

Louisiana Department of Revenue Corporation Income/Franchise Tax Declaration for Electronic Filing

Do not file paper copies. This form is to be maintained by ERO.

For calendar year 2011, or tax year beginning ______, 2011, ending _____, 2012

PLEASE PRINT OR TYPE.

Name of Corporation							
Louisiana Revenue Account Number			Federal Employer Identification Number (FEIN)				
Street Address of Corporation			City		State	ZIP	
Part 1 - Tax Return Information (whole dollars only)							
1	Income & Franchise tax due (Form CIFT-	n CIFT-620, Line 14)		1	.00		
2	Less Refundable Credits (Form CIFT-620,	n CIFT-620, add Lines 15 & 15A)			.00		
3	Refund (Form CIFT-620, Line 18)			3	.00		
4	Total amount due (Form CIFT-620, Line 25)			4	.00		
5	Amount of payment remitted electronically			5	.00		
Part II - Declaration of Officer (Sign only after Part I is completed.)							
Under penalties of perjury, I declare that I am an officer of the above corporation and that the information that I have given my electronic return originator (ERO), transmitter, and/or intermediate service provider (ISP) and the amounts in Part 1 above agree with the amounts on the corresponding lines of the Louisiana 2011 Income/2012 Franchise tax return. To the best of my knowledge and belief, the corporation's return is true, correct, and complete. I consent to my ERO, transmitter, and/or ISP sending the corporation's return, this declaration, accompanying schedules, and statements to the Louisiana Department of Revenue. I also consent to the Louisiana Department of Revenue sending my ERO, transmitter, and/or ISP an acknowledgment of receipt of transmission and an indication of whether or not the corporation's return is accepted, and, if rejected, the reason(s) for the rejection.							
□ I authorize a representative of the Louisiana Department of Revenue to discuss my return and attachments with my preparer.							
Signature of Officer		Date (mm/dd/yyyy)		Title	Title		
Part III - Declaration of Electronic Return Originator (ERO) and Paid Preparer							
I declare that I have reviewed the above corporation's return and that the entries on LA8453-C are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The corporate office will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the Louisiana Department of Revenue, and have followed all other requirements in Pub. 3112, IRS E-file Application and Participation, and Pub. 4163, Modernized E-File Information for Authorized IRS E-Providers. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above corporation's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.							
ERO's Use Only ERO'S Signature		Date (mm/dd/ywy)		Check if	FBO's SSN	ERO's SSN or PTIN	
ERO'S Signature		Date (mm/dd/yyyy)	Check if also	Check if	ERO's SSN	ERU'S SSN or PTIN	

paid preparer self-employed Х Firm's name (or yours if self-employed) EIN ZIP City State Phone Number Paid Preparer's Use only Preparer's Signature Preparer's SSN or PTIN Date (mm/dd/yyyy) Check if Х self-employed Firm's name (or yours if self-employed) EIN City State ZIP Phone Number