

Please paperclip attachments here.

S2 Louisiana Department of Revenue Sales Tax Return

R-1029 (7/06)

Location address:

EASY FILE & EASY PAY
FAST and SIMPLE
www.revenue.louisiana.gov

If address is different from that shown, mark here and make corrections in area provided on back. *

Do not use this form for filing periods prior to July 2006. *

Filing period

U.S. NAICS Code

Please use blue or black ink.

Round to the nearest dollar. Do not use dashes.

1	Gross sales of tangible personal property	1	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
2	Cost of tangible personal property (Used, consumed, or stored for use or consumption, or purchased or imported to be sold in coin-operated vending machines).....	2	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
3	Leases, rentals, and services	3	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
4	Total (Add Lines 1 through 3.)	4	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
5	Total allowable deductions (From Line 34, Schedule A. Do not include as a deduction any item not reported on Lines 1 through 3.)	5	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
6	Amount taxable (Subtract Line 5 from Line 4.)	6	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
7	Tax due (Multiply amount on Line 6 by 4%.)	7	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
8	Excess tax collected (Does not include local sales tax)	8	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
9	Total (Add Line 7 and Line 8.)	9	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
10	Vendor's compensation (1.1% of Line 9, if payment not delinquent)	10	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
11	Gross tax due (Subtract Line 10 from Line 9.).....	11	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
12	Sales tax credit Purchases <input type="text"/> , <input type="text"/> , <input type="text"/> .	00	12	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	
12A	Register reprogramming credit (Actual programming costs, not to exceed \$25 per register - invoices must be attached)	12A	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
13	Net tax due (Subtract Lines 12 and 12A from Line 11. If total of Lines 12 and 12A exceeds Line 11, please see instructions.)	13	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
13A	Donation to The Louisiana Military Family Assistance Fund (Enter the amount from Line 35 from the back of the return.).....	13A	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
14	Penalty (See instructions.)	14	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
15	Interest (See instructions.)	15	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
16	Total payment due	16	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
	(Add Lines 13, 13A, 14, and 15.) Make payment to: Louisiana Department of Revenue. Do not send cash.		<input type="checkbox"/>	Mark this box if payment made electronically.	PAY THIS AMOUNT.	<input type="checkbox"/>				
17	Overpayment to be refunded	17	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>
	(Add Lines 11 and 13A and subtract Lines 12 and 12A. Do not claim a credit for this overpayment on any other return. If final or amended return, mark boxes on back of this form									



