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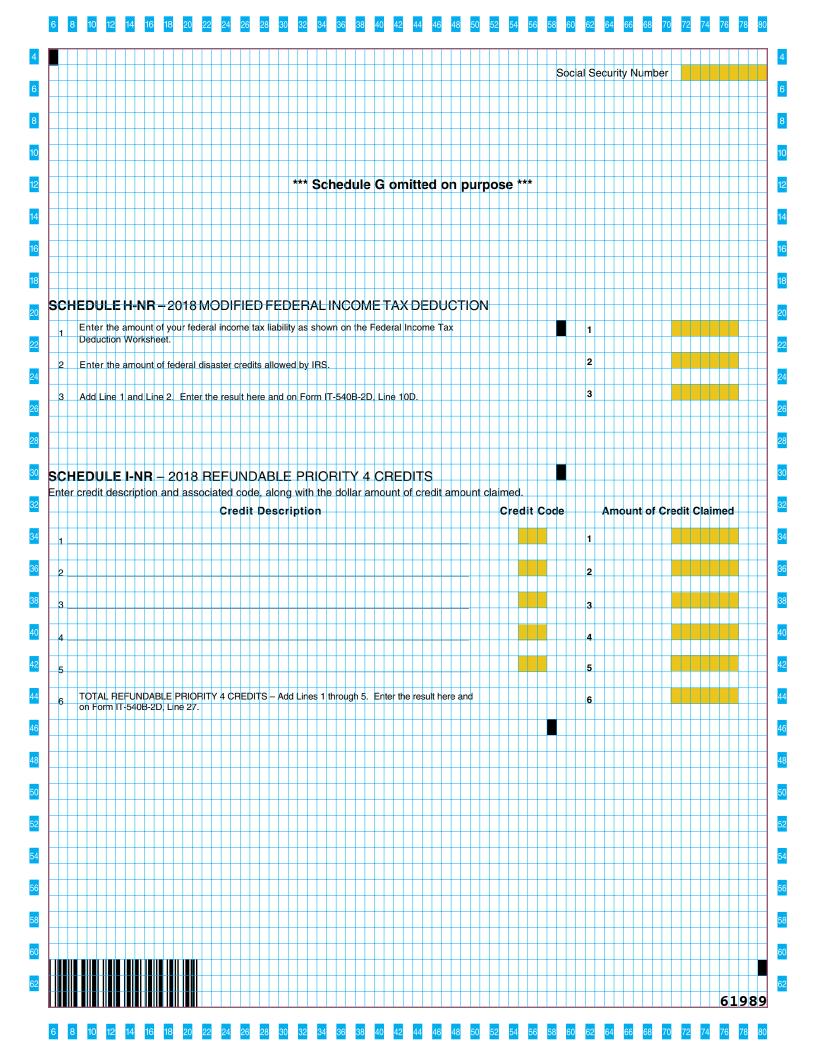
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22	NONREFUNDABLE PRIORITY 3 CREDITS - From Schedule J-NR, Line 16	22				
	ADJUSTED LOUISIANA INCOME TAX - Subtract Line 22 from Line 20. If the result is less than zero or you	u				
23	are not required to file a federal return, enter zero "0".	23				
24A	CONSUMER USE TAX for purchases before July 1, 2018 No use tax due.	24A				
24B	CONSUMER USE TAX for purchases on or after July 1, 2018 Amount from the Consumer Use Tax Worksheet.	24B				
25	TOTAL INCOME TAX AND CONSUMER USE TAX - Add Lines 23, 24A, AND 24B.	25				
26	OVERPAYMENT OF REFUNDABLE PRIORITY 2 CREDITS - Enter the amount from Line 21.	26				
27	REFUNDABLE PRIORITY 4 CREDITS - From Schedule I-NR, Line 6	27				
28	AMOUNT OF LOUISIANA TAX WITHHELD FOR 2018 – Attach Forms W-2 and 1099.	28				
29	AMOUNT OF CREDIT CARRIED FORWARD FROM 2017					
2.3		29				
30	AMOUNT PAID ON YOUR BEHALF BY A COMPOSITE PARTNERSHIP FILING Enter name of partnership.	30				
31	AMOUNT OF ESTIMATED PAYMENTS FOR 2018	31				
32	AMOUNT PAID WITH EXTENSION REQUEST	32				
- VE	7 110 5 11 110 11 11 11 11 11 11 11 11 11 11 11	32				
33	TOTAL REFUNDABLE TAX CREDITS AND PAYMENTS - Add Lines 26 through 32.	33				
34	OVERPAYMENT - If Line 33 is greater than Line 25, subtract Line 25 from Line 33. Otherwise, enter zero "0" or	1 34				
+ + + + + + + + + + + + + + + + + + + +	Lines 34 through 40 and go to Line 41.	34				
35	UNDERPAYMENT PENALTY - If you are a farmer, mark the box.	35				
	ADJUSTED OVERPAYMENT - If Line 34 is greater than Line 35, subtract Line 35 from Line 34 and					
36	enter the result here. If Line 35 is greater than Line 34, enter zero "0" on Lines 36 through 40, sub- tract Line 34 from Line 35, and enter the balance on Line 41.	36				
37	TOTAL DONATIONS - From Schedule D-NR, Line 21	37				
00						
38	SUBTOTAL - Subtract Line 37 from Line 36. This amount of overpayment is available for credit or refund.	38				
39	AMOUNT OF LINE 38 TO BE CREDITED TO 2019 INCOME TAX CREDIT	39				
40	AMOUNT TO BE REFUNDED - Subtract Line 39 from Line 38.					
	Enter a "2" in box if you want to receive your refund by paper check.					
+ + +	Enter a "3" in box if you want to receive your refund by direct deposit and complete the information below. If the information is unreadable, you will receive your refund REFUND	40				
+++	by paper check If you are filing for the first time or if you do not make a refund selection, you					++++
+++	If you are filing for the first time or if you do not make a refund selection, you will receive your refund by paper check.					++++
	DIRECT DEPOSIT INFORMATION					
	Type: Checking Savings Will this refund be forwarded to a financial institution located outside the United Sta		es	No		+
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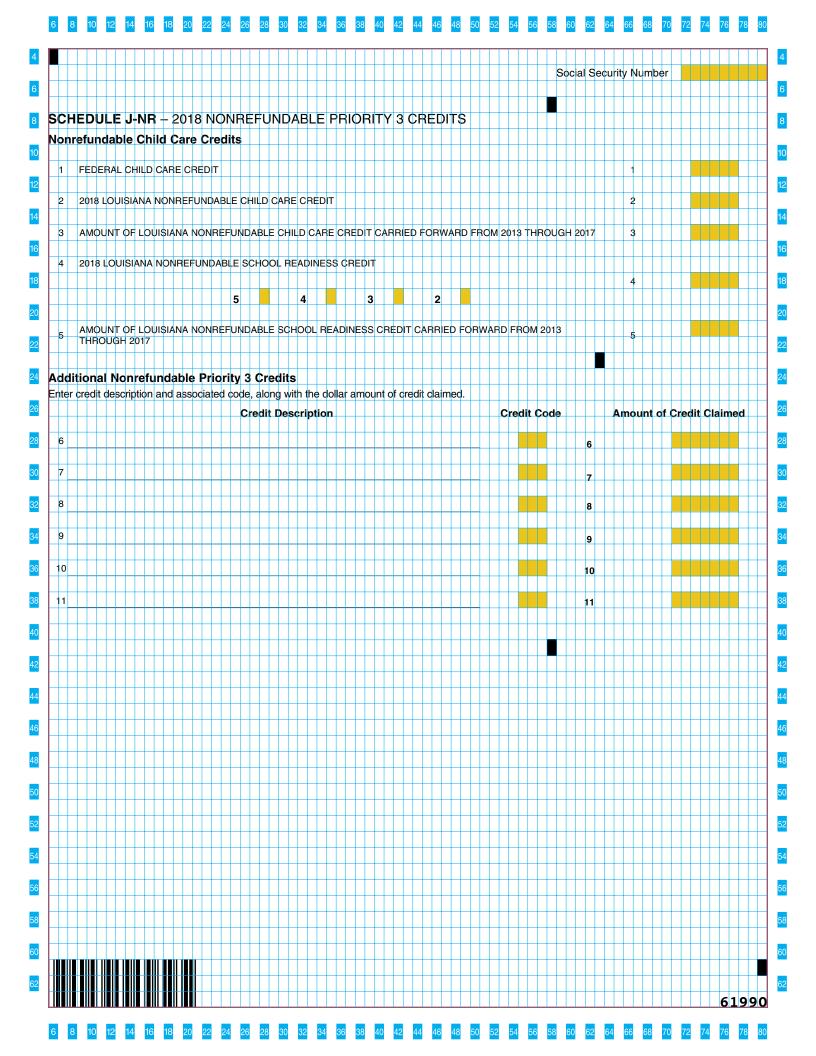
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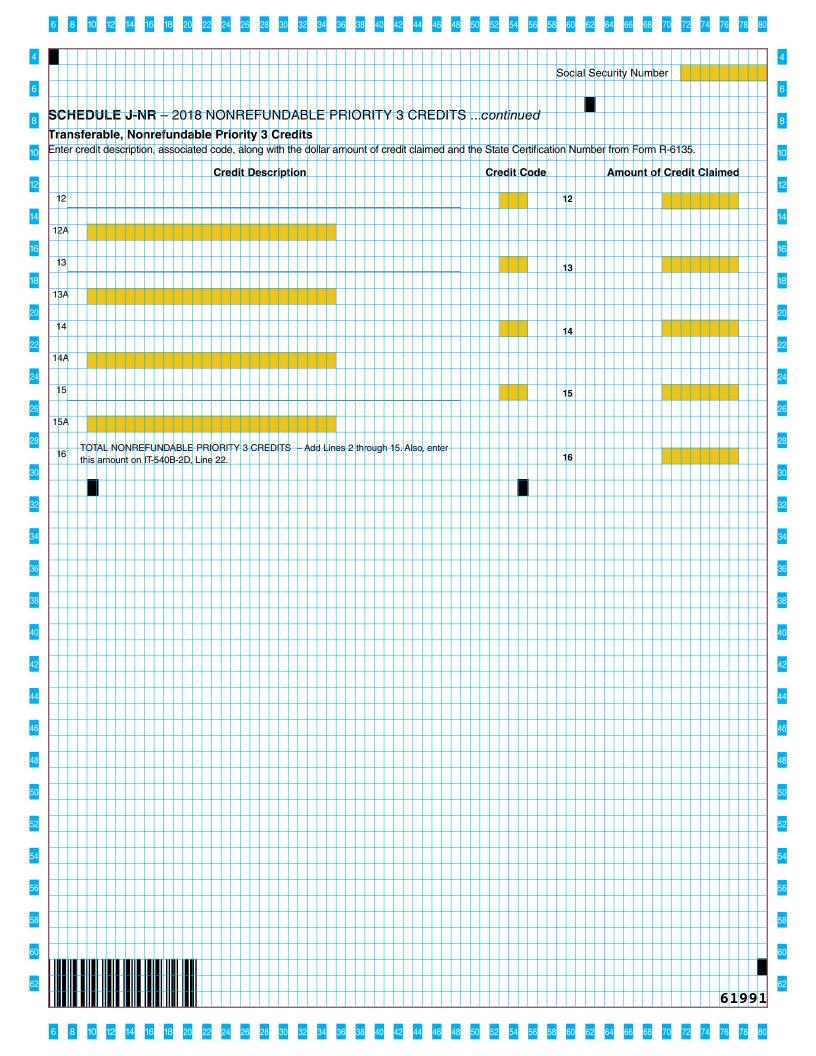
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4	The START P	rogram	4				14	Friends of Palmeto State Park 14
5	Wildlife Habita Trust Fund	at and Natural Heritaç	ge 5				15	The American Rose Society 15
6	Louisiana Car	ncer Trust Fund	6				16	The Extra Mile 16
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2018 CREDIT CODES

DO NOT MAIL THIS PAGE (INFORMATION ONLY)

Schedule C-NR - Nonret	undable Priority 1 Credits
DescriptionCodeEducation Credit Act 125 Recovery	Description Code Owner of Newly Constructed Accessible Home Act 125
Premium Tax	Recovery
Commercial Fishing	Qualified Playgrounds
Family Responsibility	Debt Issuance
Small Town Health Professionals	Donations of Materials, Equipment, Advisors, Instructors Act 125
Bone Marrow	Recovery
Law Enforcement Education	Conversion of Vehicle to Alternative Fuel
First Time Drug Offenders	(Reserved for future credits. Do not use unless specifically
Bulletproof Vest	directed to do so by LDR.)
	ndable Priority 2 Credits
Description Code	Description Code
Ad Valorem Offshore Vessels	School Readiness Business-Supported Child Care
Telephone Company Property	School Readiness Fees and Grants to Resource and
Prison Industry Enhancement	Referral Agencies
Mentor-Protégé57F	Retention and Modernization
Milk Producers	Conversion of Vehicle to Alternative Fuel Act 125 Recovery 71F
Technology Commercialization	Digital Interactive Media and Software
Historic Residential	(Reserved for future credits. Do not use unless specifically
School Readiness Child Care Directors and Staff	directed to do so by LDR.)
Schedule F-NR – Transferable Description	e, Refundable Priority 2 Credits Code
•	ons62F
Schedule I-NR – Refur	ndable Priority 4 Credits
Description	Code
Inventory Tax	50F
Ad Valorem Natural Gas	51F
Schedule J-NR - Nonref	undable Priority 3 Credits
Description Code	Description Code
Atchafalaya Trace	Eligible Re-entrants
Organ Donation	Neighborhood Assistance
Household Expense for Physically and Mentally Incapable	Research and Development
Persons	Cane River Heritage
Recycling Credit	Ports of Louisiana Investor
Basic Skills Training	Ports of Louisiana Import Export Cargo
Donation to School Tuition Organization	Biomed/University Research
Inventory Tax Credit Carried Forward and ITEP	Tax Equalization
Ad Valorem Natural Gas Credit Carried Forward	Manufacturing Establishments
Owner of Accessible and Barrier-free Home	Enterprise Zone
New Jobs Credit	(Reserved for future credits. Do not use unless specifically
Refunds by Utilities	directed to do so by LDR.)
Schedule J-NR – Transferable,	Nonrefundable Priority 3 Credits
Description Code	Description Code
Motion Picture Investment	New Markets
Research and Development	Brownfields Investor
Historic Structures	Motion Picture Infrastructure
Digital Interactive Media	Angel Investor
Capital Company	(Reserved for future credits. Do not use unless specifically directed to do so by LDR.)
Ex Community Development i maneiar institution (LODFI) 200	andition to do so by LDII.)

2018 Nonresident and Part-Year Resident (NPR) Worksheet

		Federal	Louisiana
1	Wages, salaries, tips, etc.		
2	Taxable interest		
3	Dividends		
4	Business income (or loss) and farm income (or loss)		
5	Gains (or losses)		
6	IRA distributions, pensions, and annuities.		
7	Rental real estate, royalties, partnerships, S corporations, trusts, etc.		
8	Social Security benefits		
9	Other income		
10	Total Income – Add the income amounts on Lines 1 through 9 for each column.		
11	Total Adjustments to Income		
12	Adjusted Gross Income – Subtract Line 11 from Line 10 for each column. Enter the amount in the Federal column on IT-540B-2D, Line 7. The amount shown in the Federal column should agree with Federal Form 1040, Line 7.		
Addi	tions 2018 Adjustments to Income		
13	Interest and dividend income from other states and their political subdivisions		
14	Recapture of START contributions		
15	Add back of donation to student tuition organization credit		
16	Total – Add Lines 12 through 15.		
Subt	ractions		
17	Interest and Dividends on U.S. Government Obligations		
18	Louisiana State Employees' Retirement Benefits – Taxpayer date retired: Spouse date retired:		
19	Louisiana State Teachers' Retirement Benefits – Taxpayer date retired: Spouse date retired:		
20	Federal Retirement Benefits – Date retired: Taxpayer Spouse:		
21	Other Retirement Benefits – Date retired: Taxpayer Spouse: Provide name or statute:		
22	Annual Retirement Income Exemption for Taxpayers 65 or over – Provide name of pension or annuity:		
23	Native American Income		
24	START Savings Program Contribution		
25	Military Pay Exclusion		
26	Road Home		
27	Recreation Volunteer or Volunteer Firefighter		
28	Voluntary Retrofit Residential Structure		
29	IRC 280C Expense Adjustment		
30	Elementary and Secondary School Tuition, Educational Expenses for Home-Schooled Children, Educational Expenses for Quality Public Education		
31	Capital Gain from Sale of Louisiana Business		
32	Entity Level Taxes Paid to Other States		
33	Other Exempt Income Identify:		
34	Total Exempt Income – Add Lines 17 through 33.		
35	LOUISIANA ADJUSTED GROSS INCOME . Subtract Line 34 from Line 16 and enter here and on IT-540B-2D, Line 8.		



2018 Louisiana School Expense Deduction Worksheet (For use with Form IT-540B-2D)

Your Name	Your Social Security Number

- I. This worksheet should be used to calculate the three School Expense Deductions listed below. These deductions may only be taken for school expense paid in Louisiana during the time a person was a Louisiana resident. Refer to Revenue Information Bulletin 12-008 and 09-019 on LDR's website for more information.
 - 1. **Elementary and Secondary School Tuition** R.S. 47:297.10 provides a deduction for amounts paid during the tax year for tuition and fees required for your dependent child's enrollment in a nonpublic elementary or secondary school that complies with the criteria set forth in *Brumfield v. Dodd* and Section 501(c)(3) of the Internal Revenue Code or to any public elementary or secondary laboratory school that is operated by a public college or university. The school can verify that it complies with the criteria. The deduction is equal to the actual amount of tuition and fees paid per dependent, limited to \$5,000. The tuition and fees that can be deducted include amounts paid for tuition, fees, uniforms, textbooks and other supplies **required** by the school.
 - 2. **Educational Expenses for Home-Schooled Children** R.S. 47:297.11 provides a deduction for educational expenses paid during the tax year for home-schooling your dependent child. In order to qualify for the deduction, you must be approved by the State Board of Elementary and Secondary Education (BESE) for home-schooling. The deduction is equal to 50 percent of the actual qualified educational expenses paid for the home-schooling per dependent, limited to \$5,000. Qualified educational expenses include amounts paid for the purchase of textbooks and curricula necessary for home-schooling.
 - 3. **Educational Expenses for a Quality Public Education** R.S. 47:297.12 provides a deduction for the fees or other amounts paid during the tax year for a quality education of a dependent child enrolled in a public elementary or secondary school, including Louisiana Department of Education approved charter schools. The deduction is equal to 50 percent of the amounts paid per dependent, limited to \$5,000. The amounts that can be deducted include amounts paid for uniforms, textbooks and other supplies **required** by the school.
- II. On the chart below, list the name of each student and the name of the school the student attends. If the student is home-schooled, enter "home-schooled." Enter an "X" in the box in column 1 if your dependent qualifies for the Elementary and Secondary School Tuition deduction, column 2 for Educational Expenses for Home-Schooled Children deduction, or column 3 for Quality Public Education deduction. If you have more than six qualifying dependents, attach a statement to your return with the required information.

Student	Name of Qualifying Dependent	Name of School		on as de n Section	escribed n I
			1	2	3
A					
В					
С					
D					
E					
F					

III. Using the letters that correspond to each qualifying dependent listed in Section II, list the amount paid per student for each qualifying expense. For students attending a qualifying school, the expense must be for an item **required** by the school. Refer to the information in Section I to determine which expenses qualify for the deduction. Retain copies of cancelled checks, receipts and other documentation in order to support the amount of qualifying expenses. If you checked column 1 in Section II, skip the 50% calculation below; however, the deduction is still limited to \$5,000.

Qualifying Expanse		List the amour	nt paid for each	student as liste	d in Section II.	
Qualifying Expense	Α	В	С	D	E	F
Tuition and Fees						
School Uniforms						
Textbooks, or Other Instructional Materials						
Supplies						
Total (add amounts in each column)						
If column 2 or 3 in Section II was checked, multiply by:	50%	50%	50%	50%	50%	50%
Deduction per Student – Enter the result or \$5,000 whichever is less.						

IV. Total the Deduction per Student in Section III, based on the deduction for which the students qualified as marked in boxes 1, 2, or 3 in Section II.

Enter the total Elementary and Secondary School Tuition Deduction.	\$
Enter the total Educational Expenses for Home-Schooled Children Deduction.	\$
Enter the total Educational Expenses for a Quality Public Education Deduction.	\$
Enter the total deduction here and on the Nonresident and Part-year Resident (NPR) Worksheet, Line 30.	\$



2018 Louisiana Refundable Child Care Credit Worksheet (For use with Form IT-540B-2D)

Your Name	Social Security Number

Your Federal Adjusted Gross Income must be \$25,000 or less and your child care expenses must have been incurred in Louisiana in order to complete this form.

1. Care Provider Information Schedule – Complete columns A through E for each person or organization that provided the care to your child. You may use Federal Form W-10, supplied by your provider, to obtain the information. If your care provider does not provide a Federal Form W-10, complete those parts of the Care Provider Information Schedule for which you have the information. If your child attended a child care facility that participated in the Quality Start program, you must enter the facility license number from R-10614 in column D. You must follow the same rules of "Due Diligence" as the IRS requires if you do not have all of the care provider information. See the IRS 2018 Publication 503 for information on "Due Diligence." If additional lines are required for Lines 1 or 2, attach a schedule. Falsification of any information provided on this form constitutes fraud and can result in criminal penalties. The Child Care Credit may only be taken for child care expenses incurred in Louisiana during the time a person was a Louisiana resident.

Α	В	С	D	E
Care provider's name	Address (number, street, apartment number, city, state, and ZIP)	Identifying number (SSN or EIN)	Facility license number	Amount paid (See instructions.)
				.00
				.00
				.00
				.00
				.00

For each child under age 13, enter their name in column F, their Social Security Number in column G, and the amount of Qualified Expenses you incurred and paid in 2018 in column H.

			9		• • • • • • • • • • • • • • • • • • • •	
	Qualifying pe First	erson's name Last	Qualifying person Social Security No		Qualified expensincurred and paid in the person listed in	n 2018 for
						.00
						.00
						.00
						.00
						.00
3		ne 2. Do not enter more than \$3,000 fo Enter this amount here and on Form IT-	, , , ,	3		.00
4	Enter your earned income. See th	ne definitions on page 12.		4		.00
5		r spouse's earned income (If your spou 3.) All other filing statuses, enter the amo		5		.00
6	Enter the smallest of Lines 3, 4, c	or 5. Also, enter this amount on Form IT-	540B-2D, Line 15B.	6		.00
7	Enter your Federal Adjusted Gros Resident Worksheet, Federal colu	s Income from Form IT-540B-2D, Line 7 umn, Line 12 if filed.	, or Nonresident Part-year	7		.00
	Enter on Line 8 the decimal amount shown below that applies to the amount on Line 7.					
	If Line 7 is: over	but not over	decimal amount			
8	\$0 \$15,000 \$17,000	\$15,000 \$17,000 \$19,000	.35 .34 .33	8	X	-
	\$19,000 \$21,000 \$23,000	\$21,000 \$23,000 \$25,000	.32 .31 .30			
9	Multiply Line 6 by the decimal amo	. ,		9		.00
10	Multiply Line 9 by 50 percent and	enter this amount on Line 11.		10	X .50	'
11	Enter this amount on Form IT-540	B-2D, Line 15.	_	11		.00



2018 Louisiana Refundable School Readiness Credit Worksheet (For use with Form IT-540B-2D)

Yo	ur Name		Social Security Number		
cre der of E	dit, the taxpayer must have Federal at under age six who attended a cheducation. The qualifying child care	Adjusted Gross Income of S Id care facility that is particip acility must have provided ther, the Quality Star Rating,	e credit for child care expenses as provided 625,000 or less and must have incurred chipating in the Quality Start Rating program as the taxpayer with Form R-10614 which verifiend the rating award date. You must enter the	ild care expenses for a diministered by the Louis ies the facility's name, t	qualified depen- siana Departmen he facility license
Co	mplete this worksheet only if you	claimed a Louisiana Refur	ndable Child Care Credit on Form IT-540E	3-2D, Line 15.	
1.	Enter the amount of 2018 Louisiana the Louisiana Refundable Child Ca		dit found on	1	00
	Using the Quality Star Rating of th applicable percentage for the Scho	ool Readiness Credit from th		shown on Form R-106	14, determine the
		(A) Quality Rating Five Star	(B) Percentages for Star Rating 200% (2.0)		
		Four Star	150% (1.5)		
		Three Star	100% (1.0)		
		Two Star	50% (.50)		
		One Star	0% (.00)		
2.	Enter the number of your qualified	dependents under age six v	who attended a:		
	Five Star Facility	and multiply the nu	mber by 2.0 (i)	·	
	Four Star Facility	and multiply the nu	mber by 1.5 (ii)	·	
	Three Star Facility	and multiply the nu	mber by 1.0 (iii)	·	
	Two Star Facility	and multiply the nu	mber by .50 (iv)	·	
	TWO Star Facility	• •			
3.	•		the decimal	3	·

On Form IT-540B-2D, Line 16, enter in the boxes designated for 5, 4, 3, or 2 the number of your qualified dependents as shown on Line 2 above for the associated star rated facility.