Credit Code (Line 5)	
147	Numeric	8	RC-P4 Amount Claimed Against Income Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column
148	Numeric	8	RC-P4 Amount Claimed Against Income Tax (Line 2)	Α.
149	Numeric	8	RC-P4 Amount Claimed Against Income Tax (Line 3)	
150	Numeric	8	RC-P4 Amount Claimed Against Income Tax (Line 4)	
151	Numeric	8	RC-P4 Amount Claimed Against Income Tax (Line 5)	
152	Numeric	8	Total RC-P4 Income Tax Credits (Line 6)	Add credit amounts claimed against Income Tax (Column A, Lines 1-5).
153	Numeric	8	RC-P4 Amount Claimed Against Franchise Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
154	Numeric	8	RC-P4 Amount Claimed Against Franchise Tax (Line 2)	
155	Numeric	8	RC-P4 Amount Claimed Against Franchise Tax (Line 3)	
156	Numeric	8	RC-P4 Amount Claimed Against Franchise Tax (Line 4)	
157	Numeric	8	RC-P4 Amount Claimed Against Franchise Tax (Line 5)	
158	Numeric	8	Total RC-P4 Franchise Tax Credits (Line 7)	

Field No.	Field Type	Max. Field	Field Name	Comments
		Length		
159	Numeric	3	Nonrefundable Priority 3 Tax Credit Code (Line 1)	Enter 3-digit credit code. If not applicable, leave blank.
160	Numeric	3	Nonrefundable Priority 3 Tax Credit Code (Line 2)	
161	Numeric	3	Nonrefundable Priority 3 Tax Credit Code (Line 3)	
162	Numeric	3	Nonrefundable Priority 3 Tax Credit Code (Line 4)	
163	Numeric	3	Nonrefundable Priority 3 Tax Credit Code (Line 5)	
164	Numeric	3	Nonrefundable Priority 3 Tax Credit Code (Line 6)	
165	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.
166	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 2)	
167	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 3)	
168	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 4)	
169	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 5)	
170	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 6)	
171	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
172	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 2)	
173	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 3)	
174	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 4)	
175	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 5)	
176	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 6)	

Schedule NRC-P3- part II Transferable, Nonrefundable Priority 3 Tax Credits Page 6

Field	Field Type	Max.	Field Name	
No.		Field		Comments
		Length		
177	Numeric	3	Transferable, Nonrefundable Priority 3 Tax Credit Code (Line 7)	
178	Numeric	3	Transferable, Nonrefundable Priority 3 Tax Credit Code (Line 8)	Enter 3-digit credit code. If not applicable, leave blank.
179	Numeric	3	Transferable, Nonrefundable Priority 3 Tax Credit Code (Line 9)	
180	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 7)	Enter amount of allowable credit claimed against corporation income tax in Column A.
181	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 8)	
182	Numeric	8	NRC-P3 Amount Claimed Against Income Tax (Line 9)	
183	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 7)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
184	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 8)	
185	Numeric	8	NRC-P3 Amount Claimed Against Franchise Tax (Line 9)	
186	Alphanumeric	26	LDR State Certification Number (Line 7A)	Enter the LDR State Certification Number from Form R-6135.
187	Alphanumeric	26	LDR State Certification Number (Line 8A)	Enter the LDR State Certification Number from Form R-6135.
188	Alphanumeric	26	LDR State Certification Number (Line 9A)	Enter the LDR State Certification Number from Form R-6135.
189	Numeric	8	Total NRC-P3 Income Tax Credits (Line 10)	Enter amount of credit allowed. See instructions.
190	Numeric	8	Total NRC-P3 Franchise Tax Credits (Line 11)	Total Refundable Priority 4 Credits. Add Lines 1-9.
Sched	ule RC-P2 Part	1 Refund	able Priority 2 Tax Credits Page 7	
191	Numeric	3	Refundable Priority 2 Tax Credit Code (Line 1)	Enter 3-digit credit code. If not applicable, leave blank.
192	Numeric	3	Refundable Priority 2 Tax Credit Code (Line 2)	
193	Numeric	3	Refundable Priority 2 Tax Credit Code (Line 3)	
194	Numeric	3	Refundable Priority 2 Tax Credit Code (Line 4)	
195	Numeric	3	Refundable Priority 2 Tax Credit Code (Line 5)	

Sched	chedule RC-P2 Part 1 Refundable Priority 2 Tax Credits Page 7						
Field No.	Field Type	Max. Field Length	Field Name	Comments			
196	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.			
197	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 2)				
198	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 3)				
199	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 4)				
200	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 5)				
201	Numeric	8	RC-P2 Amount Claimed Against Franchise Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.			
202	Numeric	8	RC-P2 Amount Claimed Against Franchise Tax (Line2)				
203	Numeric	8	RC-P2 Amount Claimed Against Franchise Tax (Line 3)				
204	Numeric	8	RC-P2 Amount Claimed Against Franchise Tax (Line4)				
205	Numeric	8	RC-P2 Amount Claimed Against Franchise Tax (Line 5)				
Sch	edule RC-P2 P	art II Trans	l sferable, Refundable Priority 2 Tax Credits Page	e 7			
206	Alphanumeric	3	Transferable, Refundable Priority 3 Tax Credit Code (Line 6)	Enter 3-character credit code 62F . If not applicable, leave blank.			
207	Alphanumeric	3	Transferable, Refundable Priority 3 Tax Credit Code (Line 7)				
208	Alphanumeric	3	Transferable, Refundable Priority 3 Tax Credit Code (Line 8)				
209	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 6)	Enter amount of allowable credit claimed against corporation income tax in Column A.			
210	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 7)				
211	Numeric	8	RC-P2 Amount Claimed Against Income Tax (Line 8)				
212	Alphanumeric	26	LDR State Certification Number (Line 6A)	Enter the LDR State Certification Number from Form R-6135.			
213	Alphanumeric	26	LDR State Certification Number (Line 7A)				
214	Alphanumeric	26	LDR State Certification Number (Line 8A)				
215	Numeric	8	Total RC-P2 Income Tax Credits (Line 9)	Add credit amounts claimed against Income Tax (Column A, Lines 1-8).			
216	Numeric	8	Total RC-P2 Franchise Tax Credits (Line 10)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-5).			

CIFT 620 2D Schedule A Page 9

CIFT-620 2D Schedule A Field Type Field Name Field Max. Comments Field No. Length Binary Schedule A- Line 1 Yes/No 217 At the end of the tax year, did you directly or indirectly own 50% or more of the voting stock of any corporation or an interest of any partnership, including any entity treated as a corporation or partnership? "1" Mark for "Yes". Mark "0" for No Federal Employer Identification Number Federal Employer Identification Number 218 Numeric 9 219 Numeric 5 Percentage Percentage 220 9 Federal Employer Identification Number Federal Employer Identification Number Numeric 221 Numeric 5 Percentage Percentage 222 Numeric 9 Federal Employer Identification Number Federal Employer Identification Number 5 223 Numeric Percentage Percentage 224 9 Federal Employer Identification Number Federal Employer Identification Number Numeric 225 5 Percentage Numeric Percentage 9 Federal Employer Identification Number Federal Employer Identification Number 226 Numeric 227 5 Numeric Percentage Percentage 228 1 Schedule A- Line 2 Yes/No Binary At the end of the tax year, did any corporation, individual, partnership, trust, or association directly or indirectly own 50% or more of your voting stock? "1" Mark for "Yes" Mark "0" for No 229 Numeric 9 Federal Employer Identification Number Federal Employer Identification Number 230 Numeric 5 Percentage Percentage 9 Federal Employer Identification Number Federal Employer Identification Number 231 Numeric 232 Numeric 5 Percentage Percentage 233 9 Federal Employer Identification Number Federal Employer Identification Number Numeric 5 234 Numeric Percentage Percentage Federal Employer Identification Number Federal Employer Identification Number 235 Numeric 9 236 5 Numeric Percentage Percentage 9 Federal Employer Identification Number Federal Employer Identification Number 237 Numeric 238 Numeric 5 Percentage Percentage 239 Binary Schedule A- Line 3 Yes/No If you answered yes to Line I on CIFT 620, list the FEIN of five of those entities. Also, attach a schedule listing the names, addresses FEIN of all entities. Mark "1" for "Yes". Mark "0" for NO

0.40	T., .	1 .		
240	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
241	Numeric	5	Percentage	Percentage
242	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
243	Numeric	5	Percentage	Percentage
244	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
245	Numeric	5	Percentage	Percentage
246	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
247	Numeric	5	Percentage	Percentage
248	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
249	Numeric	5	Percentage	Percentage
			abilities and Capital from Balance She	
CCIFT	-620 2D Sched	lule G- Lial	bilities and Capital from Balance Sheet Co	ontinued- Liabilities and Capital from Balance Sheet- Beginning of Year
Field	Field Type	Max.	Field Name	Comments
No.		Field		
050	Ni	Length	Line 4 Cold	Assessed Develop Devianian of Vern
250	Numeric	12	Line 1, Col 1	Accounts Payable - Beginning of Year
251	Numeric	12	Line 2, Col 1	Mortgages, notes, and bonds payable one year old or less at balance sheet date
				and having a maturity of one year or less from original date incurred
252	Numeric	12	Line 3, Col 1	Other current liabilities
253	Numeric	12	Line 4, Col 1	Loans from stockholders
254	Numeric	12	Line 5, Col 1	Due to subsidiaries and affiliates
				But to substitution and anniation
255	Numeric	12	Line 6, Col 1	Mortgages, notes, and bonds payable more than one year old at balance sheet
			·	date or having a maturity of more than one year from original date incurred
256	Numeric	12	Line 7, Col 1	Other liabilities
200	- ramono	'-		Other habilities
257	Numeric	12	Line 8, Col 1	Capital stock: a. Preferred Stock
	- ramono	'-		Capital Stock. a. Freieneu Stock
258	Numeric	12	Line 8, Col 1	Capital stock: a. Common Stock
259	Numeric	12	Line 9, Col 1	Paid-in or capital surplus
				1 ald-iii of capital sulpids
260	Numeric	12	Line 10, Col 1	Surplus reserves
	- ramono	'-		Sulpius reserves
261	Numeric	12	Line 11, Col 1	Earned surplus and undivided profits
				Lameu surpius anu unuivideu pronts
262	Numeric	12	Line 12, Col 1	For a sign was a supplied a same
202	Numeric	12	Line 12, our i	Excessive reserves or undervalued assets
263	Numeric	12	Line 13, Col 1	Total- Add Lines 1 through 12.
			ance Sheet- End of Year	Total Add Effect Fullough 12.
264	Numeric	12	Line 1, Col 2	Accounts Payable- End of Year
265	Numeric	12	Line 2, Col 2	Mortgages, notes, and bonds payable one year old or less at balance sheet date
200	INdifficito	12	Ellie 2, 0012	
				and having a maturity of one year or less from original date incurred
266	Numeric	12	Line 3, Col 2	Other current liabilities
267	Numeric	12	Line 4, Col 2	
			'	Loans from stockholders
268	Numeric	12	Line 5, Col 2	Due to subsidiaries and affiliates

269 Numeric 12	
270 Numeric 12 Line 7, Col 2 Cher liabilities	ar old at balance sheet date
271 Numeric 12 Line 8, Col 2 Capital stock: a. Preferred Stock	actoouriou
Numeric 12 Line 8, Col 2 Paid-in or capital stock: a. Common Stock	
273 Numeric 12 Line 9, Col 2 Paid-in or capital surplus	
274 Numeric 12 Line 10, Col 2 Earned surplus and undivided profits	
275 Numeric 12 Line 11, Col 2 Earned surplus and undivided profits	
276 Numeric 12 Line 12, Col 2 Excessive reserves or undervalued assets	
Total-Add Lines 1 through 12. Schedule K- Summary of Estimated Tax Payments	
Schedule K- Summary of Estimated Tax Payments	
Schedule K- Summary of Estimated Tax Payments	
Credit from Prior Year- Date This field should be formatted as "mmddyyyy".	
This field should be formatted as "mmddyyyy". 279 Numeric 9 Line 1 Credit from prior year return- Amount 280 Numeric 9 Line 2 First Quarter Estimated Payment- Check Number 281 Numeric 8 Line 2 Date -This field should be formatted as "mmddyyyy". 282 Numeric 9 Line 2 First Quarter Estimated Payment- Amount 283 Numeric 9 Line 3 Second quarter Estimated Payment- Check Number Schedule K-Summary of Estimated Tax Payment- Continued Field Field Type Max. Field Name Field Length 284 Numeric 8 Line 3 Date- This field should be formatted as "mmddyyyy". 285 Numeric 9 Line 3 Second quarter Estimated Payment - Amount 286 Numeric 9 Line 4 Third Quarter Estimated Payment - Check Number 287 Numeric 8 Line 4 Date- This field should be formatted as "mmddyyyy". 288 Numeric 9 Line 4 Date- This field should be formatted as "mmddyyyy". 288 Numeric 9 Line 4 Date- This field should be formatted as "mmddyyyy". 289 Numeric 9 Line 4 Date- This field should be formatted as "mmddyyyy". 289 Numeric 9 Line 5 Fourth Quarter Estimated Payment- Check Number 290 Numeric 8 Line 5 Date- This field should be formatted as "mmddyyyy". 291 Numeric 9 Line 5 Fourth Quarter Estimated Payment- Check Number 292 Numeric 9 Line 6 Payment Made with Extension- Check Number 293 Numeric 9 Line 6 Date- This field should be formatted as "mmddyyyy".	
Numeric 9	
Numeric 9	
Numeric S	
Numeric 9	
Schedule K- Summary of Estimated Tax Payment- Continued Field Field Type Max. Field Name Comments No. Pield Length 284 Numeric 8 Line 3 Date- This field should be formatted as "mmddyyyy". 285 Numeric 9 Line 3 Second quarter Estimated Payment - Amount 286 Numeric 9 Line 4 Third Quarter Estimated Payment - Check Number 287 Numeric 8 Line 4 Date- This field should be formatted as "mmddyyyy". 288 Numeric 9 Line 4 Third Quarter Estimated Payment - Check Number 289 Numeric 9 Line 4 Date- This field should be formatted as "mmddyyyy". 289 Numeric 9 Line 5 Fourth Quarter Estimated Payment- Check Number 290 Numeric 9 Line 5 Date- This field should be formatted as "mmddyyyy". 291 Numeric 9 Line 5 Fourth Quarter Estimated Payment- Amount 292 Numeric 9 Line 6 Payment Made with Extension- Check Number 293 Numeric 8 Line 6 Date- This field should be formatted as "mmddyyyy".	
Schedule K- Summary of Estimated Tax Payment- Continued Field No. Field Type Max. Field Name Comments No. Field Length 284 Numeric 8 Line 3 Date- This field should be formatted as "mmddyyyy". 285 Numeric 9 Line 3 Second quarter Estimated Payment - Amount 286 Numeric 9 Line 4 Third Quarter Estimated Payment- Check Number 287 Numeric 8 Line 4 Date- This field should be formatted as "mmddyyyy". 288 Numeric 9 Line 4 Date- This field should be formatted as "mmddyyyy". 289 Numeric 9 Line 5 Fourth Quarter Estimated Payment- Check Number 290 Numeric 8 Line 5 Date- This field should be formatted as "mmddyyyy". 291 Numeric 9 Line 5 Fourth Quarter Estimated Payment- Amount 292 Numeric 9 Line 6 Payment Made with Extension- Check Number 293 Numeric 8 Line 6 Date- This field should be formatted as "mmddyyyy".	
Field No.Field TypeMax. Field LengthField NameComments284Numeric8Line 3Date- This field should be formatted as "mmddyyyy".285Numeric9Line 3Second quarter Estimated Payment - Amount286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
Field No.Field TypeMax. Field LengthField NameComments284Numeric8Line 3Date- This field should be formatted as "mmddyyyy".285Numeric9Line 3Second quarter Estimated Payment - Amount286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
Field No.Field TypeMax. Field LengthField NameComments284Numeric8Line 3Date- This field should be formatted as "mmddyyyy".285Numeric9Line 3Second quarter Estimated Payment - Amount286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
No.Field LengthDate- This field should be formatted as "mmddyyyy".284Numeric8Line 3Second quarter Estimated Payment - Amount285Numeric9Line 3Second quarter Estimated Payment - Amount286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
LengthDate- This field should be formatted as "mmddyyyy".284Numeric8Line 3Second quarter Estimated Payment - Amount285Numeric9Line 3Second quarter Estimated Payment - Check Number286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
284Numeric8Line 3Date- This field should be formatted as "mmddyyyy".285Numeric9Line 3Second quarter Estimated Payment - Amount286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
285Numeric9Line 3Second quarter Estimated Payment - Amount286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
286Numeric9Line 4Third Quarter Estimated Payment- Check Number287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
287Numeric8Line 4Date- This field should be formatted as "mmddyyyy".288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
288Numeric9Line 4Third Quarter Estimated Payment- Amount289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
289Numeric9Line 5Fourth Quarter Estimated Payment- Check Number290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
290Numeric8Line 5Date- This field should be formatted as "mmddyyyy".291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
291Numeric9Line 5Fourth Quarter Estimated Payment- Amount292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
292Numeric9Line 6Payment Made with Extension- Check Number293Numeric8Line 6Date- This field should be formatted as "mmddyyyy".	
293 Numeric 8 Line 6 Date- This field should be formatted as "mmddyyyy".	
Schedule N- Summary of Estimated Tax Payment	
Schedule N- Additional Information Required	
295 Alphanumeric 26 Line 1 Describe the nature of your business activity and specify y	ify your principal product or
service in Louisiana	ily your principal product of
296 Alphanumeric 26 Line 1 Describe the nature of your business activity and specify y	ify your principal product or
service in Elsewhere	ily your principal product of

297	Numeric	8	Line 2		Date of Corporation	
298	Alphanumeric	2	Line- 2		State of Corporation	
299	Alpha	10	Line 2		Indicate parishes in which property is located.	
				Trailer		
300	Indicates the en	d of the dat	ta file. Value is *EOD*.			<u> </u>

Schedules B, C, D, E, F, J

Requirements:

- The 2-D barcode should be placed on Page 4 of the return on Lines 29-36 in Positions 27-61. The barcode must fit within this area of the form.
- Use a carriage return <CR> to delimit fields. Each barcode field should have a carriage return, even if no information is contained in the field. This carriage return should measure as 1 byte of data.
- No punctuation is allowed in any field. No hyphens, dashes, parentheses, or other separators should be used.
- All alpha characters must be in uppercase.
- If a field is not applicable, leave blank unless specifically instructed otherwise.
- Negative amounts are not accepted. If less than zero, enter zero.
- Only whole dollar amounts should be entered.
- Do not include supplemental information in the barcode.
- Error correction level should be set to 4.

Barcode Layout:

- 4. Header Information
- 5. Government Specific Data
- 6. Trailer

Header Information – This information is placed first in the barcode data stream. The first six fields in the barcode comprise the official header. This information must be consistent among all barcodes and is defined below.

- **Header Version Number** will be incremented each time the standards group alters the physical structure of the barcodes that were created using multiple header formats. This value is static for all barcodes and is currently T2.
- **Developer Code** is a four-digit code used to identify the software developer whose application produced the barcode. The purpose of the field is to allow forms to be traced to the vendor producing them. Software developer codes are assigned through the NACTP and may differ from software developer ID for the form that is assigned by LDR.
- **Jurisdiction** is an alphanumeric identifier indicating the taxing jurisdiction. Use the U.S. Postal Service's official state abbreviations. For Louisiana, use LA.

- **Description** is an alphanumeric identifier used to describe the form being processed. Use 22241 for the Louisiana Corporation Income and Franchise (CIFT-620-2D).
- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.
- Software/Form Version is a vendor-defined version number that reflects the software and form revision used to produce the barcode.

Government Specific Data - For a detailed layout of the government specific data, see Pages 24 through 32 of this document.

Trailer – The trailer is the last field in the barcode data stream. The trailer is used to indicate the end of data has been reached. A static string of *EOD* is used as the trailer value. If a trailer is not found upon scanning the barcode, this indicates that some data may not be included in the barcode due to data size restrictions.

Example of 2-D Barcode: T1<CR> (Header Version Number)

9999<CR> (Developer Code) LA<CR> (Jurisdiction) 6173<CR> (Description)

0<CR> (Specification Version) 1.0<CR> (Software Version)

...

EOD<CR>

Information to Provide to Customers: We are requesting that all participating vendors provide to their customers a few short statements that describe what a two-dimensional barcode is and why it is being utilized. The following information should be provided to the customer:

Louisiana Corporate Income/Franchise Tax Return

The Louisiana Department of Revenue is utilizing two-dimensional (2-D) barcode technology. The barcode contains the information that was entered into your return. You will find this barcode on Page 4 of your completed return. Below, is an example of the 2-D barcode.

2-D Barcode Sample



Schedules B, C, D, E, F, J

	Header Information					
Field		Field				
No.	Field Type	Length	Field Name	Comments		
1	Alphanumeric	2	Header Version	Value is T2 .		
2	Numeric	4	Developer Code	4-digit code (See Appendix 1 of the 2-D Bar Coding Standards.) used to identify the		
				software developer whose application produced the barcode and may differ from the		
				software developer ID in Field 7 below		
3	Alpha	2	Jurisdiction	Value is LA.		
4	Numeric	5	Description	Value is 22241 .		
5	Numeric	1	Specification Version	Value is 0 .		
6	Alphanumeric	10	Software/Form Version	Vendor-defined version number that reflects the software and form revision used to		
	-			produce the barcode.		
			Government Spe	ecific Data		
7	Numeric	10	Revenue Account Number	Revenue Account Number		
2021 (CIFT-620 2D Sc	hedule B-	Computation of Income Tax Apportionment Per	rcentage		
		Max.				
Field		Field				
No.	Field Type	Length	Field Name	Comments		
8	Numeric	10	Revenue Account Number	Revenue Account Number		
9	Numeric	12	Line 1A	Net Sales of Merchandise and / or Charges		
				Total Amount Sales- Sales		
10	Numeric	12	Line 1A	Net Sales of Merchandise and / or Charges		
11	Numeric	12	Line 1B	Louisiana Amount-Sales Net Sales of Merchandise and / or Charges		
''	Numeric	12	Line 16	Total Amount Sales-Charges for Services		
12	Numeric	12	Line 1B	Net Sales of Merchandise and / or Charges		
				Louisiana Amount-Charges for Services		
13	Numeric	12	Line 1C	Net Sales of Merchandise and / or Charges		
				Total Amount Sales-Other Gross Apportionable Income		
14	Numeric	12	Line 1C	Net Sales of Merchandise and / or Charges		
4.5		40	1: 45	Louisiana Amount- Other Gross Apportionable Income		
15	Numeric	12	Line 1D	Net Sales of Merchandise and / or Charges Total Amount Sales- Total Add the Amounts in Columns 1 and 2		
16	Numeric	12	Line 1D	Net Sales of Merchandise and / or Charges		
10	Numeric	12	Line 10	Louisiana Amount- Total Add the Amounts in Columns 1 and 2		
17	Numeric	5	Line 1D	Percentage		

2021 (CIFT-620 2D Sc	hedule B-	Computation of Income Tax Apportionment Per	centage (Continued)
Field		Field		
No.	Field Type	Length	Field Name	Comments
18	Binary	1	Line 2	For certain oil & gas businesses only. Wages, salaries, and other personal service compensation paid during the year. (See instructions.)Ratio not used. Check box. Mark "1" for "Negative Indicator Return Line 5A- Yes". Mark "0" if not applicable
19	Numeric	12	Line 2	Line 2 Wages, salaries, and other personal service compensation paid during the year/ Total Amount
20	Numeric	12	Line 2	Line 2 Wages, salaries, and other personal service compensation paid during the year/ LA Amount
21	Numeric	5	Line 2	Percentage
22	Binary	1	Line 3	Income tax property ratio – Enter percentage from Schedule 2021C, Line 24. Mark "1" for "Ratio Not Used- Yes". Mark "0" if not applicable
23	Numeric	5	Line 3	Percentage
24	Numeric	5	Line 4	Percentage- ONLY corporations primarily in the oil and gas business, enter ratio from Line 1D, Column 4 (See Instructions.)
25	Numeric	5	Line 5	Total of Percents in Column 3
26	Numeric	5	Line 6	Average of Percents — Divide Line 5 by applicable number of ratios. Enter here
			putation of Corporate Income Tax Property Ration Tax Property Ration Located Everywhere Intangible	
27	Numeric	12	Line 1	Cash - Beginning of Year
28	Numeric	12	Line 1	Cash - End of Year
29	Numeric	12	Line 2	Notes and Accounts Receivable - Beginning of Year
30	Numeric	12	Line 2	Notes and Accounts Receivable – End of Year
31	Numeric	12	(Line 3)	Reserve for Bad Debts- Beginning of Year- Negative Amount
32	Numeric	12	(Line 3)	Reserve for Bad Debts- End of Year- Negative Amount
33	Numeric	12	Line 4	Investment in U.S. govt. obligations- Beginning of Year
34	Numeric	12	Line 4	Investment in U.S. govt. obligations- End of Year
35	Numeric	12	Line 5	Stock and Obligation Assets- Beginning of Year
36	Numeric	12	Line 5	Stock and Obligation Assets- End of Year
37	Numeric	12	Line 6	Other Investments- Beginning of Year
38	Numeric	12	Line 6	Other Investments Egginning of Year
39	Numeric	12	Line 7	Loans to Stockholders- Beginning of Year
40	Numeric	12	Line 7	Loans to Stockholders- End of Year
41	Numeric	12	Line 8	Other Intangible Assets- Beginning of Year

	320 2D Schedu		putation of Corporate Income Tax Property Rati	o (Continued)
Field		Field		
No.	Field Type	Length	Field Name	Comments
42	Numeric	12	Line 8	Other Intangible Assets- End of Year
43	Numeric	12	(Line 9)	Accumulated Depreciation- Beginning of Year
44	Numeric	12	(Line 9)	Accumulated Depreciation- End of Year
45	Numeric	12	Line 10	Total Intangible Assets- Add Line 1 through 9- Beginning of Year
46	Numeric	12	Line 10	Total Intangible Assets- Add Line 1 through 9- End of Year
			Tax Property Ratio- Real and Tangible Assets -Locat	
47	Numeric	12	Line 11	Inventories- Beginning of Year
48	Numeric	12	Line 11	Inventories- End of Year
49	Numeric	12	Line 12	Blds, and other depreciable Assets- Beginning of Year
50	Numeric	12	Line 12	Blds, and other depreciable Assets- End of Year
51	Numeric	12	(Line 13)	Accumulated Depreciation- Beginning of Year
52	Numeric	12	(Line 13)	Accumulated Depreciation- End of Year
53	Numeric	12	Line 14	Depletable Assets- Beginning of Year
54	Numeric	12	Line 14	Depletable Assets- End of Year
55	Numeric	12	(Line 15)	Accumulated Depletion- Beginning of Year
56	Numeric	12	(Line 15)	Accumulated Depletion- End of Year
57	Numeric	12	Line 16	Land- Beginning of Year
58	Numeric	12	Line 16	Land- End of Year
59	Numeric	12	Line 17	Other Real and Tangible Assets- Beginning of Year
60	Numeric	12	Line 17	Other Real and Tangible Assets - End of Year
61	Numeric	12	Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets-
				Beginning of Year
62	Numeric	12	Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets- End of
				Year
63	Numeric	12	Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- Beginning of Year
64	Numeric	12	Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- End of Year
65	Numeric	12	Line 20	Less real and tangible assets not used in production of net apportionable income-
				Beginning of Year
66	Numeric	12	Line 20	Less real and tangible assets not used in production of net apportionable income-
				End of Year
67	Numeric	12	Line 21	Balance- Subtract line 20 from Line 19- Beginning of Year
68	Numeric	12	Line 21	Balance- Subtract line 20 from Line 19- End of Year
69	Numeric	12	Line 22	Beginning of year balance- End of Year
70	Numeric	12	Line 23	Total Add Lines 21 and 22- End of Year
Compu	tation of Corpor	ate Income	Tax Property Ratio- Real and Tangible Assets -Local	
71	Numeric	12	Line 11	Inventories- Beginning of Year
72	Numeric	12	Line 11	Inventories- End of Year
73	Numeric	12	Line 12	Blds, and other depreciable Assets- Beginning of Year

Field No.	Field Type	Field Length	Field Name	Comments
74	Numeric	12	Line 12	Blds, and other depreciable Assets- End of Year
75	Numeric	12	(Line 13)	Accumulated Depreciation- Beginning of Year
76	Numeric	12	(Line 13)	Accumulated Depletion- End of Year
77	Numeric	12	Line 14	Depletable Assets- Beginning of Year
78	Numeric	12	Line 14	Depletable Assets- End of Year
79	Numeric	12	(Line 15)	Accumulated Depletion- Beginning of Year
80	Numeric	12	(Line 15)	Accumulated Depletion- End of Year
81	Numeric	12	Line 16	Land- Beginning of Year
82	Numeric	12	Line 16	Land- End of Year
83	Numeric	12	Line 17	Other Real and Tangible Assets- Beginning of Year
84	Numeric	12	Line 17	Other Real and Tangible Assets- End of Year
85	Numeric	12	Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets- Beginning of Year
86	Numeric	12	Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets- End of Year
87	Numeric	12	Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- Beginning of Year
88	Numeric	12	Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- End of Year
89	Numeric	12	Line 20	Line 20 Less real and tangible assets not used in production of net apportionable income- Beginning of Year
90	Numeric	12	Line 20	Line 20 Less real and tangible assets not used in production of net apportionable income- End of Year
91	Numeric	12	Line 21	Balance- Subtract line 20 from Line 19- Beginning of Year
92	Numeric	12	Line 21	Balance- Subtract line 20 from Line 19- End of Year
93	Numeric	12	Line 22	Beginning of year balance- End of Year
94	Numeric	12	Line 23	Total Add Lines 21 and 22- End of Year
95	Numeric	5	Line 24	Income Tax Property Ratio(Line 23, Column 4/Line23, Column 2)
CIFT-	620 2D Schedu	le D- Com	putation of Louisiana Net Income	
96	Numeric	12	Line 1A.	Total- Gross Receipts
97	Numeric	12	Line 1B	Total- Less returns and allowances
98	Numeric	12	Line 1C.	Balance, Subtract Line 1B from Line 1A
99	Numeric	12	Line 2	Less: Cost of goods sold and/ or operations- Attach Schedule
100	Numeric	12	Line 3	Gross Profit- Subtract Line 2 from Line 1C
	Numeric	12	Line 4	Gross Rents
102	Numeric	12	Line 5	Gross Royalties
103	Numeric	12	Line 6	Income from estates, trusts, and partnerships
104	Numeric	12	Line 7	Income from construction, repair, etc.
105	Numeric	12	Line 8	Other Income -Attach Schedule
106	Numeric	12	Line 9	Total Income-Add Lines 3 through 8.
107	Numeric	12	Line 10	Compensation of Officers
108	Numeric	12	Line 11	Salaries and wages (not deducted elsewhere)

109	Numeric	12	Line 12	Repairs
110	Numeric	12	Line 13	Bad Debt
CIFT-	620 2D Schedu	le D- Com	putation of Louisiana Net Income (Continued)	
Field		Field		
No.	Field Type	Length	Field Name	Comments
111	Numeric	12	Line 14	Rent
112	Numeric	12	Line 15	Taxes and Licenses
113	Numeric	12	Line 16	Interest
114	Numeric	12	Line 17	Charitable Contributions
115	Numeric	12	Line 18	Depreciation
116	Numeric	12	Line 19	Depletion
117	Numeric	12	Line 20	Advertising
118	Numeric	12	Line 21	Pension, Profit Sharing, Stock Bonus, and Annuity Plans
119	Numeric	12	Line 22	Other employee benefit plans
120	Numeric	12	Line 23	Other Deductions
121	Numeric	12	Line 24	Total Deductions- Add Line 10 through 23
122	Numeric	12	Line 25	Net Income from All Sources- subtract Line 24 from 9
			Line 26 Allocable Income From All Sources	
123	Numeric	12	Line 26A	Net rents and royalties form immovable or corporeal movable property
124	Numeric	12	Line 26B	Royalties from the use of patents, trademarks, etc.
125	Numeric	12	Line 26C	Income from estates, trusts, and partnerships
126	Numeric	12	Line 26D	Income from construction, repair, etc
127	Numeric	12	Line 26E	Other Allocable Income
128	Numeric	12	(Line 26F)	Allocable Expenses
129	Numeric	12	Line 26G	Net allocable income from all sources
130	Numeric	12	Line 27	Net income subject to apportionment- Subtract Line 26G from Line 25
131	Numeric	12	Line 28	Net income apportioned to Louisiana
			Line 29 Allowable income from Louisiana Sources	
132	Numeric	12	Line 29A	Net rents and Royalties from immovable or corporeal movable property
133	Numeric	12	Line 29B	Royalties form the use of patents, trademarks, etc.
134	Numeric	12	Line 29C	Income from Estates, Trusts, and Partnerships.
135	Numeric	12	Line 29D	Income from construction, repair, etc.
136	Numeric	12	Line 29E	Other Allocable Income
137	Numeric	12	(Line 29F)	Allocable Expenses
138	Numeric	12	Line 29G	Net Allocable Income from Louisiana Sources
139	Numeric	12	Line 30	Louisiana Net Income before loss adjustments and federal income tax deduction-
				Add Line 28 and Line 29G

Field		Field		
No.	Field Type	Length	Field Name	Comments
140	Numeric	12	Line 1	Net Income per books
141	Numeric	12	Line 2	Louisiana Income Tax
142	Numeric	12	Line 3	Excess of Capital Loss over Capital Gains
143	Numeric	12	Line 4	Taxable Income not recorded on books this year, but not deducted in this return:
			Line 5 Expenses Recorded on books this year	
144	Numeric	12	Line 5a	Depreciation
145	Numeric	12	Line 5b	Depletion
146	Numeric	12	Line 5c	Other
147	Numeric	12	Line 6	Total- Add Line 1 through 5c
148	Numeric	12	Line 7	Income recorded on books this yea, but not included in this return
			Line 8 Deductions	Deductions in this tax return not charged against book income this year:
149	Numeric	12	Line 8a	Depreciation
150	Numeric	12	Line 8b	Depletion
151	Numeric	12	Line 8c	Other
152	Numeric	12	Line 9	Total- Add Lines 7 through 8c
153	Numeric	12	Line 10	Net Income from all Sources per return- Subtract Line 9 from Line 6
CIFT-	620 2D Schedu	le F Reco	nciliation of Federal and Louisiana Net Income	
154	Numeric	12	Line 1	Enter the total net income calculated under federal law before special deductions
			Line 2 Additions to Federal Net Income	
155	Numeric	12	Line 2a	Louisiana income Tax
156	Numeric	12	Line 2b	Related Members, interest\ intangible\management fee expenses or cost. From
				Form R- 6950
157	Numeric	12	Line 2c	Donation to School Tuition Organization Credit
158	Numeric	12	Line 2d	Other Additions
159	Numeric	12	Line 2e	Total Additions- Add Lines 2a through 2d
			Line 3 Subtractions from Federal Net Income	
160	Numeric	12	Line 3a	Bank Dividends
161	Numeric	12	Line 3b	All Other Dividends
162	Numeric	12	Line 3c	Interest
163	Numeric	12	Line 3d	Road Home- The amount included in federal taxable income
164	Numeric	12	Line 3e	LA depletion in excess federal depletion
165	Numeric	12	Line 3f	Expenses not deducted on the federal return due to IRS Code Section 280C
166	Numeric	12	Line 3g	Exempt amount of related members interest\intangible\management fee expense
				or costs, From Form R- 6950
167	Numeric	12	Line 3h	Compensation for Disaster Services
168	Numeric	12	Line 3i	Expense not deducted on federal return due to IRC Section 280E
<mark>169</mark>	Numeric	<mark>12</mark>	Line 3j	Covid Relief Benefits
170	Numeric	12	Line 3k	Other Subtractions

171	Numeric	12	Line 3I	Total Subtractions. Add Lines 3a through 3k.			
172	Numeric	12	Line 4	Louisiana Net Income from All Sources- This amount should agree with Schedule D,			
				Line 25			
	Government Specific Data- Schedule J						
Field		Field					
No.	Field Type	Length	Field Name	Comments			
	lule J- Calculati	_					
173	Binary	1	Line 1	Short Period Filers Checkbox			
174	Numeric	12	Line 1	Enter the amount of net taxable income from CIFT-620, Line 1E			
			Line 2 Calculation of Tax	·			
175	Numeric	5	Line 2a, Column 1	First \$25,000 of net taxable income – Net income in Each Bracket			
176	Numeric	12	Line 2a, Column 2	First \$25,000 of net taxable income- Tax			
177	Numeric	5	Line 2b, Column 1	Next \$25,000 – Net Income in Each Bracket			
178	Numeric	12	Line 2b, Column 2	Next \$25,000 – Tax			
179	Numeric	5	Line 2c, Column 1	Next \$50,000- Net Income in Each Bracket			
180	Numeric	12	Line 2c, Column 2	Next \$50,000- Tax			
181	Numeric	6	Line 2d, Column 1	Next \$100,000, - Net Income in Each Bracket			
182	Numeric	12	Line 2d, Column 2	Next \$100,000, - Tax			
183	Numeric	12	Line 2e, Column 1	Over \$200,000- Net Income in Each Bracket			
184	Numeric	12	Line 2e, Column 2	Over \$200,000- Tax			
185	Numeric	12	Line 3, Column 1	Add amounts in Column 1, Line 2a through 2e and enter the result			
186	Numeric	12	Line 4, Column 2	Add amounts in Column 2, Line 2a through 2e, Round to the nearest dollar. Enter			
				the result in Column 2 and on CIFT-620, Line 2			
Schedu	ule J-1 Pass Thr	ough Entity	/ Tax Election Calculation of Income Tax				
187	Numeric	1	Line 1	Short Period Filers-Indicator Box			
188	Numeric	13	Line 1	Amount of Net Taxable Income from CIFT-620 1E			
189	Numeric	9	Line 2a; Column 1	Next \$25,000 – Net Income in Each Bracket			
190	Numeric	13	Line 2a; Column 2	Next \$25,000 – Tax			
191	Numeric	9	Line 2b	Next \$75,000- Net Income in Each Bracket			
192	Numeric	13	Line 2b	Next \$75,000- Tax			
193	Numeric	9	Line 2c	Next \$100,000, - Net Income in Each Bracket			
194	Numeric	13	Line 2c	Next \$100,000, - Tax			
195	Numeric	9	Line 3	Add amounts in Column 1, Lines 2a through 2c and enter the result.			
196	Numeric	13	Line 4	Add the amounts in Column 2, Lines 2a through 2c. Enter the amount in Column 2			
				and on CIFT-620, Line2.			
			Trailer				
197			Indicates the end of the data file. Value is *EOD*.				

Schedules G-1, H, L, M

Requirements:

- The 2-D barcode should be placed on Page 4 of the return on Lines 51-57 in Positions 27- 61. The barcode must fit within this area of the form.
- Use a carriage return <CR> to delimit fields. Each barcode field should have a carriage return, even if no information is contained in the field. This carriage return should measure as 1 byte of data.
- No punctuation is allowed in any field. No hyphens, dashes, parentheses, or other separators should be used.
- All alpha characters must be in uppercase.
- If a field is not applicable, leave blank unless specifically instructed otherwise.
- Negative amounts are not accepted. If less than zero, enter zero.
- Only whole dollar amounts should be entered.
- Do not include supplemental information in the barcode.
- Error correction level should be set to 4.

Barcode Layout:

- 7. Header Information
- 8. Government Specific Data
- 9. Trailer

Header Information – This information is placed first in the barcode data stream. The first six fields in the barcode comprise the official header. This information must be consistent among all barcodes and is defined below.

- **Header Version Number** will be incremented each time the standards group alters the physical structure of the barcodes that were created using multiple header formats. This value is static for all barcodes and is currently T3.
- **Developer Code** is a four-digit code used to identify the software developer whose application produced the barcode. The purpose of the field is to allow forms to be traced to the vendor producing them. Software developer codes are assigned through the NACTP and may differ from software developer ID for the form that is assigned by LDR.
- **Jurisdiction** is an alphanumeric identifier indicating the taxing jurisdiction. Use the U.S. Postal Service's official state abbreviations. For Louisiana, use LA.

- Description is an alphanumeric identifier used to describe the form being processed. Use 22241 for the Louisiana Corporation Income/Franchise (CIFT-620-2D).
- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.
- Software/Form Version is a vendor-defined version number that reflects the software and form revision used to produce the barcode.

Government Specific Data – For a detailed layout of the government specific data, see Pages 24 through 32 of this document.

Trailer – The trailer is the last field in the barcode data stream. The trailer is used to indicate the end of data has been reached. A static string of *EOD* is used as the trailer value. If a trailer is not found upon scanning the barcode, this indicates that some data may not be included in the barcode due to data size restrictions.

Example of 2-D Barcode: T1<CR> (Header Version Number)

9999<CR> (Developer Code) LA<CR> (Jurisdiction) 6173<CR> (Description)

0<CR> (Specification Version) 1.0<CR> (Software Version)

...

EOD<CR>

Information to Provide to Customers: We are requesting that all participating vendors provide to their customers a few short statements that describe what a two-dimensional barcode is and why it is being utilized. The following information should be provided to the customer:

Louisiana Corporate Income/Franchise Tax Return

The Louisiana Department of Revenue is utilizing two-dimensional (2-D) barcode technology. The barcode contains the information that was entered into your return. You will find this barcode on Page 4 of your completed return. Below, is an example of the 2-D barcode.

2-D Barcode Sample



	Header Information						
Field		Field					
No.	Field Type	Length	Field Name	Comments			
1	Alphanumeric	2	Header Version	Value is T3 .			
2	Numeric	4	Developer Code	4-digit code (See Appendix 1 of the <u>2-D Bar Coding Standards</u> .) used to identify the			
				software developer whose application produced the barcode and may differ from the			
				software developer ID in Field 7 below			
3	Alpha	2	Jurisdiction	Value is LA.			
4	Numeric	5	Description	Value is 22241 .			
5	Numeric	1	Specification Version	Value is 0 .			
6	Alphanumeric	10	Software/Form Version	Vendor-defined version number that reflects the software and form revision used to			
			0	produce the barcode.			
			Government Spe	ecific data			
Field		Max. Field					
No.	Field Type	Length	Field Name	Comments			
7	Numeric	10	Louisiana Revenue Account Number	Louisiana Revenue Account Number			
'	Numenc	10	Louisiana Nevenue Account Number	NOTE: This is not the FEIN.			
Sched	ule G1- Compu	tation of	Franchise Tax Base	NOTE: THIS IS NOT EIT.			
Capital		tation or	Tanonico Tax Baco				
8	Numeric	12	Line 1A	Common Stock- Include paid – in or Capital Surplus			
9	Numeric	12	Line 1B	Preferred Stock- Include paid in or Capital Surplus			
10	Numeric	12	Line 2	Add Line 1A and 1B			
11	Numeric	12	Line 3	Surplus and Undivided Profits			
12	Numeric	12	Line 4	Surplus Reserves- include any excessive reserves or undervalued assets			
13	Numeric	12	Line 5	Total Add Lines 2,3, and 4			
14	Numeric	12	Line 6	Due to Subsidiaries and Affiliates- Do not net the receivables			
15	Numeric	12	Line 7	Deposit Liabilities to Affiliates- Include in the amount on Line 7			
16	Numeric	12	Line 8	Accounts Payable less than 180 days old- Include in the amount on Line 6			
17	Numeric	12	Line 9	Adjusted Debt to Affiliates-Subtract Line 7 and 8 from 6			
18	Numeric	12	Line 10 a	If Line 9 is greater than zero, AND Line 5 is greater than or equal to zero, subtract			
				Line 5 from Line 9, IF both conditions of this line do not apply, skip to Line10B			
19	Numeric	12	Line 10b	If Line 9 is greater than zero, AND Line 5 is less than or equal to zero, subtract Line			
				5 from Line 9. Multiply the difference by 50 percent and enter the result here.			
20	Numeric	12	Lin e11	Additional Surplus and Undivided Profits- See Instructions			

Total F	ranchise Taxab	le Base		
21	Numeric	12	Line 12	Capital Stock: Common Stock
22	Numeric	12	Line 12	Capital Stock: Preferred
23	Numeric	12	Line 13	Paid in or Capital Surplus- Include Items of paid-in capital in excess of par value
24	Numeric	12	Line 14	Surplus Reserves- Attach Schedule
25	Numeric	12	Line 15	Earned Surplus and Undivided Profits
26	Numeric	12	Line 16	Excessive Reserves or Undervalued Assets
				ernment Specific Data (continued)
Field No.	Field Type	Max. Field	Field Name	Comments
		Length		
Sched	ule G1- Comp	utation of	Franchise Tax Base- Total Fran	nchise Taxable Base- Continued
27	Numeric	12	Line 17	Additional Surplus and Undivided Profits- From Line 11 above
28	Numeric	12	Line 18	Allowable Deductions- See instructions
29	Numeric	12	Line 19	Total Capital, Surplus, and Undivided Profits- Add Lines 12 through 18. Also enter
				the total on CIFT-620, Lin e5A. Round to the nearest dollar
Gover	nment Specifi	c Data- Scl	hedule H- Computation of Corp	porate Franchise Tax Property Ratio
End of	Year- Located I	Everywhere	·	
30	Numeric	12	Line 1	Cash
31	Numeric	12	Line 2	Notes and accounts receivables
32	Numeric	12	(Line 3)	Reserve for bad debts
33	Numeric	12	Line 4	Investment in U.S. govt. obligations
34	Numeric	12	Line 5	Stock and Obligations of subsidiaries
35	Numeric	12	Line 6	Other Investments- Attach Schedule
36	Numeric	12	Line 7	Loans to Stockholders
37	Numeric	12	Line 8	Other Intangible Assets- Attach Schedule
38	Numeric	12	(Line 9)	Accumulated Depreciation
39	Numeric	12	Line 10	Total Intangible Assets- Add Line 1-9
40	Numeric	12	Lin e11	Inventories
41	Numeric	12	Line 12	Bldgs, and other depreciable assets
42	Numeric	12	(Line 13)	Accumulated Depreciation
43	Numeric	12	Lin e14	Depletable Assets
44	Numeric	12	(Line 15)	Accumulated Depletion
45	Numeric	12	Line 16	Land
46	Numeric	12	Line 17	Other real & tangible assets
47	Numeric	12	Line 18	Excessive reserves, assets not reflected on books, or undervalued assets
48	Numeric	12	Line 19	Total real and tangible assets- Add Line 11 through 18
49	Numeric	12	Line 20	Total Assets- Add Line 10 and 19
	Year- Located i			
50	Numeric	12	Line 1	Cash
51	Numeric	12	Line 2	Notes and accounts receivables
52	Numeric	12	(Line 3)	Reserve for bad debts

53	Numeric	12	Line 4	Investment in U.S. govt. obligations
54	Numeric	12	Line 5	Stock and Obligations of subsidiaries
55	Numeric	12	Line 6	Other Investments- Attach Schedule
56	Numeric	12	Line 7	Loans to Stockholders
57	Numeric	12	Line 8	Other Intangible Assets- Attach Schedule
58	Numeric	12	(Line 9)	Accumulated Depreciation
59	Numeric	12	Line 10	Total Intangible Assets- Add Line 1-9
60	Numeric	12	Lin e11	Investories
61	Numeric	12	Line 12	Bldgs, and other depreciable assets

Schedule H- Computation of Corporate Franchise Tax Property Ratio (continued)

Field No.	Field Type	Max. Field Length	Field Name	Comments
62	Numeric	12	(Line 13)	Accumulated Depreciation
63	Numeric	12	Lin e 14	Depletable Assets
64	Numeric	12	(Line 15)	Accumulated Depletion
65	Numeric	12	Line 16	Land
66	Numeric	12	Line 17	Other real & tangible assets
67	Numeric	12	Line 18	Excessive reserves, assets not reflected on books, or undervalued assets
68	Numeric	12	Line 19	Total real and tangible assets- Add Line 11 through 18
69	Numeric	12	Line 20	Total Assets- Add Line 10 and 19
70	Numeric	5	Lin e 21	Franchise Tax Property Ratio – Line 20, Column 2/ Line20, Col 1

Schedule I- Computation of Corporate Franchise Tax Apportionment Percentage

71	Numeric	12	Line 1A	Net sales of merchandise- Total Amount
72	Numeric	12	Line 1A	Net Sales- Louisiana Amount
73	Numeric	12	Line 1B	Charges for Services- Total Amount
74	Numeric	12	Line 1B	Charges for services- LA Amount
75	Numeric	12	Line 1Ci	Other Revenues- Rents and Royalties- Total Amount
76	Numeric	12	Line 1Ci	Other Revenues- Rents and Royalties- LA Amount
77	Numeric	12	Lin e1Cii	Other Revenues- Dividends and Interest- Total Amount
78	Numeric	12	Line 1Cii	Other Revenues- Dividends and Interest- LA Amount
79	Numeric	12	Line 1Ciii	Other Dividends and Interest- Total Amount
80	Numeric	12	Line 1Ciii	Other Dividends and Interest- LA Amount
81	Numeric	12	Line 1Civ	All Other Revenue- Total Amount
82	Numeric	12	Line 1Civ	All Other Revenue-LA Amount
83	Binary	1	1D	If ration is not used check the box.
84	Numeric	12	1D	Total- Total Amount
85	Numeric	12	1D	Total- LA Amount
86	Numeric	5	1D	Total- Percent
87	Binary	1	Line 2	Franchise Tax Property Ratio- Schedule H, Line 21
88	Numeric	5	Line 2	Franchise Tax Property Ratio- Schedule H, Line 21
89	Numeric	5	Line 3	Lin e3 Total of Applicable Percents in Column 3
90	Numeric	5	Line 4	Line 4 Average of Percents- Divide Line 3 by applicable number of ratios

Sched	dule L- Calcula	tion of Fra	nchise Tax	
91	Binary	1	Line 1	Short Period Check Box
92	Numeric	12	Line 1	Enter the amount from CIFT-620, Line 5C or Line 6, whichever is greater
93	Numeric	6	Line 2	Enter the amount of Line 1 or \$300,000, whichever is less
94	Numeric	3	Line 3	Multiply the amount on line 2 by \$1.50 for each \$1,000 or major fraction and enter the result
95	Numeric	12	Line 4	Subtract Line 2 from Lin e1 and enter the result.
96	Numeric	9	Line 5	Multiply the amount on line 4 by \$3.00 for each \$1,000 or major fraction and enter the result
97	Numeric	9	Line 6	Add Lines 3 and 5. Round to the nearest dollar. Enter the result here and on CIFT-620, Line 7
Sched	dule M Analysis	s of Sched	lule G, Line 11, Column 2 Earned Surplus and U	ndivided Profits per Books
98	Numeric	12	Line 1	Balance at beginning of year
99	Numeric	12	Line 2	Net Income Per Books
100	Numeric	12	Line 3	Other increases- Attach Schedule
101	Numeric	12	Line 4	Total – Add Line 1, 2, and 3
102	Numeric	12	Line 5a	Distributions- Cash
103	Numeric	12	Line 5b	Distributions- stock
104	Numeric	12	Line 5c	Distributions- Property
105	Numeric	12	Line 6	Other Decreases- Attach Schedule
106	Numeric	12	Line 7	Total – Add Lines 5a through 6
107	Numeric	12	Line 8	Balance at end of year- Subtract Line 7 from Line 4
			Trailer	
108			Indicates the end of the data file. Value is *EOD*.	