

2022 IT-540B-2D Specifications and Test Scenarios

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Specifications and Test Scenarios for Form IT-540B-2D (2022)

Differences between this document and last year's final version are marked as follows:

Changes

General Requirements

The 2022 Louisiana Nonresident Individual Income Tax Return (IT-540B) is a scannable form processed on highspeed scanners. All substitute returns (IT-540B-2D) MUST incorporate variable data fields in exact placement as specified on Pages 3 through 23 of this document and a 2-D barcode as specified on Pages 24 through 36 of this document. All 4 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 4 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 the taxpayer(s) on the substitute form must be original.

Software Developer Identification Number: Each software developer who develops a substitute of Form IT-540B, must have a four-digit software developer's identification number approved by the Louisiana Department of Revenue. This number remains the same each 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 user 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, scan line, and document identification numbers is 12-point Courier (10 characters per inch). It is requested that this font be set as the default.

Printed Variable Data: The printed variable data fields must be positioned exactly as specified on Pages 4 through 23 of this document and meet the following criteria:

- 12-point Courier font (10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points.
- 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 of the return and schedules should not be left blank. Use "0" (zero) as the default. This does not apply to the worksheets.
- Negative amounts are **not** allowed.

Document Identification Numbers: A document identification number has been assigned to each page of the return and each accompanying schedule and worksheet. The numbers must be printed in a **bold 12-point Courier font** and positioned on Line 63 in Positions 76-80 of each page. The following are the numbers assigned to Form IT-540B-2D:

2022 Return / Schedule / Worksheet	Doc ID No.
IT-540B-2D Return, Page 1	62381
IT-540B-2D Return, Page 2	62382
IT-540B-2D Return, Page 3	62383
IT-540B-2D Return, Page 4	62384
IT-540B-2D Nonresident and Part-Year Resident (NPR) Workshee	
IT-540B-2D Schedule C-NR	62385
IT-540B-2D Schedule D-NR	62386
IT-540B-2D Schedule F-NR	62387
IT-540B-2D Schedules H-NR and I-NR	
IT-540B-2D Schedule J-NR (Page 1)	62389
IT-540B-2D Schedule J-NR (Page 2)	62390
IT-540B-2D School Expense Deduction Worksheet	62376
IT-540B-2D Refundable Child Care Credit Worksheet	62377
IT-540B-2D Refundable School Readiness Credit Worksheet	62378

Registration Marks: Registration marks are placed in various positions throughout the form and must be positioned exactly as specified on Pages 4, 6, 9, 12, 14, 16, 18, 20, 21, and 23 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.



NOTE: Anchors are no longer being utilized on Form IT-540B-2D.

Barcodes: A "three of nine" type barcode measuring 1/2" in height must be printed on all pages of the return, schedules, and worksheets. 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:

2022 Return / Schedule / Worksheet	Doc ID No.
IT-540B-2D Return, Page 1	62381
IT-540B-2D Return, Page 2	
IT-540B-2D Return, Page 3	
IT-540B-2D Return, Page 4	
IT-540B-2D Nonresident and Part-Year Resident (NPR) Workshe	et 62369
IT-540B-2D Schedule C-NR	62385
IT-540B-2D Schedule D-NR	62386
IT-540B-2D Schedule F-NR	62387
IT-540B-2D Schedules H-NR and I-NR	62388
IT-540B-2D Schedule J-NR (Page 1)	62389
IT-540B-2D Schedule J-NR (Page 2)	62390
IT-540B-2D School Expense Deduction Worksheet	62376
IT-540B-2D Refundable Child Care Credit Worksheet	62377
IT-540B-2D Refundable School Readiness Credit Worksheet	62378

Exact Placement Specifications – IT-540B-2D Worksheets

There are only 4 worksheet pages that should be attached to Form IT-540B-2D (when applicable):

2022 Nonresident and Part-Year Resident (NPR) Worksheet

2022 Louisiana School Expense Deduction Worksheet

2022 Louisiana Refundable Child Care Credit Worksheet

2022 Louisiana Refundable School Readiness Credit Worksheet

If any portion of any of the above listed worksheet pages is utilized, then that page should be submitted with the return. Please note there are other worksheets contained in the instructions for completing Form IT-540B; however, those worksheets are only for aiding in the accurate completion of the form and should not be submitted. The following specifications apply to all 4 worksheet pages listed above:

Registration Marks: All registration marks have been removed from the worksheets.

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 must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80. The following numbers must be use on the worksheets:

Worksheet	Doc ID No.
IT-540B-2D Nonresident and Part-Year Resident (NPR) Workshee	t 62369
IT-540B-2D School Expense Deduction Worksheet	
IT-540B-2D Refundable Child Care Credit Worksheet	62377
IT-540B-2D Refundable School Readiness Credit Worksheet	62378
IT-540B-2D Nonrefundable Child Care Credit Worksheet	62379
IT-540B-2D Nonrefundable School Readiness Credit Worksheet	62380

Printed Variable Data Fields: Exact placement of the printed variable data fields is not required on the worksheets.

Exact Placement Specifications – IT-540B-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 20 in Position 6

1 positioned on Line 20 in Position 80 1 positioned on Line 34 in Position 25 1 positioned on Line 57 in Position 6 1 positioned on Line 58 in Position 49 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 (62381) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

			Р	rinted Variable Data Fields – IT-540B-2D Retur	n (Page 1)
_			Field		
Exact P	lacement on Grid	Field Type	Length	Field Name	Comments
Line 4	Position(s) 77-80	Numeric	4	Software Developer ID	Software Developer Identification Number (4-digit number) preapproved by LDR
Line 8	Position(s) 72-80	Numeric	9	Primary Social Security Number	The social security numbers <u>must</u> appear in the same order as on the federal return. No punctuation allowed. The spouse's social
Line 10	Position(s) 72-80	Numeric	9	Secondary Social Security Number	security number <u>must</u> be provided if the filing status is married filing joint. If not, leave blank.
Line 8	Position(s) 15-57	Alphanumeric	43	Primary Taxpayer's Name (First MI Last Suffix)	Include the middle initial and suffix if applicable.
Line 10	Position(s) 15-57	Alphanumeric	43	Secondary Taxpayer's Name (First MI Last Suffix)	Include the middle initial and suffix if applicable. Provide only if the return is a joint return. Otherwise, leave blank.
Line 12	Position(s) 15-49	Alphanumeric	31	Taxpayer's Mailing Address	This is a required field. Use "GENERAL DELIVERY" as the default.
Line 12	Position(s) 15-49	Alphanumeric	6	Taxpayer's Mailing Address	Unit Type – Use Postal Abbreviation
Line 12	Position(s) 15-49	Alphanumeric	6	Taxpayer's Mailing Address	Number
Line 14	Position(s) 15-39	Alphanumeric	25	Taxpayer's Mailing City	City (mailing address)
Line 14	Position(s) 41-42	Alpha	2	Taxpayer's Mailing State	State (mailing address)
Line 14	Position(s) 44-53	Numeric	10	Taxpayer's Mailing ZIP Code	ZIP Code (mailing address) – A hyphen (-) is allowed for a ZIP+4 Code. Example: 70802-5428
Line 14	Position(s) 62-79	Numeric	10	Telephone Number	Telephone Number
Line 16	Position(s) 15-57	Numeric	43	Foreign Nation	If not United States (do not abbreviate)

			Printed	Variable Data Fields - IT-540B-2D Return (Pa	age 1) – continued
			Field		_
	lacement on Grid	Field Type	Length	Field Name	Comments
Line 6	Position(s) 12	Alpha	1	Name Change Indicator	
Line 8	Position(s) 12	Alpha	1	Decedent Filing Indicator	
Line 10	Position(s) 12	Alpha	1	Spouse Decedent Indicator	
Line 12	Position(s) 12	Alpha	1	Address Change Indicator	
Line 14	Position(s) 12	Alpha	1	Amended Return Indicator	Print an "X" (uppercase) in the specified position in order to
Line 16	Position(s) 12	Alpha	1	NOL Carryback Indicator	denote the indicator. Do not print a box, only the "X" if applicable.
Line 18	Position(s) 18	Alpha	1	MSRA (Military Spouses Residency Relief Act)	denote the indicator. Do not print a box, only the X-ri applicable.
				Indicator	
Line 18	Position(s) 29	Alpha	1	Nonresident Return	
Line 20	Position(s) 18	<mark>Alpha</mark>	1	Nonresident Professional Athlete	
Line 20	Position(s) 29	Alpha	1	Part- Year Resident Return	
Line 20	Position(s) 37-44	Numeric	8	Taxpayer's Date of Birth	Compet movet he manual discuss. No proportion allowed
Line 20	Position(s) 57-64	Numeric	8	Spouse's Date of Birth	Format must be mmddyyyy. No punctuation allowed.
Line 27	Position(s) 10	Numeric	1	Filing Status	Mark the appropriate number for the filing status: 1 = Single 2 = Married filing jointly 3 = Married filing separately 4 = Head of household 5 = Qualifying widow(er)
Line 24	Position(s) 44	Alpha	1	Self Exemption	Hardcode an "X" (uppercase) in the specified position. This exemption must be claimed.
Line 24	Position(s) 52	Alpha	1	Self Exemption – 65 or over	
Line 24	Position(s) 59	Alpha	1	Self Exemption – Blind	Drint on "Y" (unpersons) in the enceified position in and a to
Line 26	Position(s) 44	Alpha	1	Spouse Exemption	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) 52	Alpha	1	Spouse Exemption – 65 or over	denote the indicator. Do not print a box, only the X-ii applicable.
Line 26	Position(s) 59	Alpha	1	Spouse Exemption – Blind	7
Line 25	Position(s) 79	Numeric	1	Total of 6A & 6B	Number of exemptions marked on Lines 6A and 6B
Line 33	Position(s) 78-79	Numeric	2	Dependents	Line 6C, total number of dependents (right-justified)
Line 52	Position(s) 78-79	Numeric	2	Total Exemptions	Line 6D, total exemptions claimed (right-justified)

NOTE: There are additional printed variable data fields (qualifying person for head of household and dependent information) on Page 1 of the return that are not listed above. Although those fields do not need to meet any particular specifications (which is the reason they are not listed), they do need to be completed when applicable. Also, please note that the social security number(s) of the dependent(s) listed in 6C can be printed in full (123-45-6789) or with only the last 4 digits displayed (xxx-xx-6789).

Exact Placement Specifications – IT-540B-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 (4): 1 positioned on Line 4 in Position 6.

1 positioned on Line 6 in Position 63. 1 positioned on Line 32 in Position 54. 1 positioned on Line 58 in Position 54. 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 (62382) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

	Printed Variable Data Fields – IT-540B-2D Return (Page 2)					
			Field			
Exact Pl	acement on Grid	Field Type	Length	Field Name	Comments	
Line 5	Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.	
Line 8	Position(s) 36-40	Numeric	5	W-2 Wages	If not required to file a federal return, enter the wages from the	
					W-2(s). If not applicable, leave blank.	
Line 8	Position(s) 79	Alpha	1	Federal Return Not Required Indicator	Print an "X" (uppercase) in the specified position in order to	
					denote the indicator. Do not print a box, only the "X" if applicable.	
					Note: If a federal return is not required, print "0" (zero) on Lines	
					7-14.	
Line 10	Position(s) 69-77	Numeric	9	Return Line 7	Federal Adjusted Gross Income (AGI) – NPR worksheet, Federal	
					column, Line 12.	
Line 12	Position(s) 69-77	Numeric	9	Return Line 8	Louisiana Adjusted Gross Income – NPR worksheet, Louisiana	
					column, Line 20.	

Line 14	Position(s) 73-77	Numeric	5	Return Line 9	Ratio of Louisiana AGI to Federal AGI – Divide Line 8 by Line 7. Carry out to 4 decimal places, rounding down . Since no punctuation is allowed, enter the result right-
					justified and without the decimal point. Example: If Line 7 = 75000 and
					Line 8 = 35555 , then Line 9 = 4740

				Variable Data Fields – IT-540B-2D Return (Pag	e 2) – continued	
Evact P	lacement on Grid	Field Type	Field Length	Field Name	Comments	
Line 18	Position(s) 71-77	Numeric	7	Return Line 10A	Federal Itemized Deductions	
Line 20	Position(s) 71-77	Numeric	7	Return Line 10B	Fodoral Itamizad Doductions for	
					Medical and Dental Expenses If there are no	
Line 22	Position(s) 73-77	Numeric	5	Return Line 10C	Federal Standard Deduction Geductions, pri 3 fields.	nt o in all
Line 24	Position(s) 71-77	Numeric	7	Return Line 10D	Excess Federal Itemized Deductions	
					- Subtract Line 10C from Line 10B .	
Line 26	Position(s) 70-77	Numeric	8	Return Line 10E	Allowable Deductions – Multiply Line 10D by the ratio of	on Line 9.
Line 28	Position(s) 69-77	Numeric	9	Return Line 11	Louisiana Net Income – Subtract Line 10E from Line 8	. If result is
					less than zero, enter zero "0".	
Line 30	Position(s) 70-77	Numeric	8	Return Line 12	Louisiana Income Tax – Tax Computation worksheet	
Line 32	Position(s) 70-77	Numeric	8	Return Line 13	Nonrefundable Priority 1 Credits - Schedule C-NR, Line	
Line 34	Position(s) 70-77	Numeric	8	Return Line 14	Tax Liability After Nonrefundable Priority 1 Credits – S	
					13 from Line 12. If the result is less than zero, enter ze	ero "0".
Line 38	Position(s) 74-77	Numeric	4	Return Line 15	Louisiana Refundable Child Care Credit	
Line 40	Position(s) 74-77	Numeric	4	Return Line 15A	Refundable Child Care Credit worksheet, Line 3	
Line 42	Position(s) 74-77	Numeric	4	Return Line 15B	Refundable Child Care Credit worksheet, Line 6	
Line 46	Position(s) 73-77	Numeric	5	Return Line16	Louisiana Refundable School Readiness Credit – Refu	ındable
					School Readiness Credit worksheet, Line 4	
Line 46	Position(s) 26	Alpha-	1	Number of Qualified Dependents—5-Star	Number of dependents who attended a 5-star facility	
1: 10	D ::: () 00	Numeric		(Return Line 16)	N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
Line 46	Position(s) 33	Alpha-	1	Number of Qualified Dependents—4-Star	Number of dependents who attended a 4-star facility	
Line 46	Position(s) 40	Numeric Alpha-	1	(Return Line 16) Number of Qualified Dependents—3-Star	Number of dependents who attended a 3-star facility	Use "0"
LINE 40	F05111011(5) 40	Numeric	'	(Return Line 16)	Number of dependents who attended a 3-star facility	(zero) as
Line 46	Position(s) 47	Alpha-	1	Number of Qualified Dependents—2-Star	Number of dependents who attended a 2-star facility	the
		Numeric		(Return Line 16)	The state of the s	default.
				,		1
Line 48	Position(s) 71-77	Numeric	7	Return Line 17	Other Refundable Priority 2 Credits	•
Line 50	Position(s) 71-77	Numeric	7	Return Line 18	Total Refundable Priority 2 Tax Credits – Add Lines 15 through 17. Do not include Lines 15A, 15B,	and 16

Line 54	Position(s) 70-77	Numeric	8	Return Line 19	Tax Liability after Refundable Priority 2 Credits

Line 56	Position(s) 70-77	Numeric	8	Return Line 20	Overpayment after Refundable Priority 2 Credits:
Line 61	Position(s) 38-41	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha, uppercase only. If last name is less than four letters, leave the last position(s) blank. Punctuation and hyphens should be omitted. Name code examples: John Brown = BROW John Bow = BOW

Exact Placement Specifications – IT-540B-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 (2): 1 positioned on Line 4 in Position 6.

1 positioned on Line 6 in Position 63. 1 positioned on Line 29 in Position 54. 1 positioned on Line 58 in Position 38 1 positioned on Line 59 in Position 6. 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 (62383) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

	Printed Variable Data Fields - IT-540B-2D Return (Page 3)						
Evect D	lacement on Crid	Field Tyme	Field	Field Name	Comments		
	lacement on Grid	Field Type	Length	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Comments		
Line 5	Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.		
Line 7	Position(s) 70-77	Numeric	8	Return Line 21	Nonrefundable Priority 3 Credits – Schedule J-NR, Line 16		
Line 10	Position(s) 70-77	Numeric	8	Return Line 22	Adjusted Louisiana Income Tax – Subtract Line 21 from Line 19 .		
					If the result is less than zero, enter zero "0".		
Line 12	Position(s) 41	Alpha-Numeric	1	Consumer Use Tax Indicator—No use tax due.	One or the other of these indicators must be marked. Print an		
					"X" (uppercase) in the specified position in order to denote the		
Line 14	Position(s) 41	Alpha-Numeric	1	Consumer Use Tax Indicator—Amount from the	appropriate indicator. Do not print a box, only the "X" if		
				Consumer Use Tax Worksheet.	applicable.		
Line 12	Position(s) 70-77	Numeric	8	Return Line 23	Consumer Use Tax		
Line 16	Position(s) 70-77	Numeric	8	Return Line 24	Total Income Tax and Consumer Use Tax – Add Lines 22 and 23.		
Line 19	Position(s) 71-77	Numeric	7	Return Line 25	Overpayment after Refundable Priority 2 Credits – Amount from		
					Line 20		
Line 21	Position(s) 71-77	Numeric	7	Return Line 26	Refundable Priority 4 Credits – Schedule I-NR, Line 6		
Line 23	Position(s) 71-77	Numeric	7	Return Line 27	Amount of Louisiana Tax Withheld for 2022		
Line 25	Position(s) 71-77	Numeric	7	Return Line 28	Amount of Credit Carried Forward from 2021		

Line 27	Position(s) 71-77	Numeric	7	Return Line 29	Paid by Composite Partnership Filing
				Variable Data Fields - IT-540B-2D Return (Pag	e 3) – continued
Exact P	lacement on Grid	Field Type	Field Length	Field Name	Comments
Line 29	Position(s) 71-77	Numeric	7	Return Line 30	Amount of Estimated Payments for 2022
Line 31	Position(s) 71-77	Numeric	7	Return Line 31	Amount Paid with Extension Request
Line 34	Position(s) 71-77	Numeric	7	Return Line 32	Total Refundable Tax Credits and Payments – Add Lines 25 – 31.
Line 36	Position(s) 71-77	Numeric	7	Return Line 33	Overpayment: -If Line 32 is greater than Line 24, subtract Line 24 from Line 32. Your overpayment may be reduced by the Underpayment of Estimated Tax Penalty.
Line 38	Position(s) 57	Alpha	1	Farmer Indicator (Return Line 34)	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 38	Position(s) 71-77	Numeric	7	Return Line 34	Underpayment Penalty for Estimated Tax – See Form R-210NR.
Line 40	Position(s) 71-77	Numeric	7	Return Line 35	Adjusted Overpayment: - If Line 33 is greater than Line 34, subtract Line 34 from Line 33 and enter the balance on Line 35. If Line 34 is greater than Line 33, enter zero "0", subtract Line 33 from Line 34 and enter the balance on Line 40.
Line 42	Position(s) 71-77	Numeric	7	Return Line 36	Total Donations – Schedule D-NR- Total Line 20
Line 45	Position(s) 71-77	Numeric	7	Return Line 37	Subtotal – Subtract Line 36 from Line 35 .
Line 47	Position(s) 71-77	Numeric	7	Return Line 38	Amount Credited to 2023
Line 50	Position(s) 71-77	Numeric	7	Return Line 39	Amount to be Refunded – Subtract Line 38 from Line 37.
Line 51	Position(s) 56	Numeric	1	Refund Option (Return Line 39)	Mark the appropriate number for the refund option that the taxpayer selects: 2 = Paper check 3 = Direct deposit If the amount on Line 39 = 0, leave this field blank.
Line 55	Position(s) 22	Alpha	1	Direct Deposit—Checking Account Type	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. If not applicable, leave blank.
Line 55	Position(s) 31	Alpha	1	Direct Deposit—Savings Account Type	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. If not applicable, leave blank.
Line 55	Position(s) 65	Alpha	1	Direct Deposit—Refund Forwarded Outside U.S.— Yes	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. If not applicable, leave blank.
Line 55	Position(s) 72	Alpha	1	Direct Deposit—Refund Forwarded Outside U.S. — No	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. If not applicable, leave blank.
Line 57	Position(s) 17-25	Numeric	9	Direct Deposit—Routing Number	Direct Deposit—Routing Number (9 digits) If not applicable, leave blank.

Line 57	Position(s) 46-62	Alphanumeric	17	Direct Deposit—Account Number	Direct Deposit—Account Number (up to 17 characters) If not applicable, leave blank.
			Printed	Variable Data Fields - IT-540B-2D Return (Page	e 3) – continued
			Field		
Exact P	lacement on Grid	Field Type	Length	Field Name	Comments
Line 61	Position(s) 38-41	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha, uppercase only. If last name is less than four letters, leave the last position(s) blank. Punctuation and hyphens should be

NOTE: There is an additional printed variable data field (on Return Line 30) on Page 3 of the return that is not listed above. Although that field does not need to meet any particular specifications (which is the reason it is not listed), it MUST be completed when applicable.

Exact Placement Specifications – IT-540B-2D Return (Page 4)

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

Reference Points (3): 1 positioned on Line 4 in Position 6.

1 positioned on Line 16 in Position 50. 1 positioned on Line 55 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 (62384) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

	Printed Variable Data Fields – IT-540B-2D Return (Page 4)							
			Field					
Exact P	lacement on Grid	Field Type	Length	Field Name	Comments			
Line 5	Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.			
Line 8	Position(s) 71-77	Numeric	7	Return Line 40	Amount Owed:			
					- If Line 32 < Line 24, subtract Line 32 from Line 24			
Line 10	Position(s) 71-77	Numeric	7	Return Line 41	Additional Donation to Military Family Assistance Fund			
Line 12	Position(s) 71-77	Numeric	7	Return Line 42	Additional Donation to Coastal Protection and Restoration Fund			
Line 14	Position(s) 71-77	Numeric	7	Return Line 43	Additional Donation to Louisiana Food Bank Association			
Line 16	Position(s) 71-77	Numeric	7	Return Line 44	Interest – Interest Calculation worksheet, Line 5			
Line 18	Position(s) 71-77	Numeric	7	Return Line 45	Delinquent Filing Penalty – Delinquent Filing Penalty worksheet, Line 3			
Line 20	Position(s) 71-77	Numeric	7	Return Line 46	Delinquent Payment Penalty – Delinquent Payment Penalty worksheet, Line 7			
Line 22	Position(s) 58	Alpha	1	Farmer Indicator (Return Line 47)	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) 71-77	Numeric	7	Return Line 47	Underpayment Penalty for Tax Due – See Form R-210NR.
				Variable Data Fields - IT-540B-2D Return (Pa	ge 4) – continued
Exact P	lacement on Grid	Field Type	Field Length	Field Name	Comments
Line 24	Position(s) 71-77	Numeric	7	Return Line 48	Balance Due Louisiana – Add Lines 40 – 47.
Line 36	Position(s) 27-29	Numeric	3	Status of Return	Status of Return:
					Position 27: Mark "0" if Line 38 = 0.
					Mark "1" if Line 38 > 0. (Credit to 2023) Position 28: Mark "0" if Line 3 9 = 0.
					Mark "1" if Line 39 > 0. (Refund)
					Position 29: Mark "0" if Line 48 = 0.
					Mark "1" if Line 48 > 0. (Balance Due)
					Examples: If Line 40 is \$200 and Lines 39 and 49 are zero, mark
					"010". If Line 39 is \$100, Line 40 is \$200, and Line 49 is
					zero, mark "110".
Line 39	Position(s) 26-29	Numeric	4	Contribution/Donation Status	Contribution and Donation Status (right-justified):
					Position 26: Mark "0" if Line 36 = 0.
					Mark "1" if Line 36 > 0.
					Position 27: Mark "0" if Line 41 = 0.
					Mark "1" if Line 41 > 0. Position 28: Mark "0" if Line 42 = 0.
					Mark "1" if Line 42 = 0.
					Position 29: Mark "0" if Line 43 = 0.
					Mark "1" if Line 43 > 0.
					Examples: If Lines 36, 42, and 43 are zero and Line 41 is \$100,
					mark "0100".
					If Line 36 is \$100, Line 43 is \$200, and Lines 41
Line 56	Position(s) 69-78	Alphanumeric	10	Preparer's FEIN/ PTIN/SSN	and 42 are zero, mark "1001". Preparer's FEIN, PTIN, or SSN. If not applicable, leave blank.
Line 56	Position(s) 69-78 Position(s) 15-18	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha,
	1 3311011(3) 13-10	, upila		Traine Godo	uppercase only. If last name is less than four letters, leave the
					last position(s) blank. Punctuation and hyphens should be
					omitted.
					Name code examples: John Brown = BROW
					John Bow = BOW_
Line 59	Position(s) 33-57	Alphanumeric	25	LDR's Mailing Address	If Line 48 = 0, print: PO BOX 3440
Line 60	Position(s) 33-57	Alphanumeric	25	LDR's Mailing City State ZIP	If Line 48 > 0, print: PO BOX 3550 If Line 48 = 0, print: BATON ROUGE LA 70821-3440
Line 60	rusilion(s) 33-5/	Aiphanumeric	∠5	LUK S Mailing City State ZIP	If Line 48 = 0, print: BATON ROUGE LA 70821-3440 If Line 48 > 0, print: BATON ROUGE LA 70821-3550
		1	1		Line 70 / 0, pink. DATON NOOGE LA 10021-0000

Exact Placement Specifications – IT-540B-2D Schedule C-NR

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 4 in Position 6.

1 positioned on Line 6 in Position 63. 1 positioned on Line 18 in Position 58. 1 positioned on Line 34 in Position 42. 1 positioned on Line 59 in Position 6 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 (62385) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

Printed Variable Data Fields: The printed variable data fields must meet the general criteria listed on Page 1 of this document and the specifications below:

	Printed Variable Data Fields – IT-540B-2D Schedule C-NR							
Fyeet	Discoment on Crist	Field Tyme	Field	Field Name	Comments			
	Placement on Grid	Field Type	Length	Field Name	Comments			
Line 5	Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.			
Line 10	Position(s) 55-57	Numeric	3	Nonrefundable Priority 1 Credit Code (Schedule	Enter 3-digit credit code. If not applicable, leave blank.			
	. ,			C-NR, Line 1)				
Line 10	Position(s) 71-77	Numeric	7	Schedule C-NR, Line 1	Enter amount of credit allowed. See instructions.			
Line 12	Position(s) 55-57	Numeric	3	Nonrefundable Priority 1 Credit Code (Schedule	Enter 3-digit credit code. If not applicable, leave blank.			
	(-)			C-NR, Line 2)				
Line 12	Position(s) 71-77	Numeric	7	Schedule C-NR, Line 2	Enter amount of credit allowed. See instructions.			
Line 14	Position(s) 55-57	Numeric	3	Nonrefundable Priority 1 Credit Code (Schedule	Enter 3-digit credit code. If not applicable, leave blank.			
				C-NR, Line 3)				
Line 14	Position(s) 71-77	Numeric	7	Schedule C-NR, Line 3	Enter amount of credit allowed. See instructions.			
	、 /			,				
Line 16	Position(s) 55-57	Numeric	3	(Nonrefundable Priority 1 Credit Code (Schedule	Enter 3-digit credit code. If not applicable, leave blank.			
	(3) 00 01			G-NR, Line 4)	,			
Line 16	Position(s) 71-77	Numeric	7	Schedule C-NR, Line 4	Enter amount of credit allowed. See instructions.			
Line 18	Position(s) 71-77	Numeric	7	Schedule C-NR, Line 5	Total Nonrefundable Tax Priority 1 Credits – Add Lines 1-4			

NOTE: There are additional printed variable data fields on Schedule C-NR that are not listed above. Although those fields do not need to meet any particular specifications (which is the reason they are not listed), they MUST be completed when applicable.

Exact Placement Specifications – IT-540B-2D Schedule D-NR

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

Reference Points (4): 1 positioned on Line 4 in Position 6.

1 positioned on Line 7 in Position 76. 1 positioned on Line 14 in Position 47. 1 positioned on Line 53 in Position 45. 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 (62386) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

	Printed Variable Data Fields – IT-540B-2D Schedule D-NR						
			Field				
Exact P	lacement on Grid	Field Type	Length	Field Name	Comments		
Line 5	Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.		
Line 14	Position(s) 71-77	Numeric	7	Schedule D-NR, Line 1	Adjusted Overpayment – Return Line 35		
Line 18	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 2	Military Family Assistance Fund		
Line 20	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 3	Coastal Protection and Restoration Fund		
Line 22	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 4	START Program		
Line 24	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 5	Wildlife Habitat and Natural Heritage Trust Fund		
Line 26	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 6	Louisiana Cancer Trust Fund		
Line 28	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 7	Louisiana Pet Overpopulation Advisory Council		
Line 30	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 8	Louisiana Food Bank Association		
Line 32	Position(s) 35-39	Numeric	5	Schedule D-NR, Line 9	Make-A-Wish Foundation of the Texas Gulf Coast and Louisiana		
Line 34	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 10	Louisiana Association of United Ways / LA 2-1-1		
Line 36	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 11	American Red Cross		
Line 18	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 12	Louisiana National guard Honor Guard for Military Funerals		
Line 20	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 13	Louisiana State Troopers Charities, Inc.		
Line 22	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 14	Louisiana Horse Rescue		
Line 24	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 15	Louisiana Coalition Against Domestic Violence		
Line 26	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 16	Dreams Come True, Inc		
Line 28	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 17	Sexual Trauma Awareness and Response (STAR)		
Line 30	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 18	Louisiana State University Agricultural Center (4-H)		
Line 32	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 19	Maddie's Footprints		
Line 34	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 20	University of New Orleans		
Line 36	Position(s) 73-77	Numeric	5	Schedule D-NR, Line 21	Southeastern Louisiana University Foundation		

Line 40	Position(s) 71-77	Numeric	7	Schedule D-NR, Line 22	Total Donations – Add Lines 2 – 21. This amount cannot be
					greater than Line 1.

Exact Placement Specifications – IT-540B-2D Schedule F-NR

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 4 in Position 6.

1 positioned on Line 7 in Position 51. 1 positioned on Line 37 in Position 49. 1 positioned on Line 57 in Position 10. 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 (62387) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

Printed Variable Data Fields – IT-540B-2D Schedule F-NR							
Exact Placement	t on Grid	Field Type	Field Length	Field Name	Comments		
Line 5 Positio	n(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.		
Line 12 Positio	n(s) 55-57	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 1)	Enter 3-character credit code. If not applicable, leave blank.		
Line 12 Positio	n(s) 71-77	Numeric	7	Schedule F-NR, Line 1	Enter amount of credit allowed. See instructions.		
Line 14 Positio	n(s) 55-57	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 2)	Enter 3-character credit code. If not applicable, leave blank.		
Line 14 Positio	n(s) 71-77	Numeric	7	Schedule F-NR, Line 2	Enter amount of credit allowed. See instructions.		
Line 16 Positio	n(s) 55-57	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 3)	Enter 3-character credit code. If not applicable, leave blank.		
Line 16 Positio	n(s) 71-77	Numeric	7	Schedule F-NR, Line 3	Enter amount of credit allowed. See instructions.		
Line 18 Positio	n(s) 55-57	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 4)	Enter 3-character credit code. If not applicable, leave blank.		
Line 18 Positio	n(s) 71-77	Numeric	7	Schedule F-NR, Line 4	Enter amount of credit allowed. See instructions.		
Line 20 Positio	n(s) 55-57	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 5)	Enter 3-character credit code. If not applicable, leave blank.		

	Printed Variable Data Fields - IT-540B-2D Schedule F-NR - continued							
			Field					
Exact PI	lacement on Grid	Field Type	Length	Field Name	Comments			
Line 20	Position(s) 71-77	Numeric	7	Schedule F-NR, Line 5	Enter amount of credit allowed. See instructions.			
Line 22	Position(s) 54-62	Numeric	9	Schedule F-NR, Line 5A	School Readiness Child Care Directors- Facility License Number			
Line 29	Position(s) 55-57	Alphanumeric	3	Transferable, Refundable Priority 2 Credit Code	Enter 3-character credit code. If not applicable, leave blank.			
				(Schedule F-NR, Line 6)	Note: Currently, the only valid code is "62F" and is			
					hardcoded in this field.			
Line 29	Position(s) 71-77	Numeric	7	Schedule F-NR, Line 6	Enter amount of credit allowed. See instructions.			
Line 31	Position(s) 10-35	Alphanumeric	26	Schedule F-NR, Line 6A	Enter the LDR State Certification Number from Form R-6135.			
Line 33	Position(s) 55-57	Alphanumeric	3	Transferable, Refundable Priority 2 Credit Code	Enter 3-character credit code. If not applicable, leave blank.			
				(Schedule F-NR, Line 7)	Note: Currently, the only valid code is "62F" and is			
					hardcoded in this field.			
Line 33	Position(s) 71-77	Numeric	7	Schedule F-NR, Line 7	Enter amount of credit allowed. See instructions.			
Line 35	Position(s) 10-35	Alphanumeric	26	Schedule F-NR, Line 7A	Enter the LDR State Certification Number from Form R-6135.			
Line 37	Position(s) 55-57	Alphanumeric	3	Transferable, Refundable Priority 2 Credit Code	Enter 3-character credit code. If not applicable, leave blank.			
				(Schedule F-NR, Line 8)	Note: Currently, the only valid code is "62F" and is			
					hardcoded in this field.			
Line 37	Position(s) 71-77	Numeric	7	Schedule F-NR, Line 8	Enter amount of credit allowed. See instructions.			
Line 39	Position(s) 10-35	Alphanumeric	26	Schedule F-NR, Line 8A	Enter the LDR State Certification Number from Form R-6135.			
Line 41	Position(s) 71-77	Numeric	7	Schedule F-NR, Line 9	Total Refundable Priority 2 Credits – Add Lines 1-8.			

NOTE: There are additional printed variable data fields on Schedule F-NR that are not listed above. Although those fields do not need to meet any particular specifications (which is the reason they are not listed), they MUST be completed when applicable.

Exact Placement Specifications – IT-540B-2D Schedule I-NR

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 4 in Position 6.

1 positioned on Line 7 in Position 76. 1 positioned on Line 18 in Position 59. 1 positioned on Line 34 in Position 59. 1 positioned on Line 59 in Position 6. 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 (62388) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

Printed Variable Data Fields: The printed variable data fields must meet the general criteria listed on Page 1 of this document and the specifications below:

Printed Variable Data Fields – IT-540B-2D I-NR								
	Field							
Exact Placement on G	Field Type	Length	Field Name	Comments				
Line 5 Position(s) 72-	80 Numeric	9	Primary Social Security Number	No punctuation allowed.				
Line 11 Position(s) 55-	57 Alphanumeric	3	Refundable Credit Code (Schedule I-NR, Line 1)	Enter 3-character credit code. If not applicable, leave blank.				
Line 11 Position(s) 71-	77 Numeric	7	Schedule I-NR, Line 1	Enter amount of credit allowed. See Form R-10610.				
Line 13 Position(s) 55-	57 Alphanumeric	3	Refundable Credit Code (Schedule I-NR, Line 2)	Enter 3-character credit code. If not applicable, leave blank.				
Line 13 Position(s) 71-	77 Numeric	7	Schedule I-NR, Line 2	Enter amount of credit allowed. See Form R-10610.				
Line 15 Position(s) 55-	57 Alphanumeric	3	Refundable Credit Code (Schedule I-NR, Line 3)	Enter 3-character credit code. If not applicable, leave blank.				
Line 15 Position(s) 71-	77 Numeric	7	Schedule I-NR, Line 3	Enter amount of credit allowed. See Form R-10610.				
Line 17 Position(s) 55-	57 Alphanumeric	3	Refundable Credit Code (Schedule I-NR, Line 4)	Enter 3-character credit code. If not applicable, leave blank.				
Line 17 Position(s) 71-	77 Numeric	7	Schedule I-NR, Line 4	Enter amount of credit allowed. See Form R-10610.				
Line 19 Position(s) 55-	57 Alphanumeric	3	Refundable Credit Code (Schedule I-NR, Line 5)	Enter 3-character credit code. If not applicable, leave blank.				
Line 19 Position(s) 71-	77 Numeric	7	Schedule I-NR, Line 5	Enter amount of credit allowed. See Form R-10610.				
Line 21 Position(s) 71-	77 Numeric	7	Schedule I-NR, Line 6	Total Refundable Priority 4 Credits – Add Lines 1 – 5.				

NOTE: There are additional printed variable data fields on Schedule I-NR that are not listed above. Although those fields do not need to meet any particular specifications (which is the reason they are not listed), they MUST be completed when applicable.

Exact Placement Specifications – IT-540B-2D Schedule J-NR (Page 1)

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 4 in Position6.

1 positioned on Line 7 in Position 58. 1 positioned on Line 23 in Position 63. 1 positioned on Line 41 in Position 58. 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 (62389) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

			Printed Field	Variable Data Fields – IT-540B-2D Schedu	ule J-NR (Page 1)	
Exact	Placement on Grid	Field Type	Length	Field Name	Comments	
Line 5	Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.	
Line 11	Position(s) 74-77	Numeric	4	Schedule J-NR, Line 1	Federal Child Care Credit	
Line 13	Position(s) 74-77	Numeric	4	Schedule J-NR, Line 2	Louisiana Nonrefundable Child Care Credit – See Nonre Child Care Credit worksheet.	fundable
Line 15	Position(s) 74-77	Numeric	4	Schedule J-NR, Line 3	Louisiana Nonrefundable Child Care Credit Carried Forw 2017-2021 – See Nonrefundable Child Care Credit works	
Line 18	Position(s) 74-77	Numeric	4	Schedule J-NR, Line 4	Louisiana Nonrefundable School Readiness Credit – Ser Nonrefundable School Readiness Credit worksheet.	e
Line 19	Position(s) 28	Numeric	1	Number of Qualified Dependents—5-Star (Schedule J-NR, Line 4)	Number of dependents who attended a 5-star facility	
Line 19	Position(s) 35	Numeric	1	Number of Qualified Dependents—4-Star (Schedule J-NR, Line 4)	Number of dependents who attended a 4-star facility	Use "0" (zero)
Line 19	Position(s) 42	Numeric	1	Number of Qualified Dependents—3-Star (Schedule J-NR, Line 4)	Number of dependents who attended a 3-star facility	as the default.
Line 19	Position(s) 49	Numeric	1	Number of Qualified Dependents—2-Star (Schedule J-NR, Line 4)	Number of dependents who attended a 2-star facility	

	Printed Variable Data Fields - IT-540B-2D Schedule J-NR (Page 1) - continued							
Exact	Placement on Grid	Field Type	Field Length	Field Name	Comments			
Line 21	Position(s) 73-77	Numeric	4	Schedule J-NR, Line 5	Louisiana Nonrefundable School Readiness Credit Carried Forward from 2017-2021. – See Nonrefundable School Readiness Credit worksheet.			
Line 28	Position(s) 55-57	Numeric	3	Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 6)	Enter 3-digit credit code. If not applicable, leave blank.			
Line 28	Position(s) 71-77	Numeric	7	Schedule J-NR, Line 6	Enter amount of credit allowed. See instructions.			
Line 30	Position(s) 55-57	Numeric	3	Nonrefundable Priority 3 Credit Code (Schedule G-NR, Line 7)	Enter 3-digit credit code. If not applicable, leave blank.			
Line 30	Position(s) 71-77	Numeric	7	Schedule J-NR, Line 7	Enter amount of credit allowed. See instructions.			
Line 32	Position(s) 55-57	Numeric	3	(Nonrefundable Priority 3 Credit Code Schedule J-NR, Line 8)	Enter 3-digit credit code. If not applicable, leave blank.			
Line 32	Position(s) 71-77	Numeric	7	Schedule J-NR, Line 8	Enter amount of credit allowed. See instructions.			
Line 34	Position(s) 55-57	Numeric	3	Nonrefundable Priority 3 Credit Code (Schedule G-NR, Line 9)	Enter 3-digit credit code. If not applicable, leave blank.			
Line 34	Position(s) 71-77	Numeric	7	Schedule J-NR, Line 9	Enter amount of credit allowed. See instructions.			
Line 36	Position(s) 55-57	Numeric	3	Nonrefundable Priority 3 Credit Code (Schedule G-NR, Line 10)	Enter 3-digit credit code. If not applicable, leave blank.			
Line 36	Position(s) 71-77	Numeric	7	Schedule J-NR, Line 10	Enter amount of credit allowed. See instructions.			
Line 38	Position(s) 55-57	Numeric	3	Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 11)	Enter 3-digit credit code. If not applicable, leave blank.			
Line 38	Position(s) 71-77	Numeric	7	Schedule J-NR, Line 11	Enter amount of credit allowed. See instructions.			

NOTE: There are additional printed variable data fields on Schedule J-NR (Page 1) that are not listed above. Although those fields do not need to meet any particular specifications (which is the reason they are not listed), they MUST be completed when applicable.

Exact Placement Specifications – IT-540-2D Schedule J-NR (Page 2)

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 4 in Position 6.

1 positioned on Line 7 in Position 62. 1 positioned on Line 31 in Position 10. 1 positioned on Line 31 in Position 55. 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 (62390) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

	Printed Variable Data Fields – IT-540B-2D Schedule J-NR					
Evact P	Exact Placement on Grid Field Type Length		Field Length	Field Name	Comments	
Line 5	Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.	
Line 13	Position(s) 53-55	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 12)	Enter 3-character credit code. If not applicable, leave blank.	
Line 13	Position(s) 70-77	Numeric	8	Schedule J-NR, Line 12	Enter amount of credit allowed. See instructions.	
Line 15	Position(s) 10-35	Alphanumeric	26	Schedule J-NR, Line 12A	Enter the LDR State Certification Number(s) from Form R-6135.	
Line 17	Position(s) 53-55	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 13)	Enter 3-character credit code. If not applicable, leave blank.	
Line 17	Position(s) 70-77	Numeric	8	Schedule J-NR, Line 13	Enter amount of credit allowed. See instructions.	
Line 19	Position(s) 10-35	Alphanumeric	26	Schedule J-NR, Line 13A	Enter the LDR State Certification Number(s) from Form R-6135.	
Line 21	Position(s) 53-55	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 14)	Enter 3-character credit code. If not applicable, leave blank.	
Line 21	Position(s) 70-77	Numeric	8	Schedule J-NR, Line 14	Enter amount of credit allowed. See instructions. If not applicable, leave blank.	
Line 23	Position(s) 10-35	Alphanumeric	26	Schedule J-NR, Line 14A	Enter the LDR State Certification Number(s) from Form R-6135.	
Line 25	Position(s) 53-55	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 15)	Enter 3-character credit code. If not applicable, leave blank.	
Line 25	Position(s) 70-77	Numeric	8	Schedule J-NR, Line 15	Enter amount of credit allowed. See instructions. If not applicable, leave blank.	
Line 27	Position(s) 10-35	Alphanumeric	26	Schedule J-NR, Line 15A	Enter the LDR State Certification Number(s) from Form R-6135.	
Line 29	Position(s) 70-77	Numeric	8	Schedule J-NR, Line 16	Total Nonrefundable Priority 3 Credits – Add Line 2 – 15.	

NOTE: There are additional printed variable data fields on Schedule J-NR (Page 2) that are not listed above. Although those fields do not need to meet any particular specifications (which is the reason they are not listed), they MUST be completed when applicable.

2-D Barcode Specifications:

Requirements:

- The 2-D barcode should be placed on Page 4 of the return on Lines 31-39 in Positions 35-80. The barcode must fit within this area of the form. The barcode grid area allowed is a recommendation for placement. The 2D barcode must meet the guidelines at this link https://www.taxadmin.org/2-d-bar-coding-standards-revision-2010v1 and read at 200 dpi.
- 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 62381 for the Louisiana nonresident form (IT-540B-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 25 through 35 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.

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 Resident (IT-540) and Nonresident (IT-540B) Individual Income Tax Forms

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 IT-540B-2D

			Heade	r Information
Field No.	Field Type	Field 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 identif 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 62381 .
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 use
				produce the barcode.
			Governm	ent Specific Data
IT-540	B-2D Return (P	age 1)		
Field		Max. Field		_
No.	Field Type	Length	Field Name	Comments
7	Numeric	4	Software Developer ID	Software Developer Identification Number (4-digit number) assigned by LDR, which may differ from the software developer ID in Field 2 above
8	Numeric	9	Primary Social Security Number	Primary Taxpayer's Social Security Number (no dashes, hyphens, parentheses special characters)
9	Numeric	9	Secondary Social Security Number	Spouse's Social Security Number (no dashes, hyphens, parentheses, or special characters) – This is a required field for filing status of married filing joint . If n applicable, leave blank.
10	Alpha	25	Primary Taxpayer's First Name	Primary taxpayer's first name
11	Alpha	1	Primary Taxpayer's Middle Initial	Primary taxpayer's middle initial
12	Alpha	25	Primary Taxpayer's Last Name	Primary taxpayer's last name
13	Alpha	3	Primary Taxpayer's Name Suffix	Primary taxpayer's name suffix
14	Alpha	25	Secondary Taxpayer's First Name	Spouse's first name
15	Alpha	1	Secondary Taxpayer's Middle Initial	Spouse's middle initial Provide only if the return is a joint return. Otherwis
16	Alpha	25	Secondary Taxpayer's Last Name	Spouse's last name leave blank.
17	Alpha	3	Secondary Taxpayer's Name Suffix	Spouse's name suffix
18	Alpha	31	Taxpayer's Mailing Address	Taxpayer's address – This is a required field. Use "GENERAL DELIVERY" as default.
19	Alphanumeric	6	Taxpayer's Mailing Address	Unit Type- Use Postal Abbreviations
20	Alphanumeric	6	Taxpayer's Mailing Address	Unit Number
21	Alpha	25	Taxpayer's Mailing City	City (mailing address)
22	Alpha	2	Taxpayer's Mailing State	State (mailing address)
23	Numeric	9	Taxpayer's Mailing ZIP Code	ZIP Code (mailing address) – No hyphen.

25	Numeric	10	Daytime Telephone	Taxpayer's daytime area code and telephone number
24	Alphanumeric	43	Foreign Nation	If not United States (do not abbreviate)
26	Numeric	8	Taxable Period	Taxable Period (mmddyyyy) – Example: 12312022
			Government S	Specific Data (continued)
-540	B-2D Return (P	age 1) – c	ontinued	
ield		Max. Field		
No.	Field Type	Length	Field Name	Comments
27	Numeric	5	Form ID Number	Form ID Number 62381
28	Binary	1	Name Change Indicator	Mark "1" if name has changed.
				Mark "0" if not applicable.
29	Binary	1	Decedent Filing Indicator	Mark "1" for decedent taxpayer.
				Mark "0" if not applicable.
30	Binary	1	Spouse Decedent Indicator	Mark "1" for decedent spouse.
				Mark "0" if not applicable.
31	Binary	1	Address Change Indicator	Mark "1" if address has changed.
				Mark "0" if not applicable.
32	Binary	1	Amended Return Indicator	Mark "1" for an amended return.
				Mark "0" if not applicable.
33	Binary	1	NOL Carryback Indicator	Mark "1" for NOL carryback.
				Mark "0" if not applicable.
34	Binary	1	MSRA	Mark "1" for MSRA (Military Spouses Residency Relief Act).
35	Binary	1	Nonresident Return	Mark "0" if not applicable. Mark "1" for Nonresident Return
33	Dillaly	'	Nonesident Return	Mark "0" if not applicable.
36	Binary	1	Nonresident Professional Athlete	Mark "1" for Nonresident Return
	,			Mark "0" if not applicable.
37	Binary	1	Part-Year Resident Return	Mark "1" for Part-Year Resident Return
20	Niconarada	0	T	Mark "0" if not applicable.
38	Numeric	8	Taxpayer's Date of Birth	Format must be mmddyyyy. No punctuation allowed.
39	Numeric	8	Spouse's Date of Birth	Moule the consumists according for the filling status.
40	Numeric	1	Filing Status	Mark the appropriate number for the filing status:
				1 = Single 2 = Married filing jointly
				3 = Married filing separately
				4 = Head of household
				5 = Qualifying widow(er)
41	Binary	1	Self Exemption – 65 or over	Mark "1" for "Yourself - 65 or older".
• •	J. I.a.y	'	Con Exemption 60 of 6ver	Mark "0" if not applicable. NOTE: Fields for the exemptions
42	Binary	1	Self Exemption – Blind	Mark "1" for "Yourself - Blind". "Yourself" and "Spouse
-	,			Mark "0" if not applicable. have been purposely om
43	Binary	1	Spouse Exemption – 65 or over	Mark "1" for "Spouse - 65 or older". from the 2-D barcode lay
				Mark "0" if not applicable.

44	Binary	1	Spouse Exemption – Blind	Mark "1" for "Spouse - Blind".
				Mark "0" if not applicable.
45	Numeric	2	Dependents	Line 6C, total number of dependents
46	Numeric	2	Total Exemptions	Line 6D, total exemptions claimed

Government Specific Data (continued)

Field No.	Field Type	Max. Field Length	Field Name	Comments
47	Numeric	5	W-2 Wages	If "1" is marked in Field 47 , enter the wages from the W-2(s). If "0" is marked in Field 47 , leave blank.
48	Binary	1	Federal Return Not Required Indicator	Mark "1" if federal return not required. (If "1" is marked, Lines 7 – 13 should be left blank and Line 14 must be "0.") Mark "0" if federal return is required.
49	Numeric	9	Return Line 7	Federal Adjusted Gross Income (AGI) – NPR worksheet, Federal column, Line 12.
50	Numeric	9	Return Line 8	Louisiana Adjusted Gross Income – NPR worksheet, Louisiana column, Line 20.
51	Numeric	5	Return Line 9	Ratio of Louisiana AGI to Federal AGI – Divide Line 8 by Line 7. Carry out to 4 decimal places, rounding down. Since no punctuation is allowed, enter the result without the decimal point. Example: If Line 7 = 75000 and Line 8 = 35555, then Line 9 = 4740
52	Numeric	7	Return Line 10A	Federal Itemized Deductions
53	Numeric	7	Return Line 10B	Federal Itemized Deductions for Medical and Dental Expenses
54	Numeric	5	Return Line 10C	Federal Standard Deduction
55	Numeric	7	Return Line 10D	Excess Federal Itemized Deductions – Subtract Line 10C from Line 10B .
56	Numeric	8	Return Line 10E	Allowable Deductions – Multiply Line 10D by the ratio on Line 9 .
57	Numeric	9	Return Line 11	Louisiana Net Income – Subtract Line 10E from Line 8 . If less than zero, enter "0" (zero).
58	Numeric	8	Return Line 12	Louisiana Income Tax – Tax Computation worksheet, Line I
59	Numeric	8	Return Line 13	Nonrefundable Priority 1 Credits – Schedule C-NR, Line 5
60	Numeric	8	Return Line 14	Tax Liability after Nonrefundable Priority 1 Credits – Subtract Line 13 from Line 12.
61	Numeric	4	Return Line 15	Louisiana Refundable Child Care Credit – Refundable Child Care Credit worksheet, Line 11
62	Numeric	5	Return Line 15A	Refundable Child Care Credit worksheet, Line 3
63	Numeric	5	Return Line 15B	Refundable Child Care Credit worksheet, Line 6
64	Numeric	5	Return Line 16	Louisiana Refundable School Readiness Credit – Refundable School Readiness Credit worksheet, Line 4

			Government Specif	fic Data (continued)
IT-540	B-2D Return (F	Page 2) – c	ontinued	
Field No.	Field Type	Max. Field Length	Field Name	Comments
65	Numeric	1	Number of Qualified Dependents—5-Star (Return Line 16)	Number of dependents who attended a 5-star facility
66	Numeric	1	Number of Qualified Dependents—4-Star (Return Line 16)	Number of dependents who attended a 4-star facility
67	Numeric	1	Number of Qualified Dependents—3-Star (Return Line 16)	Number of dependents who attended a 3-star facility
68	Numeric	1	Number of Qualified Dependents—2-Star (Return Line 16)	Number of dependents who attended a 2-star facility
69	Numeric	7	Return Line 17	Other Refundable Priority 2 Credits, Schedule F-NR, Line 9
70	Numeric	7	Return Line 18	Total Refundable Priority 2 Credits – Add Lines 15 and 16 – 17 . (Do not include amounts on Lines 15A and 15B.)
71	Numeric	8	Return Line 19	Tax Liability after Refundable Priority 2 Credits:
72	Numeric	8	Return Line 20	Overpayment after Refundable Priority 2 Credits:
IT-540	B-2D Return (P	Page 3)		
Field No.	Field Type	Max. Field Length	Field Name	Comments
73	Numeric	8	Return Line 21	Nonrefundable Priority 3 Credits – Schedule J-NR, Line 16
74	Numeric	8	Return Line 22	Adjusted Louisiana Income Tax. Subtract Line 21 from Line 19. If result is less than zero, enter "0" (zero).
75	Numeric	1	Consumer Use Tax Indicator (Return Line 23)	Consumer Use Tax (must be "1" or "0"): Mark "1" if no use tax is due. Mark "0" if not applicable.
76	Numeric	1	Amount from Consumer Use Tax Worksheet	Consumer Use Tax (must be "1" or "0"): Mark "1" if amount due from the Consumer Use Tax worksheet, Line 2 Mark "0" if not applicable.
77	Numeric	8	Return Line 23	Consumer Use Tax
78	Numeric	8	Return Line 24	Total Income Tax and Consumer Use Tax – Add Lines 22 and 23.
79	Numeric	7	Return Line 25	Overpayment after Refundable Priority 2 Credits – Amount from Line 20
80	Numeric	7	Return Line 26	Refundable Priority 4 Credits – Schedule I-NR, Line 6
81	Numeric	7	Return Line 27	Louisiana Tax Withheld for 2022
82	Numeric	7	Return Line 28	Credit Carried Forward from 2021

	B-2D Return (P	Max.		
Field		Field		
No.	Field Type	Length	Field Name	Comments
83	Numeric	7	Return Line 29	Amount Paid by Composite Partnership Filing
84	Numeric	7	Return Line 30	Amount of Estimated Payments for 2022
85	Numeric	7	Return Line 31	Amount Paid with Extension Request
86	Numeric	7	Return Line 32	Total Refundable Tax Credits and Payments – Add Lines 25 – 31 .
87	Numeric	7	Return Line 33	Overpayment: - If Line 32 = Line 24, mark "0" (zero) on Lines 33 – 40 and go to Line 41 If Line 32 > Line 24, subtract Line 24 from Line 32 and enter result on Line 33 If Line 32 < Line 24, mark "0" (zero) on Lines 33 – 39 and go to Line 40.
88	Binary	1	Farmer Indicator (Return Line 34)	Farmer Indicator Box for Underpayment Penalty: Mark "1" if farmer indicator box is marked on Line 35 . Mark "0" if not applicable.
89	Numeric	7	Return Line 34	Underpayment Penalty for Estimated Tax – See Form R-210NR.
90	Numeric	7	Return Line 35	Adjusted Overpayment: - If Line 34 = Line 33, mark "0" (zero) on Lines 35 – 40 and go to Line 41 If Line 34 > Line 33, mark "0" (zero) on Lines 35 – 39, subtract Line 33 from Line 34, and enter result on Line 40 If Line 34 < Line 33, subtract Line 34 from Line 33 and enter on Line 35.
91	Numeric	7	Return Line 36	Total Donations – Schedule D-NR, Total Line 22
92	Numeric	7	Return Line 37	Subtotal – Subtract Line 36 from 35 .
93	Numeric	7	Return Line 38	Amount of Overpayment Credited to 2023
94	Numeric	1	Refund Option (Return Line 39)	Mark the appropriate number for the refund option that the taxpayer selects: 2 = Paper check 3 = Direct deposit If the amount on Line 39 = 0, leave this field blank.
95	Numeric	7	Return Line 39	Amount to be Refunded – Subtract Line 38 from Line 37 .
96	Numeric	1	Direct Deposit—Bank Account Type	Direct Deposit—Bank Account Type: Mark "1" if checking. Mark "2" if savings. If not applicable, leave blank.
97	Binary	1	Direct Deposit—Refund Forwarded Outside U.S.	Will refund be forwarded outside the U.S.? Mark "1" if yes. Mark "0" if no. If not applicable, leave blank.
98	Numeric	9	Direct Deposit—Routing Number	Direct Deposit—Routing Number (9 digits) If not applicable, leave blank.
99	Alphanumeric	17	Direct Deposit—Account Number	Direct Deposit—Account Number (up to 17 characters) If not applicable, leave blank.

	Government Specific Data (continued)							
IT-540	B-2D Return (P	age 4)						
Field No.	Field Type	Max. Field Length	Field Name	Comments				
100	Numeric	7	Return Line 40	Amount Owed: - If Line 32 < Line 24, subtract Line 32 from Line 24.				
101	Numeric	7	Return Line 41	Additional Donation to Military Family Assistance Fund				
102	Numeric	7	Return Line 42	Additional Donation to Coastal Protection and Restoration Fund				
103	Numeric	7	Return Line 43	Additional Donation to Louisiana Food Bank Association				
104	Numeric	7	Return Line 44	Interest – Interest Calculation Worksheet, Line 5				
105	Numeric	7	Return Line 45	Delinquent Filing Penalty – Delinquent Filing Penalty worksheet, Line 7				
106	Numeric	7	Return Line 46	Delinquent Payment Penalty – Delinquent Payment Penalty worksheet, Line 7				
107	Binary	1	Farmer Indicator (Return Line 47)	Farmer Indicator Box for Underpayment Penalty: Mark "1" if farmer indicator box is checked Mark "0" if not applicable.				
108	Numeric	7	Return Line 47	Underpayment Penalty for Tax Due – See Form R-210NR.				
109	Numeric	7	Return Line 48	Balance Due Louisiana – Add Lines 40 – 47 .				
110	Numeric	3	Status of Return	Status of Return: 1st Digit: Mark "0" if Line 38 = 0. Mark "1" if Line 38 > 0. (Credit to 2023) 2nd Digit: Mark "0" if Line 39 = 0. Mark "1" if Line 39 > 0. (Refund) 3rd Digit: Mark "0" if Line 48 = 0. Mark "1" if Line 48 > 0. (Balance Due) Examples: If Line 40 is \$200 and Lines 38 and 48 are zero, mark "010". If Line 38 is \$100, Line 39 is \$200, and Line 48 is zero, mark "110".				
111	Numeric	4	Contribution/Donation Status	Contribution and Donation Status (right-justified): 1st Digit: Mark "0" if Line 36 = 0.				

			Government Specific	Data (continued)
IT-540	B-2D Return (P	age 4) – c	<u> </u>	
Field No.	Field Type	Max. Field Length	Field Name	Comments
112	Alphanumeric	10	Preparer's FEIN/ PTIN/SSN	Preparer's FEIN, PTIN, SSN, or LDR account number. If not applicable, leave blank.
113	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha, uppercase only. If last name is less than four letters, leave the last position(s) blank. Punctuation and hyphens should be omitted. Name code examples: John Brown = BROW John Bow = BOW_
IT-540	-2D Schedule C	-NR		
Field	Field Tomo	Max. Field	Field Name	Comments
No. 114	Field Type Numeric	Length 3		Comments Factor 2 digit gradit and a
114	numeric	3	Nonrefundable Priority 1 Credit Code (Schedule C-NR, Line 1)	Enter 3-digit credit code.
115	Numeric	7	Schedule C-NR, Line 1	Enter amount of credit allowed. See instructions.
116	Numeric	3	Nonrefundable Priority 1 Credit Code (Schedule C-NR, Line 2	Enter 3-character credit code.
117	Numeric	7	Schedule C-NR, Line 2	Enter amount of credit allowed. See instructions.
118	Numeric	3	Nonrefundable Priority 1 Credit Code (Schedule C-NR, Line 3)	Enter 3-character credit code.
119	Numeric	7	Schedule C-NR, Line 3	Enter amount of credit allowed. See instructions.
120	Numeric	3	Nonrefundable Priority 1 Credit Code (Schedule C-NR, Line 4)	Enter 3-digit credit code.
121	Numeric	7	Schedule C-NR, Line 4	Enter amount of credit allowed. See instructions.
122	Numeric	7	Schedule C-NR, Line 5	Total Nonrefundable Tax Credits – Add Lines 1-4.
			Government Specific	Data (continued)
IT-540	-2D Schedule D)-NR		
		Max.		
Field		Field		
No.	Field Type	Length	Field Name	Comments Adjusted Overson to Petrus Line 25
123	Numeric	7	Schedule D-NR, Line 1	Adjusted Overpayment – Return Line 35
124	Numeric	5	Schedule D-NR, Line 2	Military Family Assistance Fund
125	Numeric	5	Schedule D-NR, Line 3	Coastal Protection and Restoration Fund START Program
126	Numeric	5	Schedule D-NR, Line 4	-
127	Numeric	5	Schedule D-NR, Line 5	Wildlife Habitat and Natural Heritage Trust Fund Louisiana Cancer Trust Fund
128 129	Numeric	5 5	Schedule D-NR, Line 6 Schedule D-NR, Line 7	Louisiana Cancer Trust Fund Louisiana Pet Overpopulation Advisory Council
129	Numeric	၁	Schedule D-NK, Lille I	Louisiana Pet Overpopulation Advisory Council

			Government Specific	Data (continued)
IT-540	B-2D Schedule	D-NR - co	ontinued	
Field No.	Field Type	Max. Field Length	Field Name	Comments
130	Numeric	5	Schedule D-NR, Line 8	Louisiana Food Bank Association
131	Numeric	5	Schedule D-NR, Line 9	Make-A-Wish Foundation of the Texas Gulf Coast and Louisiana
131	Numeric	5	Schedule D-NR, Line 10	Louisiana Association of United Ways / LA 2-1-1
133	Numeric	5	Schedule D-NR, Line 11	American Red Cross
134	Numeric	5	Schedule D-NR, Line 12	Louisiana National Guard Honor Guard for Military Funerals
135	Numeric	5	Schedule D-NR, Line 13	Louisiana State Troopers Charities, Inc.
136	Numeric	5	Schedule D-NR, Line 14	Louisiana Horse Rescue
137	Numeric	5	Schedule D-NR, Line 15	Louisiana Coalition Against Domestic Violence
138	Numeric	5	Schedule D-NR, Line 16	Dream Come True, Inc
139	Numeric	5	Schedule D-NR, Line 17	Sexual Trauma Awareness and Response
140	Numeric	5	Schedule D-NR, Line 18	Louisiana State University Agricultural Center (4-H)
141	Numeric	5	Schedule D-NR, Line 19	Maddie's Footprints
142	Numeric	5	Schedule D-NR, Line 20	University of New Orleans Foundation
143	Numeric	5	Schedule D-NR, Line 21	Southeastern Louisiana
144	Numeric	6	Schedule D-NR, Line 22	Total Donations – Add Lines 2 – 21. This amount cannot be more than Line 1 .
IT-540	B-2D Schedule	F-NR		
145	Alphanumeric	3	Refundable Priority 1 Credit Code (Schedule F-NR, Line 1)	Enter 3-character credit code.
146	Numeric	7	Schedule F-NR, Line 1	Enter amount of credit allowed. See instructions.
147	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 2)	Enter 3-character credit code.
148	Numeric	7	Schedule F-NR, Line 2	Enter amount of credit allowed. See instructions.
			Government Specific	Data (continued)
IT-540	B-2D Schedule	F-NR – co	<u> </u>	
Field	F:	Max. Field		2
No.	Field Type	Length	Field Name	Comments
149	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 3)	Enter 3-character credit code.
150	Numeric	7	Schedule F-NR, Line 3	Enter amount of credit allowed. See instructions.
151	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 4)	Enter 3-character credit code.
152	Numeric	7	Schedule F-NR, Line 4	Enter amount of credit allowed. See instructions.
153	Alphanumeric	3	Refundable Priority 2 Credit Code (Schedule F-NR, Line 5)	Enter 3-character credit code.

			Ta = =	
154	Numeric	7	Schedule F-NR, Line 5	Enter amount of credit allowed. See instructions.
155	Numeric	9	School Readiness Child Care-Facility License Number, Line 5A	Facility License Number
156	Alphanumeric	3	Transferable, Refundable Priority 2 Credit Code (Schedule F, Line 6)	Enter 3-character credit code. Note: Currently, the only valid code is "62F".
157	Numeric	7	Schedule F-NR, Line 6	Enter amount of credit allowed. See instructions.
158	Alphanumeric	26	Schedule F-NR, Line 6A	Enter the LDR State Certification Number from Form R-6135.
159	Alphanumeric	3	Transferable, Refundable Priority 2 Credit Code (Schedule F-NR, Line 7)	Enter 3-character credit code. Note: Currently, the only valid code is "62F".
160	Numeric	7	Schedule F-NR, Line 7	Enter amount of credit allowed. See instructions.
161	Alphanumeric	26	Schedule F-NR, Line 7A	Enter the LDR State Certification Number from Form R-6135.
162	Alphanumeric	3	Transferable, Refundable Priority 2 Credit Code (Schedule F-NR, Line 8)	Enter 3-character credit code. Note: Currently, the only valid code is "62F".
163	Numeric	7	Schedule F-NR, Line 8	Enter amount of credit allowed. See instructions.
164	Alphanumeric	26	Schedule F-NR, Line 8A	Enter the LDR State Certification Number from Form R-6135.
165	Numeric	7	Schedule F- NR, Line 9	Other Refundable Priority 2 Credits – Add Lines 1 –8.
IT-540	B-2D Schedule	I-NR		
Field No.	Field Type	Max. Field Length	Field Name	Comments
166	Alphanumeric	3	Refundable Priority 4 Credit Code (Schedule I-NR, Line 1)	Enter 3-character credit code.
167	Numeric	7	Schedule I-NR, Line 1	Enter amount of credit allowed. See Form R-10610.
168	Alphanumeric	3	Refundable Priority 4 Credit Code (Schedule I-NR, Line2)	Enter 3-character credit code.
			Government Specific	Data (continued)
IT-540	B-2D Schedule	I-NR – co	ntinued	
		Max.		
Field		Field		
No.	Field Type	Length	Field Name	Comments
169	Numeric	7	Schedule I-NR, Line 2	Enter amount of credit allowed. See Form R-10610.
170	Alphanumeric	3	Refundable Priority 4 Credit Code (Schedule I-NR, Line 3)	Enter 3-character credit code.
171	Numeric	7	Schedule I-NR, Line 3	Enter amount of credit allowed. See Form R-10610.
172	Alphanumeric	3	Refundable Priority 4 Credit Code (Schedule I-NR, Line 4)	Enter 3-character credit code.
173	Numeric	7	Schedule I-NR, Line 4	Enter amount of credit allowed. See Form R-10610.
174	Alphanumeric	3	Refundable Priority 4 Credit Code (Schedule I-NR, Line 5)	Enter 3-character credit code.
175	Numeric	7	Schedule I-NR, Line 5	Enter amount of credit allowed. See Form R-10610.
176	Numeric	7	Schedule I-NR, Line 6	Total Refundable Priority 4 Credits – Add Lines 1 – 5.
170		,	Consider that, Ellio C	Total Relationary Foreign Florida Entres 1 0.

Field No.	Field Type	Max. Field Length	Field Name	Comments
177	Numeric	4	Schedule J-NR, Line 1	Federal Child Care Credit
178	Numeric	4	Schedule J-NR, Line 2	Louisiana Nonrefundable Child Care Credit – See Nonrefundable Child Care Credit worksheet.
179	Numeric	4	Schedule J-NR, Line 3	Louisiana Nonrefundable Child Care Credit Carried Forward – See Nonrefundable Child Care Credit worksheet.
180	Numeric	4	Schedule J-NR, Line 4	Louisiana Nonrefundable School Readiness Credit – See Nonrefundable School Readiness Credit worksheet.
181	Numeric	1	Number of Qualified Dependents—5-Star Schedule J-NR, Line 4	Number of dependents who attended a 5-star facility
182	Numeric	1	Number of Qualified Dependents—4-Star Schedule J-NR, Line 4	Number of dependents who attended a 4-star facility
183	Numeric	1	Number of Qualified Dependents—3-Star Schedule J-NR, Line 4	Number of dependents who attended a 3-star facility
184	Numeric	1	Number of Qualified Dependents—2-Star Schedule J-NR, Line 4	Number of dependents who attended a 2-star facility
185	Numeric	4	Schedule J-NR, Line 5	Louisiana Nonrefundable School Readiness Credit Carried Forward – See Nonrefundable School Readiness Credit worksheet.
186	Alphanumeric	3	Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 6)	Enter 3-character credit code.
187	Numeric	7	Schedule J-NR, Line 6	Enter amount of credit allowed. See instructions.
188	Alphanumeric	3	Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 7)	Enter 3-character credit code.
189	Numeric	7	Schedule J-NR, Line 7	Enter amount of credit allowed. See instructions.

IT-540B-2D Schedule J-NR - continued

	Mary Mary						
		Max.					
Field		Field					
No.	Field Type	Length	Field Name	Comments			
190	Alphanumeric	3	Nonrefundable Priority 3 Credit Code (Schedule	Enter 3-character credit code.			
			J-NR, Line 8)				
191	Numeric	7	Schedule J-NR, Line 8	Enter amount of credit allowed. See instructions.			
192	Alphanumeric	3	Nonrefundable Priority 3 Credit Code (Schedule	Enter 3-character credit code.			
			J-NR, Line 9)				
193	Numeric	7	Schedule J-NR, Line 9	Enter amount of credit allowed. See instructions.			
194	Alphanumeric	3	Nonrefundable Priority 3 Credit Code (Schedule	Enter 3-character credit code.			
			J-NR, Line 10)				
195	Numeric	7	Schedule J-NR, Line 10	Enter amount of credit allowed. See instructions.			
196	Alphanumeric	3	Nonrefundable Priority 3 Credit Code (Schedule	Enter 3-character credit code.			
			J-NR, Line 11)				

197	Numeric	7	Schedule J-NR, Line 11	Enter amount of credit allowed. See instructions.
198	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 12)	Enter 3-character credit code.
199	Numeric	8	Schedule J-NR, Line 12	Enter amount of credit allowed. See instructions.
200	Alphanumeric	26	Schedule J-NR, Line 12A	Enter the LDR State Certification Number from Form R-6135.
201	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 13)	Enter 3-character credit code.
202	Numeric	8	Schedule J-NR, Line 13	Enter amount of credit allowed. See instructions.
203	Alphanumeric	26	Schedule J-NR, Line 13A	Enter the LDR State Certification Number from Form R-6135.
204	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 14)	Enter 3-character credit code.
205	Numeric	8	Schedule J-NR, Line 14	Enter amount of credit allowed. See instructions.
206	Alphanumeric	26	Schedule J-NR, Line 14A	Enter the LDR State Certification Number from Form R-6135.
207	Numeric	3	Transferable, Nonrefundable Priority 3 Credit Code (Schedule J-NR, Line 15)	Enter 3-character credit code.
208	Numeric	8	Schedule J-NR, Line 15	Enter amount of credit allowed. See instructions.
209	Alphanumeric	26	Schedule J-NR, Line 15A	Enter the LDR State Certification Number from Form R-6135.
210	Numeric	8	Schedule J-NR, Line 16	Total Nonrefundable Tax Credits – Add Lines 2 – 15 .

IT-540B-2D	Schedule Nonresident	and Part-Year I	Resident (NF	PR) Worksheet
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Field	Field Type	Max.			
No.		Field	Field Name	Comments	
		Length			
211	Numeric	9	NPR Worksheet, Line 1	Federal NPR - Wages, salaries, tips, etc.	
212	Numeric	9	NPR Worksheet, Line 1	Louisiana -Wages, salaries, tips, etc.	
213	Numeric	9	NPR Worksheet, Line 2	Federal- Taxable interest	
214	Numeric	9	NPR Worksheet, Line 2	Louisiana- Taxable interest	
215	Numeric	9	NPR Worksheet, Line 3	Federal- Dividends	
216	Numeric	9	NPR Worksheet, Line 3	Louisiana- Dividends	
217	Numeric	10	NPR Worksheet, Line 4	Federal- Business income (or loss) and farm income (or loss)	
218	Numeric	9	NPR Worksheet, Line 4	Louisiana- Business income (or loss) and farm income (or loss)	
219	Numeric	10	NPR Worksheet, Line 5	Federal- Gains (or losses)	
220	Numeric	9	NPR Worksheet, Line 5	Louisiana- Gains (or losses)	
221	Numeric	9	NPR Worksheet, Line 6	Federal- IRA distributions, pensions and annuities	
222	Numeric	9	NPR Worksheet, Line 6	Louisiana- IRA distributions, pensions and annuities	
223	Numeric	10	NPR Worksheet, Line 7	Federal- Rental real estate, royalties, partnerships, S corporations, trusts, etc.	
224	Numeric	9	NPR Worksheet, Line 7	Louisiana- Rental real estate, royalties, partnerships, S corporations, trusts, etc.	
225	Numeric	10	NPR Worksheet, Line 8	Federal -Social Security benefits	

Numeric 10 NPR Worksheet, Line 9 Federal Other Income Numeric 9 NPR Worksheet, Line 10 Federal - Total Income - Add the income amounts on Lines 1 – 9 for each column. Numeric 9 NPR Worksheet, Line 10 Louisiana- Total Income - Add the income amounts on Lines 1 – 9 for each column. Numeric 9 NPR Worksheet, Line 10 Louisiana- Total Income - Add the income amounts on Lines 1 – 9 for each column. Numeric 9 NPR Worksheet, Line 11 Federal - Total Income - Add the income amounts on Lines 1 – 9 for each column. Numeric 9 NPR Worksheet, Line 11 Federal - Total Income - Add the income amounts on Lines 1 – 9 for each column. Numeric 9 NPR Worksheet, Line 11 Louisiana- Total Adjustments to Income NPR Worksheet, Line 11 Louisiana- Total Adjustments to Income NPR Worksheet, Line 12 Federal Adjusted Gross Income - Subtract Line 11 from Line 10 for each column. In the Federal column and Port Income To Income NPR Worksheet, Line 12 Louisiana- Adjusted Gross Income - Subtract Line 11 from Line 10 for each column. Enter the amount in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on For	226	Numeric	10	NPR Worksheet, Line 9	Other income- Enter the amount of Louisiana NOL utilized-
Numeric 9 NPR Worksheet, Line 10 Federal - Total Income - Add the income amounts on Lines 1 – 9 for each column.			_	· ·	
Numeric 10 NPR Worksheet, Line 10 Federal Total Income - Add the income amounts on Lines 1 - 9 for each column.					
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Numeric 9 NPR Worksheet, Line 11 Louisiana-Total Adjustments to Income	231	Numeric	Q	NPR Worksheet Line 11	
Numeric 10 NPR Worksheet, Line 12 Federal Adjusted Gross Income — Subtract Line 11 from Line 10 for each column. Enter the amount in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column showlould agree with Federal Form 1040 or 1040-SR, Line 11. Louisiana Adjusted Gross Income — Subtract Line 11 from Line 10 for each column. Enter the amount in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column should agree with Federal Form 1040 or 1040-SR, Line 11. Louisiana- Interest and dividend income from other states and their political subdivisions				•	-
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Numeric 7 NPR Worksheet, Line 15 Louisiana- Add back of donation to school tuition organization credit					·
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252 Numeric 7 NPR Worksheet, Line 19 Total Exempt Income – Add Lines 18A through 18F.				,	·
	252	Numeric	7	NPR Worksheet, Line 19	Total Exempt Income – Add Lines 18A through 18F.

253	Numeric	8	NPR Worksheet, Line 20	LOUISIANA ADJUSTED GROSS INCOME. Subtract Line 19 from Line 17. Also,			
				enter this			
				Amount on Form IT-540B, Line 8.			
	Trailer						
254	Indicates the en	d of the dat	a file. Value is *EOD* .				

Submission of Test Samples:

Hardcopy samples of the following must be submitted:

- For testing of the 3-of-9 barcodes and the placement of the variable data fields, submit one (1) sample of the following with all printed variable data fields fully filled:
 - o IT-540B-2D Return (4 pages)
 - o Schedule C-NR
 - Schedule D-NR
 - Schedule F-NR
 - Schedules H-NR and I-NR
 - Schedule J-NR (2 pages)
 - Nonresident and Part-Year Resident (NPR) Worksheet
 - Louisiana School Expense Deduction Worksheet
 - Louisiana Refundable Child Card Credit Worksheet
 - o Louisiana Refundable School Readiness Credit Worksheet
- For testing of the 2-D barcodes and printed variable data accuracy, submit four (4) returns (with the applicable schedules and worksheets) completed using the scenarios found in a separate document on the FTA site. Only the returns, schedules, and worksheets as given in the scenarios should be submitted. Please do not send any additional supporting documents as they are not needed for the purpose of this test and will cause the unnecessary handling of sorting through and discarding of the additional documents.

Test submissions can be sent by e-mail to shanna.kelly@la.gov or LaSubstitute.VendorInquiries@la.gov.

Attention: Forms Management Unit Tax Administration Division Louisiana Department of Revenue 617 N. Third St. Baton Rouge, LA 70802-5428

Ten (10) business days will be required for our review and testing. Results will be issued via e-mail or fax. Questions, inquiries, comments, etc., should be directed to the e-mail address Substitute.Inquiries@LA.gov.