LOUISIANA
DEPARTMENT *of* REVENUE

Specifications for Form CIFT-620-2D
(2019 Income / 2020 Franchise)

General Requirements

The 2019 Louisiana Corporation Income Tax Return and 2020 Franchise Tax Return (CIFT-620) is a scannable form processed on high-speed scanners. All substitute returns (CIFT-620-2D) **MUST** incorporate variable data fields in **exact placement** as specified on Pages 3 through 18 of this document and a 2-D barcode as specified on page 4 of this document. All pages of the return and any applicable schedules and/or worksheets **MUST** be submitted by the taxpayer (s) for proper processing. Please note it is critical that all pages of the return be submitted. Any return received that is missing any page will **not** be processed and will be returned to the taxpayer as an unapproved form. Also, the signature(s) of an officer (s) of the corporation on the substitute form must be original.

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

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

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

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

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

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

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

Form/Schedule	Doc ID
Return, Page 1	22041
Return, Page 2	22042
Return, Page 3	22043
Barcode, Page4	22044
Schedule NRC-P1 and RC-P4	22045
Schedule NRC-P3	22046
Schedule RC-P2	22047
Schedules A and B	22050
Schedule C	22051
Schedule D	22052
Schedules E and G	22053
Schedule F	22054
Schedule G-1	22055
Schedule H	22056
Schedule I	22057
Schedules J, J-1, and K	22058
Schedules L, M and N	22059

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

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

> ▐

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

Form/Schedule	Doc ID
Return, Page 1	22041
Return, Page 2	22042
Return, Page 3	22043
Barcode, Page4	22044
Schedule NRC-P1 and RC-P4	22045
Schedule NRC-P3	22046
Schedule RC-P2	22047
Schedules A and B	22050
Schedule C	22051
Schedule D	22052
Schedules E and G	22053
Schedule F	22054
Schedule G-1	22055
Schedule H	22056
Schedule I	22057
Schedules J, J-1 and K	22058
Schedules L, M and N	22059

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

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

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

    Reference Points (6):   1 positioned on Line   6 in Position 28.
                                       1 positioned on Line 18 in Position 80.
                                       1 positioned on Line 21 in Position 45.
                                       1 positioned on Line 51 in Position 45.
                                       1 positioned on Line 61 in Position 26.
                                       1 positioned on Line 61 in Position 80.

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

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

Document Identification Number: The document identification number (22041) must be printed as specified on Page 1 of this document and positioned on Line 63 in Positions 76-80.

Printed Variable Data Fields: The printed variable data fields must meet the following criteria:

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

	Printed Variable Data Fields – CIFT-620-2D Return (Page 1)			
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 5 Position(s) 50-60	Numeric (with hyphen)	11
Calendar Year Box	Check this box if it for Calendar Year Only	Line 10 Position(s) 12	Alpha	1
Income Tax Fiscal Year Beginning	This field should be formatted as "mm/dd".	Line 12 Position(s) 11-15	Numeric (with slash)	5
Income Tax Fiscal Year Ending	This field should be formatted as "mm/dd".	Line 14 Position(s) 11-15	Numeric (with slash)	5
Franchise Tax Fiscal Year Beginning	This field should be formatted as "mm/dd".	Line 12 Position(s) 25-29	Numeric (with slash)	5
Franchise Tax Fiscal Year Ending	This field should be formatted as "mm/dd".	Line 14 Position(s) 25-29	Numeric (with slash)	5

Printed Variable Data Fields – CIFT-620-2D Return (Page 1) – continued				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Name Change 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.	Line 8 Position(s) 37	Alpha	1
Amended Return Indicator		Line 10 Position(s) 37	Alpha	1
Franchise Tax Filing Not Required Indicator		Line 12 Position(s) 37	Alpha	1
Income Tax Filing Not Required Indicator		Line 14 Position (s) 37	Alpha	1
First-time Filing Indicator		Line 16 Position(s) 37	Alpha	1
2015 Legislation Recovery Indicator		Line 18 Position(s) 37	Alpha	1
Final Return Indicator		Line 16 Position(s) 8	Alpha	1
Short Period Return Indicator		Line 18 Position(s) 8	Alpha	1
Legal Name	The legal name of the corporation.	Line 8 Position(s) 50-79	Alphanumeric	30
Trade Name	The trade name or DBA name of the corporation. Leave blank if not applicable.	Line 10 Position(s) 50-79	Alphanumeric	30
Address Line 1	Corporation's mailing address.	Line 12 Position(s) 50-79	Alphanumeric	30
Address Line 2		Line 14 Position(s) 50-79	Alphanumeric	30
City		Line 16 Position(s) 50-70	Alphanumeric	21
State		Line 16 Position(s) 72-73	Alpha	2
ZIP		Line 16 Position(s) 75-79	Numeric	5
Return Line A	Federal Employer Identification Number (FEIN) – This field should be formatted as "##-#######".	Line 21 Position(s) 29-38	Numeric (with hyphen)	10
Negative Indicator (Return Line B)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 23 Position(s) 26	Alpha	1
Return Line B	Federal Taxable Income	Line 23 Position(s) 32-43	Numeric	12
Return Line C	Federal Income Tax	Line 25 Position(s) 33-43	Numeric	11
Return Line D	Income Tax Apportionment Percentage – Round the percentage to 2 decimal places (###.##).	Line 27 Position(s) 36-41	Numeric (with decimal point)	6
Negative Indicator (Return Line E)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 29 Position(s) 26	Alpha	1
Return Line E	Gross Revenues	Line 29 Position(s) 29-43	Numeric	15
Negative Indicator (Return Line F)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 31 Position(s) 26	Alpha	1
Return Line F	Total Assets	Line 31 Position(s) 29-43	Numeric	15
Return Line G	NAICS Code	Line 19 Position(s) 69-74	Numeric	6
Return Line H	Principal Place of Business – Enter the state abbreviation for the location.	Line 21 Position(s) 70-71	Alpha	2
Return Line I—Yes	**One or the other of these indicators must be marked.** Print an "X" (uppercase) in the specified position in order to denote the appropriate indicator. Do not print a box, only the "X" if applicable.	Line 23 Position(s) 71	Alpha	1
Return Line I—No		Line 23 Position(s) 79	Alpha	1
Return Line J—Yes	**One or the other of these indicators must be marked.** Print an "X" (uppercase) in the specified position in order to denote the appropriate indicator. Do not print a box, only the "X" if applicable.	Line 25 Position(s) 71	Alpha	1
Return Line J—No		Line 25 Position(s) 79	Alpha	1

	Printed Variable Data Fields – CIFT-620-2D Return (Page 1) – continued			
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Return Line K	If answered "Yes" on Line J, enter FEIN of consolidated federal income tax return.	Line 27 Position(s) 69-78	Numeric (with hyphen)	10
Return Line L—Yes	**One or the other of these indicators must be marked.** Print an "X" (uppercase) in the specified position in order to denote the appropriate indicator. Do not print a box, only the "X" if applicable.	Line 29 Position(s) 71	Alpha	1
Return Line L—No		Line 29 Position(s) 79	Alpha	1
Return Line M	Code of the Federal Form Filed	Line 31 Position(s) 69	Numeric	1
Return Line N	Code of the Entity Type	Line 33 Position(s) 69	Numeric	1
Return Line O	Pass-through Entity Tax Election	Line 35 Position(s) 69	Numeric	1
Negative Indicator (Return Line 1A)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 36 Position(s) 27	Alpha	1
Return Line 1A	Louisiana Net Income before Loss Adjustments and Federal Income Tax Deduction	Line 36 Position(s) 30-41	Numeric	12
Negative Indicator (Return Line 1B)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 38 Position(s) 27	Alpha	1
Return Line 1B	Subchapter S Corporation Exclusion	Line 38 Position(s) 30-41	Numeric	12
Return Line 1C	Loss Carryforward less Federal Tax Refund Applicable to Loss	Line 41 Position(s) 30-41	Numeric	12
Return Line 1C1	Loss Carryforward Utilized	Line 43 Position(s) 30-41	Numeric	12
Return Line 1C2	Act 123 Loss Utilization Recovery	Line 45 Position (s) 30-41	Numeric	12
Return Line 1D	Federal Income Tax Deduction	Line 47 Position(s) 32-41	Numeric	10
Return Line 1D1	Federal Disaster Relief Credits	Line 49 Position(s) 32-41	Numeric	10
Negative Indicator (Return Line 1E)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 51 Position(s) 27	Alpha	1
Return Line 1E	Louisiana Taxable Income	Line 51 Position(s) 31-41	Numeric	11
Exemption Code (Return Line 2)	**Print the Income Exemption Code** in the specified position in order to denote the Exemption Code indicator. Do not print a box, only the numeric code applicable.	Line 53 Position(s) 27	Numeric	1
Return Line 2	Louisiana Income Tax	Line 53 Position(s) 33-41	Numeric	9
Return Line 3	Total Nonrefundable Income Tax Credits	Line 55 Position(s) 34-41	Numeric	8
Return Line 4	Income Tax after Nonrefundable Credits	Line 57 Position(s) 34-41	Numeric	8
Negative Indicator (Return Line 5A)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 39 Position(s) 65	Alpha	1
Return Line 5A	Total Capital Stock, Surplus, and Undivided Profits	Line 39 Position(s) 68-79	Numeric	11
Return Line 5B	Franchise Tax Apportionment Percentage – Round the percentage to 2 decimal places (###.##).	Line 41 Position(s) 71-76	Numeric (with decimal point)	6
Negative Indicator (Return Line 5C)	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 43 Position(s) 65	Alpha	1

Return Line 5C	Franchise Tax Base	Line 45 Position(s) 69-79	Numeric	11
Return Line 6	Amount of Assessed Value of Real and Personal Property in Louisiana in 2015	Line 45 Position(s) 71-79	Numeric	9
Exemption Code (Return Line 7)	Print the Franchise Exemption Code in the specified position in order to denote the Exemption Code indicator. Do not print a box, only the numeric code applicable.	Line 47 Position(s) 65	Numeric	1
Return Line 7	Louisiana Franchise Tax	Line 47 Position(s) 72-79	Numeric	8
Return Line 8	Total Nonrefundable Franchise Tax Credits	Line 49 Position(s) 72-79	Numeric	8
Return Line 9	Franchise Tax after Nonrefundable Credits	Line 51 Position(s) 72-79	Numeric	8
Software Developer ID	Software Developer Identification Number (4-digit number) preapproved by LDR	Line 61 Position(s) 62-65	Numeric	4

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

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

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

Reference Points (6):
1 positioned on Line 10 in Position 27.
1 positioned on Line 10 in Position 60.
1 positioned on Line 55 in Position 60.
1 positioned on Line 56 in Position 27.
1 positioned on Line 61 in Position 26.
1 positioned on Line 61 in Position 80.

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

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

Document Identification Number: The document identification number (22042) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Return (Page 2)				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Column 1 (Income Tax)				
Return Line 10	Tax liability after priority 1 credits	Line 10 Position(s) 31-38	Numeric	8
Return Line 11	Louisiana Citizens Insurance Assessment Paid	Line 12 Position(s) 31-38	Numeric	8
Return Line 11A	Louisiana Citizens Insurance Credit	Line 14 Position(s) 31-38	Numeric	8
Return Line 11B	Refundable credits from Schedule RC-P2	Line 16 Position(s) 31-38	Numeric	8
Return Line 12	Total priority 2 credits	Line 18 Position(s) 31-38	Numeric	8
Return Line 13	Tax liability after priority 2 credits	Line 20 Position(s) 31-38	Numeric	8
Return Line 14	Overpayment after priority 2 credits	Line 22 Position(s) 31-38	Numeric	8
Return Line 15	Nonrefundable credits from Schedule NRC-P3	Line 24 Position(s) 31-38	Numeric	8
Printed Variable Data Fields – CIFT-620-2D Return (Page 2) – continued				

Field Name	Comments	Exact Placement on Grid		Field Type	Field Length
Column 1 (Income Tax) – continued					
Return Line 16	Tax liability after priority 3 credits	Line 26	Position(s) 31-38	Numeric	8
Return Line 17A	Overpayment after priority 2 credits	Line 28	Position(s) 31-38	Numeric	8
Return Line 17B	Refundable credits from Schedule RC-P4	Line 30	Position(s) 31-38	Numeric	8
Return Line 17C	Credit carryforward from prior year return	Line 32	Position(s) 31-38	Numeric	8
Return Line 17D	Estimated payments	Line 34	Position(s) 31-38	Numeric	8
Return Line 17E	Payment made with extension	Line 36	Position(s) 31-38	Numeric	8
Return Line 17F	Total refundable credits and payments	Line 38	Position(s) 31-38	Numeric	8
Return Line 18	Overpayment	Line 40	Position(s) 31-38	Numeric	8
Return Line 19	Tax due	Line 42	Position(s) 31-38	Numeric	8
Return Line 22	Interest	Line 48	Position(s) 31-38	Numeric	8
Return Line 23	Delinquent filing penalty	Line 50	Position(s) 31-38	Numeric	8
Return Line 24	Delinquent payment penalty	Line 52	Position(s) 31-38	Numeric	8
Return Line 25	Additional donation to The Military Family Assistance Fund	Line 54	Position(s) 31-38	Numeric	8
Return Line 26	Total amount due	Line 56	Position(s) 31-38	Numeric	8
Column 2 (Franchise Tax)					
Return Line 10	Tax liability after priority 1 credits	Line 10	Position(s) 49-56	Numeric	8
Return Line 11B	Refundable credits from Schedule RC-P2	Line 16	Position(s) 49-56	Numeric	8
Return Line 12	Total priority 2 credits	Line 18	Position(s) 49-56	Numeric	8
Return Line 13	Tax liability after priority 2 credits	Line 20	Position(s) 49-56	Numeric	8
Return Line 14	Overpayment after priority 2 credits	Line 22	Position(s) 49-56	Numeric	8
Return Line 15	Nonrefundable credits from Schedule NRC-P3	Line 24	Position(s) 49-56	Numeric	8
Return Line 16	Tax liability after priority 3 credits	Line 26	Position(s) 49-56	Numeric	8
Return Line 17A	Overpayment after priority 2 credits	Line 28	Position(s) 49-56	Numeric	8
Return Line 17B	Refundable credits from Schedule RC-P4	Line 30	Position(s) 49-56	Numeric	8
Return Line 17C	Credit carryforward from prior year return	Line 32	Position(s) 49-56	Numeric	8
Return Line 17E	Payment made with extension	Line 36	Position(s) 49-56	Numeric	8
Return Line 17F	Total refundable credits and payments	Line 38	Position(s) 49-56	Numeric	8
Return Line 18	Overpayment	Line 40	Position(s) 49-56	Numeric	8
Return Line 19	Tax due	Line 42	Position(s) 49-56	Numeric	8
Return Line 20	Amount of income tax overpayment applied to franchise tax	Line 44	Position(s) 49-56	Numeric	8
Return Line 21	Net tax due	Line 46	Position(s) 49-56	Numeric	8
Return Line 22	Interest	Line 48	Position(s) 49-56	Numeric	8
Return Line 23	Delinquent filing penalty	Line 50	Position(s) 49-56	Numeric	8
Return Line 24	Delinquent payment penalty	Line 52	Position(s) 49-56	Numeric	8
Return Line 25	Additional donation to The Military Family Assistance Fund	Line 54	Position(s) 49-56	Numeric	8
Return Line 26	Total amount due	Line 56	Position(s) 49-56	Numeric	8
Column 3 (Total)					
Return Line 16	Tax liability after priority 3 credits	Line 26	Position(s) 67-75	Numeric	9
Return Line 18	Overpayment	Line 40	Position(s) 67-75	Numeric	9
Return Line 26	Total amount due	Line 56	Position(s) 67-75	Numeric	9

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

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

Reference Points (5): 1 positioned on Line 10 in Position 27.
1 positioned on Line 10 in Position 80.
1 positioned on Line 16 in Position 80.
1 positioned on Line 61 in Position 26.
1 positioned on Line 61 in Position 80.

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

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

Document Identification Number: The document identification number (22043) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Return (Page 2)				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######–###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Column 2 (Franchise Tax)				
Return Line 27	Net overpayment	Line 10 Position(s) 49-56	Numeric	8
Column 3 (Total)				
Return Line 27	Net overpayment	Line 10 Position(s) 67-75	Numeric	9
Return Line 28	Amount of overpayment donated to The Military Family Assistance Fund	Line 12 Position(s) 67-75	Numeric	9
Return Line 29	Amount of overpayment to be refunded	Line 14 Position(s) 67-75	Numeric	9
Return Line 30	Amount of overpayment to be credited to 2019	Line 16 Position(s) 67-75	Numeric	9
Declaration and Signature(s) of Officer/Preparer				
Paid Preparer's ID	Social Security Number, PTIN, or FEIN of Paid Preparer	Line 54 Position(s) 64-72	Alphanumeric	9

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

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

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

Document Identification Number: The document identification number (22044) must be printed as specified on Page 2 of this document and positioned on Line 63 in Positions 76-80.

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

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

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

Reference Points (6):   1 positioned on Line 11 in Position 51.
1 positioned on Line 21 in Position 51.
1 positioned on Line 39 in Position 46.
1 positioned on Line 47 in Position 46.
1 positioned on Line 61 in Position 27.
1 positioned on Line 61 in Position 80.

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

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

Document Identification Number: The document identification number (22045) 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 following criteria:

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

Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Printed Variable Data Fields – CIFT-620-2D Schedules NRC-P1 and RC-P4					
Schedule NRC-P1 (Nonrefundable Priority 1 Tax Credits)				
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Nonrefundable Priority 1 Tax Credit **Code** (Line 1)		Line 11 Position(s) 55-57	Numeric	3
Nonrefundable Priority 1 Tax Credit **Code** (Line 2)		Line 13 Position(s) 55-57	Numeric	3
Nonrefundable Priority 1 Tax Credit **Code** (Line 3)	Enter 3-digit credit code. If not applicable, leave blank.	Line 15 Position(s) 55-57	Numeric	3
Nonrefundable Priority 1 Tax Credit **Code** (Line 4)		Line 17 Position(s) 55-57	Numeric	3
Nonrefundable Priority 1 Tax Credit **Code** (Line 5)		Line 19 Position(s) 55-57	Numeric	3
Nonrefundable Priority 1 Tax Credit **Code** (Line 6)		Line 21 Position(s) 55-57	Numeric	3
Printed Variable Data Fields – CIFT-620-2D Schedule NRC-P1 and RC-P4 – continued					

Field Name	Comments	Exact Placement on Grid		Field Type	Field Length
Schedule NRC-P1 (Nonrefundable Priority 1 Tax Credits) – continued					
NRC-P1 Amount Claimed Against **Income** Tax (Line 1)		Line 11	Position(s) 61-68	Numeric	8
NRC-P1 Amount Claimed Against **Income** Tax (Line 2)		Line 13	Position(s) 61-68	Numeric	8
NRC-P1 Amount Claimed Against **Income** Tax (Line 3)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 15	Position(s) 61-68	Numeric	8
NRC-P1 Amount Claimed Against **Income** Tax (Line 4)		Line 17	Position(s) 61-68	Numeric	8
NRC-P1 Amount Claimed Against **Income** Tax (Line 5)		Line 19	Position(s) 61-68	Numeric	8
NRC-P1 Amount Claimed Against **Income** Tax (Line 6)		Line 21	Position(s) 61-68	Numeric	8
Total NRC-P1 Income Tax Credits (Line 7)	Add credit amounts claimed against Income Tax (Column A, Lines 1-6).	Line 23	Position(s) 61-68	Numeric	8
NRC-P1 Amount Claimed Against **Franchise** Tax (Line 1)		Line 11	Position(s) 70-77	Numeric	8
NRC-P1 Amount Claimed Against **Franchise** Tax (Line 2)		Line 13	Position(s) 70-77	Numeric	8
NRC-P1 Amount Claimed Against **Franchise** Tax (Line 3)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 15	Position(s) 70-77	Numeric	8
NRC-P1 Amount Claimed Against **Franchise** Tax (Line 4)		Line 17	Position(s) 70-77	Numeric	8
NRC-P1 Amount Claimed Against **Franchise** Tax (Line 5)		Line 19	Position(s) 70-77	Numeric	8
NRC-P1 Amount Claimed Against **Franchise** Tax (Line 6)		Line 21	Position(s) 70-77	Numeric	8
Total NRC-P1 Franchise Tax Credits (Line 8)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-6).	Line 25	Position(s) 70-77	Numeric	8
Schedule RC-P4 (Refundable Priority 4 Tax Credits)					
Refundable Priority 4 Tax Credit **Code** (Line1)		Line 39	Position(s) 50-52	Alphanumeric	3
Refundable Priority 4 Tax Credit **Code** (Line 2)		Line 41	Position(s) 50-52	Alphanumeric	3
Refundable Priority 4 Tax Credit **Code** (Line 3)	Enter 3-character credit code. If not applicable, leave blank.	Line 43	Position(s) 50-52	Alphanumeric	3
Refundable Priority 4 Tax Credit **Code** (Line 4)		Line 45	Position(s) 50-52	Alphanumeric	3
Refundable Priority 4 Tax Credit **Code** (Line 5)		Line 47	Position(s) 50-52	Alphanumeric	3
RC-P4 Amount Claimed Against **Income** Tax (Line 1)		Line 39	Position(s) 56-63	Numeric	8
RC-P4 Amount Claimed Against **Income** Tax (Line 2)		Line 41	Position(s) 56-63	Numeric	8
RC-P4 Amount Claimed Against **Income** Tax (Line 3)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 43	Position(s) 56-63	Numeric	8
RC-P4 Amount Claimed Against **Income** Tax (Line 4)		Line 45	Position(s) 56-63	Numeric	8
RC-P4 Amount Claimed Against **Income** Tax (Line 5)		Line 47	Position(s) 56-63	Numeric	8
Total RC-P4 Income Tax Credits (Line 6)	Add credit amounts claimed against Income Tax (Column A, Lines 1-5).	Line 49	Position(s) 56-63	Numeric	8

Printed Variable Data Fields – CIFT-620-2D Schedule NRC-P1 and RC-P4 – continued				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Schedule RC-P4 (Refundable Priority 4 Tax Credits) – continued				
RC-P4 Amount Claimed Against **Franchise** Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 39 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against **Franchise** Tax (Line 2)		Line 41 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against **Franchise** Tax (Line 3)		Line 43 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against **Franchise** Tax (Line 4)		Line 45 Position(s) 69-76	Numeric	8
RC-P4 Amount Claimed Against **Franchise** Tax (Line 5)		Line 47 Position(s) 69-76	Numeric	8
Total RC-P4 Franchise Tax Credits (Line 7)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-5).	Line 51 Position(s) 69-76	Numeric	8

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

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

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

Reference Points (5): 1 positioned on Line 11 in Position 47.
1 positioned on Line 21 in Position 47.
1 positioned on Line 36 in Position 46.
1 positioned on Line 61 in Position 26.
1 positioned on Line 61 in Position 80.

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

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

Document Identification Number: The document identification number (22046) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule NRC-P3				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Part I – Nontransferable				
Nonrefundable Priority 3 Tax Credit **Code** (Line 1)	Enter 3-digit credit code. If not applicable, leave blank.	Line 11 Position(s) 50-52	Numeric	3
Nonrefundable Priority 3 Tax Credit **Code** (Line 2)		Line 13 Position(s) 50-52	Numeric	3
Nonrefundable Priority 3 Tax Credit **Code** (Line 3)		Line 15 Position(s) 50-52	Numeric	3
Nonrefundable Priority 3 Tax Credit **Code** (Line 4)		Line 17 Position(s) 50-52	Numeric	3
Nonrefundable Priority 3 Tax Credit **Code** (Line 5)		Line 19 Position(s) 50-52	Numeric	3
Nonrefundable Priority 3 Tax Credit **Code** (Line 6)		Line 21 Position(s) 50-52	Numeric	3
Printed Variable Data Fields – CIFT-620-2D Schedule NRC-P3 – continued				

Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Part I – Nontransferable – continued				
NRC-P3 Amount Claimed Against **Income** Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 11 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Income** Tax (Line 2)		Line 13 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Income** Tax (Line 3)		Line 15 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Income** Tax (Line 4)		Line 17 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Income** Tax (Line 5)		Line 19 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Income** Tax (Line 6)		Line 21 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 11 Position(s) 69-76	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 2)		Line 13 Position(s) 69-76	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 3)		Line 15 Position(s) 69-76	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 4)		Line 17 Position(s) 69-76	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 5)		Line 19 Position(s) 69-76	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 6)		Line 21 Position(s) 69-76	Numeric	8
Part II – Transferable				
Transferable, Nonrefundable Priority 3 Tax Credit **Code** (Line 7)	Enter 3-digit credit code. If not applicable, leave blank.	Line 36 Position(s) 50-52	Numeric	3
Transferable, Nonrefundable Priority 3 Tax Credit **Code** (Line 8)		Line 40 Position(s) 50-52	Numeric	3
Transferable, Nonrefundable Priority 3 Tax Credit **Code** (Line 9)		Line 44 Position(s) 50-52	Numeric	3
NRC-P3 Amount Claimed Against **Income** Tax (Line 7)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 36 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Income** Tax (Line 8)		Line 40 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Income** Tax (Line 9)		Line 44 Position(s) 56-63	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 7)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 36 Position(s) 69-76	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 8)		Line 40 Position(s) 69-76	Numeric	8
NRC-P3 Amount Claimed Against **Franchise** Tax (Line 9)		Line 44 Position(s) 69-76	Numeric	8

Printed Variable Data Fields – CIFT-620-2D Schedule NRC-P3 – continued				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Part II – Transferable – continued				
LDR State Certification Number (Line 7A)	Enter the LDR State Certification Number from Form R-6135.	Line 38 Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 8A)		Line 42 Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 9A)		Line 46 Position(s) 9-34	Alphanumeric	26
Total NRC-P3 Income Tax Credits (Line 10)	Add credit amounts claimed against Income Tax (Column A, Lines 1-9).	Line 48 Position(s) 56-63	Numeric	8
Total NRC-P3 Franchise Tax Credits (Line 11)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-9).	Line 50 Position(s) 69-76	Numeric	8

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

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

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

Reference Points (6): 1 positioned on Line 10 in Position 46.
1 positioned on Line 18 in Position 46.
1 positioned on Line 25 in Position 46.
1 positioned on Line 41 in Position 46.
1 positioned on Line 61 in Position 26.
1 positioned on Line 61 in Position 80.

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

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

Document Identification Number: The document identification number (22047) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule RC-P2				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Part I – Nontransferable				
Refundable Priority 2 Tax Credit **Code** (Line 1)	Enter 3-digit credit code. If not applicable, leave blank.	Line 10 Position(s) 50-52	Numeric	3
Refundable Priority 2 Tax Credit **Code** (Line 2)		Line 12 Position(s) 50-52	Numeric	3
Refundable Priority 2 Tax Credit **Code** (Line 3)		Line 14 Position(s) 50-52	Numeric	3
Refundable Priority 2 Tax Credit **Code** (Line 4)		Line 16 Position(s) 50-52	Numeric	3
Refundable Priority 2 Tax Credit **Code** (Line 5)		Line 18 Position(s) 50-52	Numeric	3

Field Name	Comments	Exact Placement on Grid		Field Type	Field Length
Printed Variable Data Fields – CIFT-620-2D Schedule RC-P2 – continued					
Part I – Nontransferable – continued					
RC-P2 Amount Claimed Against **Income** Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 10	Position(s) 56-63	Numeric	8
RC-P2 Amount Claimed Against **Income** Tax (Line 2)		Line 12	Position(s) 56-63	Numeric	8
RC-P2 Amount Claimed Against **Income** Tax (Line 3)		Line 14	Position(s) 56-63	Numeric	8
RC-P2 Amount Claimed Against **Income** Tax (Line 4)		Line 16	Position(s) 56-63	Numeric	8
RC-P2 Amount Claimed Against **Income** Tax (Line 5)		Line 18	Position(s) 56-63	Numeric	8
RC-P2 Amount Claimed Against **Franchise** Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.	Line 10	Position(s) 69-76	Numeric	8
RC-P2 Amount Claimed Against **Franchise** Tax (Line 2)		Line 12	Position(s) 69-76	Numeric	8
RC-P2 Amount Claimed Against **Franchise** Tax (Line 3)		Line 14	Position(s) 69-76	Numeric	8
RC-P2 Amount Claimed Against **Franchise** Tax (Line 4)		Line 16	Position(s) 69-76	Numeric	8
RC-P2 Amount Claimed Against **Franchise** Tax (Line 5)		Line 18	Position(s) 69-76	Numeric	8
Part II – Transferable					
Transferable, Refundable Priority 3 Tax Credit **Code** (Line 6)	Enter 3-character credit code. If not applicable, leave blank.	Line 25	Position(s) 50-52	Alphanumeric	3
Transferable, Refundable Priority 3 Tax Credit **Code** (Line 7)		Line 29	Position(s) 50-52	Alphanumeric	3
Transferable, Refundable Priority 3 Tax Credit **Code** (Line 8)		Line 33	Position(s) 50-52	Alphanumeric	3
RC-P2 Amount Claimed Against **Income** Tax (Line 6)	Enter amount of allowable credit claimed against corporation income tax in Column A.	Line 25	Position(s) 56-63	Numeric	8
RC-P2 Amount Claimed Against **Income** Tax (Line 7)		Line 29	Position(s) 56-63	Numeric	8
RC-P2 Amount Claimed Against **Income** Tax (Line 8)		Line 33	Position(s) 56-63	Numeric	8
LDR State Certification Number (Line 6A)	Enter the LDR State Certification Number from Form R-6135.	Line 27	Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 7A)		Line 31	Position(s) 9-34	Alphanumeric	26
LDR State Certification Number (Line 8A)		Line 35	Position(s) 9-34	Alphanumeric	26

Printed Variable Data Fields – CIFT-620-2D Schedule RC-P2 – continued				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Part II – Transferable – continued				
Total RC-P2 Income Tax Credits (Line 9)	Add credit amounts claimed against Income Tax (Column A, Lines 1-8).	Line 37 Position(s) 56-63	Numeric	8
Total RC-P2 Franchise Tax Credits (Line 10)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-5).	Line 39 Position(s) 69-76	Numeric	8

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

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

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

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

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

Document Identification Number: The document identification number (22050) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule A				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Schedule A- Line 1 Yes	At the end of the tax year, did you directly or indirectly own 50% or more of the voting stock of any corporation or an interest of any partnership, including any entity treated as a corporation or partnership? 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 10 Position(s) 54	Alpha	1
Schedule A- Line 1 No	At the end of the tax year, did you directly or indirectly own 50% or more of the voting stock of any corporation or an interest of any partnership, including any entity treated as a corporation or partnership? 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 13 Position(s) 54	Alpha	1
Line 1(1)	Federal Employer Identification Number	Line 10 Position(s) 61-70	Numeric w hyphen	10
Line 1(1)	Percentage	Line 10 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(2)	Federal Employer Identification Number	Line 12 Position(s) 61-70	Numeric w hyphen	10
Line 1(2)	Percentage	Line 12 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(3)	Federal Employer Identification Number	Line 13 Position(s) 61-70	Numeric w hyphen	10
Line 1(3)	Percentage	Line 13 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(4)	Federal Employer Identification Number	Line 15 Position(s) 61-70	Numeric w hyphen	10
Line 1(4)	Percentage	Line 15 Position(s) 74-79	Numeric(w/Decimal)	6
Line 1(5)	Federal Employer Identification Number	Line 16 Position(s) 61-70	Numeric w hyphen	10
Line 1(5)	Percentage	Line 16 Position(s) 74-79	Numeric(w/Decimal)	6
Schedule A- Line 2 Yes	At the end of the tax year, did any corporation, individual, partnership, trust, or association directly or indirectly own 50% or more of your voting stock? Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 19 Position(s) 54	Alpha	1

	Printed Variable Data Fields – CIFT-620-2D Schedule A – continued			
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Schedule A- Line 2 No	At the end of the tax year, did any corporation, individual, partnership, trust, or association directly or indirectly own 50% or more of your voting stock? Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 22 Position(s) 54	Alpha	1
Line 2(1)	Federal Employer Identification Number	Line 19 Position(s) 61-70	Numeric w hyphen	10
Line 2(1)	Percentage	Line 19 Position(s) 74-79	Numeric(w/Decimal)	6
Line 2(2)	Federal Employer Identification Number	Line 20 Position(s) 61-70	Numeric w hyphen	10
Line 2(2)	Percentage	Line 20 Position(s) 74-79	Numeric(w/Decimal)	6
Line 2(3)	Federal Employer Identification Number	Line 22 Position(s) 61-70	Numeric w hyphen	10
Line 2(3)	Percentage	Line 22 Position(s) 74-79	Numeric(w/Decimal)	6
Line 2(4)	Federal Employer Identification Number	Line 23 Position(s) 61-70	Numeric w hyphen	10
Line 2(4)	Percentage	Line 23 Position(s) 74-79	Numeric(w/Decimal)	6
Line 2(5)	Federal Employer Identification Number	Line 25 Position(s) 61-70	Numeric w hyphen	10
Line 2(5)	Percentage	Line 25 Position(s) 74-79	Numeric(w/Decimal)	6
Schedule A- Line 3 Yes	If you answered yes to Line I on CIFT 620, list the FEIN of five of those entities. Also, attach a schedule listing the names, addresses FEIN of all entities.

Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. | Line 28   Position(s) 54 | Alpha | 1 |
| Schedule A- Line 3 No | If you answered No to Line I on CIFT 620, list the FEIN of five of those entities. Also, attach a schedule listing the names, addresses FEIN of all entities.

Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. | Line 31   Position(s) 54 | Alpha | 1 |
Line 3(1)	Federal Employer Identification Number	Line 27 Position(s) 61-70	Numeric w hyphen	10
Line 3(1)	Percentage	Line 27 Position(s) 74-79	Numeric(w/Decimal)	6
Line 3(2)	Federal Employer Identification Number	Line 29 Position(s) 61-70	Numeric w hyphen	10
Line 3(2)	Percentage	Line 29 Position(s) 74-79	Numeric(w/Decimal)	6
Line 3(3)	Federal Employer Identification Number	Line 31 Position(s) 61-70	Numeric w hyphen	10
Line 3(3)	Percentage	Line 31 Position(s) 74-79	Numeric(w/Decimal)	6

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

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

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

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

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

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

Document Identification Number: The document identification number (22051) 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 following criteria:

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

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

	Printed Variable Data Fields – CIFT-620-2D Schedule C (continued)			
Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
Line 5	Stock and Obligation Assets- Beginning of Year	Line 19 Position(s) 27-38	Numeric	12
Line 5	Stock and Obligation Assets- End of Year	Line 19 Position(s) 41-52	Numeric	12
Line 6	Other Investments- Beginning of Year	Line 21 Position(s) 27-38	Numeric	12
Line 6	Other Investments- End of Year	Line 21 Position(s) 41-52	Numeric	12
Line 7	Loans to Stockholders- Beginning of Year	Line 23 Position(s) 27-38	Numeric	12
Line 7	Loans to Stockholders- End of Year	Line 23 Position(s) 41-52	Numeric	12
Line 8	Other Intangible Assets- Beginning of Year	Line 25 Position(s) 27-38	Numeric	12
Line 8	Other Intangible Assets- End of Year	Line 25 Position(s) 41-52	Numeric	12
(Line 9)	Accumulated Depreciation- Beginning of Year	Line 27 Position(s) 27-38	Numeric	12
(Line 9)	Accumulated Depreciation- End of Year	Line 27 Position(s) 41-52	Numeric	12
Line 10	Accumulated Depreciation Add Line 1-9	Line 29 Position(s) 27-38	Numeric	12
Line 10	Accumulated Depreciation Add Line 1-9	Line 29 Position(s) 41-52	Numeric	12
Real and Tangible Assets- Located Everywhere				
Line 11	Inventories- Beginning of Year	Line 32 Position(s) 27-38	Numeric	12
Line 11	Inventories- End of Year	Line 32 Position(s) 41-52	Numeric	12
Line 12	Blds, and other depreciable Assets- Beginning of Year	Line 34 Position(s) 27-38	Numeric	12
Line 12	Blds, and other depreciable Assets- End of Year	Line 34 Position(s) 41-52	Numeric	12
(Line 13)	Accumulated Depreciation- Beginning of Year	Line 36 Position(s) 27-38	Numeric	12
(Line 13)	Accumulated Depletion- End of Year	Line 36 Position(s) 41-52	Numeric	12
Line 14	Depletable Assets- Beginning of Year	Line 38 Position(s) 27-38	Numeric	12
Line 14	Depletable Assets- Beginning of Year	Line 38 Position(s) 41-52	Numeric	12
(Line 15)	Accumulated Depletion- Beginning of Year	Line 40 Position(s) 27-38	Numeric	12
(Line 15)	Accumulated Depletion- End of Year	Line 40 Position(s) 41-52	Numeric	12
Line 16	Land- Beginning of Year	Line 42 Position(s) 27-38	Numeric	12
Line 16	Land- End of Year	Line 42 Position(s) 41-52	Numeric	12
Line 17	Other Real and Tangible Assets- Beginning of Year	Line 44 Position(s) 27-38	Numeric	12
Line 17	Other Real and Tangible Assets - End of Year	Line 44 Position(s) 41-52	Numeric	12
Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets- Beginning of Year	Line 46 Position(s) 27-38	Numeric	12
Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets- End of Year	Line 46 Position(s) 41-52	Numeric	12
Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- Beginning of Year	Line 48 Position(s) 27-38	Numeric	12
Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- End of Year	Line 48 Position(s) 41-52	Numeric	12
Line 20	Less real and tangible assets not used in production of net apportionable income- Beginning of Year	Line 50 Position(s) 27-38	Numeric	12
Line 20	Less real and tangible assets not used in production of net apportionable income- End of Year	Line 50 Position(s) 41-52	Numeric	12

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

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

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

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

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

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

Document Identification Number: The document identification number (22052) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule D				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Line 1A.	Total- Gross Receipts	Line 10 Position(s) 28-39	Numeric	12
Line 1B	Total- Less returns and allowances	Line 12 Position(s) 28-39	Numeric	12
Line 1C.	Balance, Subtract Line 1B from Line 1A	Line 14 Position(s) 28-39	Numeric	12
Line 2	Less: Cost of goods sold and/ or operations- Attach Schedule	Line 16 Position(s) 28-39	Numeric	12
Line 3	Gross Profit- Subtract Line 2 from Line 1C	Line 18 Position(s) 28-39	Numeric	12

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

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

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

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

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

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

Document Identification Number: The document identification number (22053) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule E				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Schedule E- Reconciliation of Income Per Books with Income Per Return				
Line 1	Net income per books	Line 8 Position(s) 31-42	Numeric	12
Line 2	Louisiana Income Tax	Line 10 Position(s) 31-42	Numeric	12
Line 3	Excess of Capital Loss over Capital Gains	Line 12 Position(s) 31-42	Numeric	12
Line 4	Taxable Income not recorded on books this year, but not deducted in this return:	Line 14 Position(s) 31-42	Numeric	12
Line 5 Expenses Recorded on books this year				
Line 5a	Depreciation	Line 18 Position(s) 31-42	Numeric	12
Line 5b	Depletion	Line 20 Position(s) 31-42	Numeric	12
Line 5c	Other	Line 22 Position(s) 31-42	Numeric	12
Line 6	Total- Add Line 1 through 5c	Line 8 Position(s) 69-80	Numeric	12

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

Printed Variable Data Fields – CIFT-620-2D Schedule G -Continues				
Field Name	**Comments**		**Field Type**	**Field Length**
Liabilities and Capital from Balance Sheet- End of Year				
Line 1, Col 2	Accounts Payable	Line 27 Position(s) 67-78	Numeric	12
Line 2, Col 2	Mortgages, notes, and bonds payable one year old or less at balance sheet date and having a maturity of one year or less from original date incurred	Line 29 Position(s) 67-78	Numeric	12
Line 3, Col 2	Other current liabilities	Line 31 Position(s) 67-78	Numeric	12
Line 4, Col 2	Loans from stockholders	Line 33 Position(s) 67-78	Numeric	12
Line 5, Col 2	Due to subsidiaries and affiliates	Line 35 Position(s) 67-78	Numeric	12
Line 6, Col 2	Mortgages, notes, and bonds payable more than one year old at balance sheet date or having a maturity of more than one year from original date incurred	Line 37 Position(s) 67-78	Numeric	12
Line 7, Col 2	Other liabilities	Line 39 Position(s) 67-78	Numeric	12
Line 8, Col 2	Capital stock: a. Preferred Stock	Line 41 Position(s) 67-78	Numeric	12
Line 8, Col 2	Capital stock: a. Common Stock	Line 43 Position(s) 67-78	Numeric	12
Line 9, Col 2	Paid-in or capital surplus	Line 45 Position(s) 67-78	Numeric	12
Line 10, Col 2	Surplus reserves	Line 47 Position(s) 67-78	Numeric	12
Line 11, Col 2	Earned surplus and undivided profits	Line 49 Position(s) 67-78	Numeric	12
Line 12, Col 2	Excessive reserves or undervalued assets	Line 51 Position(s) 67-78	Numeric	12
Line 13, Col 2	Total- Add Lines 1 through 12.	Line 53 Position(s) 67-78	Numeric	12

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

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

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

- 1/2" from the left edge, and
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Document Identification Number: The document identification number (22054) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule F				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Schedule F Reconciliation of Federal and Louisiana Net Income				
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Line 1, Col 1	Enter the total net income calculated under federal law before special deductions	Line 12 Position(s) 67-78	Numeric	12
Line 2 Additions to Federal Net Income				
Line 2a, Col 1	Louisiana income Tax	Line 16 Position(s) 67-78	Numeric	12
Line 2b, Col 1	Related Members, interest\ intangible\management fee expenses or cost. From Form R- 6950	Line 18 Position(s) 67-78	Numeric	12
Line 2c, Col 1	Donation to School Tuition Organization Credit	Line 20 Position(s) 67-78	Numeric	12
Line 2d, Col 1	Other Additions.	Line 22 Position(s) 67-78	Numeric	12
Line 2e, Col 1	Total Additions- Add Line 2a through 2d.	Line 24 Position(s) 67-78	Numeric	12

Printed Variable Data Fields – CIFT-620-2D Schedule F- Continues				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Subtractions from Federal Net Income				
Line 3a , Col 1	Bank Dividends	Line 28 Position(s) 67-78	Numeric	12
Line 3b, Col 1	All other Dividends	Line 30 Position(s) 67-78	Numeric	12
Line 3c, Col 1	Interest	Line 32 Position(s) 67-78	Numeric	12
Line 3d, Col 1	Road Home- The amount included in federal taxable income	Line 34 Position(s) 67-78	Numeric	12
Line 3e, Col 1	LA depletion in excess federal depletion	Line 36 Position(s) 67-78	Numeric	12
Line 3f, Col 1	Expenses not deducted on the federal return due to IRS Code Section 280C	Line 38 Position(s) 67-78	Numeric	12
Line 3g, Col 1	Exempt amount of related members interest\intangible\management fee expenses or costs, From Form R- 6950	Line 40 Position(s) 67-78	Numeric	12
Line 3h, Col 1	Compensation for Disaster Services	Line 42 Position(s) 67-78	Numeric	12
Line 3i, Col 1	Act 123 recovery (see instructions)	Line 44 Position(s) 67-78	Numeric	12
Line 3j, Col 1	Expenses NOT Deducted	Line 46 Position(s) 67-78	Numeric	12
Line 3k, Col 1	Other Subtractions	Line 48 Position(s) 67-78	Numeric	12
Line 3l, Col 1	Total Subtractions			
Line 4	Louisiana Net Income from All Sources- This amount should agree with Schedule D, Line 25	Line 50 Position(s) 67-78	Numeric	12

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

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

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

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

Document Identification Number: The document identification number (22055) 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 following criteria:

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

Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
**Printed Variable Data Fields – CIFT-620-2D Schedule G1**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
G-1 Computation of Franchise Tax Base				
Line 1A	Common Stock- Include paid – in or Capital Surplus	Line 13 Position(s) 66-77	Numeric	12
Line 1B	Preferred Stock- Include paid in or Capital Surplus	Line 15 Position(s) 66-77	Numeric	12
Line 2	Add Line 1A and 1B	Line 17 Position(s) 66-77	Numeric	12
Line 3	Surplus and Undivided Profits	Line 19 Position(s) 66-77	Numeric	12
Line 4	Surplus Reserves- include any excessive reserves or undervalued assets	Line 21 Position(s) 66-77	Numeric	12
Line 5	Total Add Lines 2,3, and 4	Line 23 Position(s) 66-77	Numeric	12

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

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

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

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

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

Document Identification Number: The document identification number (22056) 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 following criteria:

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

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

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

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

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

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

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

Document Identification Number: The document identification number (22057) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule I				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Line 1 Net sales of merchandise, charges for services, and other revenues				
Line 1A	Net sales of merchandise- Total Amount	Line 12 Position(s) 43-54	Numeric	12
Line 1A	Net Sales- Louisiana Amount	Line 12 Position(s) 56-67	Numeric	12
Line 1B	Charges for Services- Total Amount	Line 14 Position(s) 43-54	Numeric	12
Line 1B	Charges for services- LA Amount	Line 14 Position(s) 56-67	Numeric	12
Line 1Ci	Other Revenues- Rents and Royalties- Total Amount	Line 18 Position(s) 43-54	Numeric	12
Line 1Ci	Other Revenues- Rents and Royalties- LA Amount	Line 18 Position(s) 56-67	Numeric	12
Lin e1Cii	Other Revenues- Dividends and Interest- Total Amount	Line 20 Position(s) 43-54	Numeric	12
Line 1Cii	Other Revenues- Dividends and Interest- LA Amount	Line 20 Position(s) 56-67	Numeric	12
Line 1Ciii	Other Dividends and Interest- Total Amount	Line 22 Position(s) 43-54	Numeric	12
Line 1Ciii	Other Dividends and Interest- LA Amount	Line 22 Position(s) 56-67	Numeric	12

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

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

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

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

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

Document Identification Number: The document identification number (22058) 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 following criteria:

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

Field Name	Comments	Exact Placement on Grid	Field Type	Field Length
**Printed Variable Data Fields – CIFT-620-2D Schedule J- Calculation of Income Tax**
Louisiana Revenue Account Number	This field should be formatted as "#######-###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
**Schedule J- Calculation of Income Tax**
Line 1	Short Period Filers Checkbox Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable.	Line 8 Position(s) 17	Alpha	1
Line 1	Enter the amount of net taxable income from CIFT-620, Line 1E	Line 8 Position(s) 67-78	Numeric	12
Line 2a	First $25,000 of net taxable income – Net income in Each Bracket	Line 12 Position(s) 55-59	Numeric	5
Line 2a	First $25,000 of net taxable income- Tax	Line 12 Position(s) 67-78	Numeric	12

Printed Variable Data Fields – CIFT-620-2D Schedule J- Calculation of Income Tax- Continues

Field Name	Comments	Exact Placement on Grid		Field Type	Field Length
Line 2b	Next $25,000 – Net Income in Each Bracket	Line 14	Position(s) 55-59	Numeric	5
Line 2b	Next $25,000 – Tax	Line 14	Position(s) 67-78	Numeric	12
Line 2c	Next $50,000- Net Income in Each Bracket	Line 16	Position(s) 55-59	Numeric	5
Line 2c	Next $50,000- Tax	Line 16	Position(s) 67-78	Numeric	12
Line 2d	Next $100,000, - Net Income in Each Bracket	Line 18	Position(s) 55-60	Numeric	6
Line 2d	Next $100,000, - Tax	Line 18	Position(s) 67-78	Numeric	12
Line 2e	Next $200,000- Net Income in Each Bracket	Line 20	Position(s) 50-61	Numeric	12
Line 2e	Next $200,000- Tax	Line 20	Position(s) 67-78	Numeric	12
Line 3	Add amounts in Column 1, Line 2a through 2e and enter the result	Line 22	Position(s) 50-61	Numeric	12
Line 4	Add amounts in Column 2, Line 2a through 2e, Round to the nearest dollar. Enter the result in Column 2 and on CIFT-620, Line 2	Line 24	Position(s) 67-79	Numeric	13

Printed Variable Data Fields – CIFT-620-2D Schedule J-1 Pass Through Entity Tax

Line 1	Short Period Filers-Indicator Box	Line 28	Position(s) 18	Alpha	1
Line 1	Amount of Net Taxable Income from CIFT-620 1E	Line 28	Position(s) 67-79	Numeric	13
Line 2a; Column 1	Next $25,000 – Net Income in Each Bracket	Line 32	Position(s) 53-61	Numeric	9
Line 2a; Column 2	Next $25,000 – Tax	Line 32	Position(s) 67-79	Numeric	13
Line 2b	Next $50,000- Net Income in Each Bracket	Line 34	Position(s) 53-61	Numeric	9
Line 2b	Next $50,000- Tax	Line 34	Position(s) 67-79	Numeric	13
Line 2c	Next $100,000, - Net Income in Each Bracket	Line 36	Position(s) 53-61	Numeric	9
Line 2c	Next $100,000, - Tax	Line 36	Position(s) 67-79	Numeric	13
Line 3	Add amounts in Column 1, Lines 2a through 2c and enter the result.	Line 38	Position(s) 53-61	Numeric	9
Line 4	Add the amounts in Column 2, Lines 2a through 2c. Enter the amount in Column 2 and on CIFT-620, Line2.	Line 40	Position(s) 67-79	Numeric	13

Schedule K – Summary of Estimated Tax Payments

Field Name	Comments	Exact Placement on Grid		Field Type	Field Length
Line 1	Credit from Prior Year- Date This field should be formatted as "mmddyyyy".	Line 47	Position(s) 58-65	Numeric	8
Line 1	Credit from prior year return- Amount	Line 47	Position(s) 70-78	Numeric	9
Line 2	First Quarter Estimated Payment- Check Number	Line 49	Position(s) 46-54	Numeric	9
Line 2	Date -This field should be formatted as "mmddyyyy".	Line 49	Position(s) 58-65	Numeric	8
Line 2	First Quarter Estimated Payment- Amount	Line 49	Position(s) 70-78	Alpha	9

Line 3	Second quarter Estimated Payment- Check Number	Line51	Position(s) 46-54	Numeric	9
Line 3	Date- This field should be formatted as "mmddyyyy".	Line51	Position(s) 58-65	Numeric	8

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

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

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

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

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

Document Identification Number: The document identification number (22059) 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 following criteria:

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

Printed Variable Data Fields – CIFT-620-2D Schedule L Calculation of Franchise Tax				
Field Name	**Comments**	**Exact Placement on Grid**	**Field Type**	**Field Length**
Louisiana Revenue Account Number	This field should be formatted as "#######–###". NOTE: This is not the FEIN.	Line 4 Position(s) 70-80	Numeric (with hyphen)	11
Line 1	Short Period Check Box	Line 8 Position(s) 10	Alpha	1
Line 1	Enter the amount from CIFT-620, Line 5C or Line 6, whichever is greater	Line 8 Position(s) 67-78	Numeric	12
Line 2	Enter the amount of Line 1 or $300,000, whichever is less	Line 10 Position(s) 71-76	Numeric	6
Line 3	Multiply the amount on line 2 by $1.50 for each $1,000 or major fraction and enter the result	Line 12 Position(s) 72-74	Numeric	3
Line 4	Subtract Line 2 from Lin e1 and enter the result.	Line 14 Position(s) 67-78	Numeric	12
Line 5	Multiply the amount on line 4 by $3.00 for each $1,000 or major fraction and enter the result	Line 16 Position(s) 69-77	Numeric	9
Line 6	Add Lines 3 and 5. Round to the nearest dollar. Enter the result here and on CIFT-620, Line 7	Line 18 Position(s) 69-77	Numeric	9
Schedule M- Analysis of Schedule G, Line 11, Column 2				
Line 1	Balance at beginning of year	Line 21 Position(s) 24-35	Alpha	12
Line 2	Net Income Per Books	Line 23 Position(s) 24-35	Numeric	12
Line 3	Other increases- Attach Schedule	Line 25 Position(s) 24-35	Numeric	12
Line 4	Total – Add Line 1, 2, and 3	Line 27 Position(s) 24-35	Numeric	12
Line 5a	Distributions- Cash	Line 29 Position(s) 24-35	Numeric	12
Line 5b	Distributions- stock	Line 21 Position(s) 66-77	Numeric	12
Line 5c	Distributions- Property	Line 23 Position(s) 66-77	Numeric	12
Line 6	Other Decreases- Attach Schedule	Line 25 Position(s) 66-77	Numeric	12
Line 7	Total – Add Lines 5a through 6	Line 27 Position(s) 66-77	Numeric	12
Line 8	Balance at end of year- Subtract Line 7 from Line 4	Line 29 Position(s) 66-77	Numeric	12
Schedule N- Additional Information Required				
Line 1	Nature of Business Principal Products or Service in LA	Line 37 Position(s) 9-33	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service in LA	Line 39 Positions(s) 9-33	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service in LA	Line 41 Positions(s) 9-33	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service Elsewhere	Line 44 Position(s) 9-33	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service Elsewhere	Line 46 Position(s) 9-33	Alpha/Numeric	26
Line 1	Nature of Business Principal Products or Service Elsewhere	Line 48 Position(s) 9-33	Alpha/Numeric	26
Line 2	Date and State of Incorporation	Line 33 Position(s) 45-70	Numeric	13
Line 3	Parishes in which Property is located	Line 36 Position(s) 24-35	Alpha/Numeric	26
Line 3	Parishes in which Property is located	Line 38 Position(s) 24-35	Alpha/Numeric	26
Line 3	Parishes in which Property is located	Line 40 Position(s) 24-35	Alpha/Numeric	26

2-D Barcode Specifications: 2019 Corporate Income/Franchise Tax Return (CIFT-620)

Requirements: Page 4

Document Identification Number: The document identification number (22041) must be printed as specified on the **Exact Placement Specifications** section of this document and positioned on Line 63 in Positions 76-80.

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

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

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

Barcode Layout:

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

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

- **Header Version Number** will be incremented each time the standards group alters the physical structure of the barcodes that were created using multiple header formats. This value is static for all barcodes and is currently T1.

- **Developer Code** is a four-digit code used to identify the software developer whose application produced the barcode. The purpose of the field is to allow forms to be traced to the vendor producing them. Software developer codes are assigned through the NACTP and may differ from software developer ID for the form that is assigned by LDR.

- **Jurisdiction** is an alphanumeric identifier indicating the taxing jurisdiction. Use the U.S. Postal Service's official state abbreviations. For Louisiana, use LA.

- **Description** is an alphanumeric identifier used to describe the form being processed. Use 22041 for the Corporation Income and Franchise Return (CIFT-620-2D).

- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.

- **Software/Form Version** is a vendor-defined version number that reflects the software and form revision used to produce the barcode.

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

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

Example of 2-D Barcode: T1<CR>   (Header Version Number)
                                  9999<CR>   (Developer Code)
                                  LA<CR>   (Jurisdiction)
                                  6173<CR>   (Description)
                                  0<CR>   (Specification Version)
                                  1.0<CR>   (Software Version)
                                  …
                                  …
                                  …
                                  EOD<CR>

2-D Barcode Specifications for Form CIFT-620SD

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

Louisiana Corporate Income/Franchise Tax Return

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

2-D Barcode Sample

2-D Barcode Specifications for Form CIFT-620SD

2-D Barcode Fields for Form CIFT-620

Doc ids 22041- 22047, Schedule A, G, K, N

Field No.	Field Type	Field Length	Field Name	Comments
**Header Information**
1	Alphanumeric	2	Header Version	Value is **T1**.
2	Numeric	4	Developer Code	4-digit code (See Appendix 1 of the 2-D Bar Coding Standards.) used to identify the software developer whose application produced the barcode and may differ from the software developer ID in Field 7 below
3	Alpha	2	Jurisdiction	Value is **LA**.
4	Numeric	5	Description	Value is **22041**.
5	Numeric	1	Specification Version	Value is **0**.
6	Alphanumeric	10	Software/Form Version	Vendor-defined version number that reflects the software and form revision used to produce the barcode.
**Government Specific Data**
**CIFT-620 2D Return** (Page 1)
**CIFT -620 Corporation and Franchise Return   Page 1**

Field No.	Field Type	Max. Field Length	Field Name	Comments
7	Numeric	10	Louisiana Revenue Account Number	Louisiana Revenue Account Number NOTE: This is not the FEIN.
8	Binary	1	Calendar Year Check Box	Mark "1" for "Calendar Year Return)". Mark "0" if not applicable
9	Numeric	8	Income Tax Fiscal Year Beginning	This field should be formatted as "mmddyyyy".
10	Numeric	8	Income Tax Fiscal Year Ending	This field should be formatted as "mmddyyyy".
11	Numeric	8	Franchise Tax Fiscal Year Beginning	This field should be formatted as "mmddyyyy".
12	Numeric	8	Franchise Tax Fiscal Year Ending	This field should be formatted as "mmddyyyy".
13	Binary	1	Name Change Indicator	Mark "1" if name has changed. Mark "0" if not applicable.
14	Binary	1	Amended Return Indicator	Mark "1" for an amended return. Mark "0" if not applicable.
15	Binary	1	Franchise Tax Filing Not Required Indicator	Mark "1" for a Not required to file Franchise Tax. Mark "0" if not applicable
16	Binary	1	Income Tax Filing Not Required Indicator	Mark "1" for a Not required to file Income Tax. Mark "0" if not applicable
17	Binary	1	First-time Filing Indicator	Mark "1" for a First –Time Filing Indicator. Mark "0" if not applicable
18	Binary	1	2015 Legislation Recovery Indicator	Mark "1" for a Legislation Recovery Indicator. Mark "0" if not applicable
19	Binary	1	Final Return Indicator	Mark "1" for a Final Return Indicator. Mark "0" if not applicable
**Government Specific Data** (continued)

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

Government Specific Data (continued)

CIFT-620 2D Return (Page 1) Continued

Field No.	Field Type	Max. Field Length	Field Name	Comments
51	Numeric	12	Return Line 1C1	Loss Carryforward Utilized
52	Numeric	12	Return Line 1C2	Act 123 loss utilization recovery
53	Numeric	10	Return Line 1D	Federal Income Tax Deduction
54	Numeric	10	Return Line 1D1	Federal Disaster Relief Credits
55	Binary	1	Negative Indicator (Return Line 1E)	Mark "1" for "Negative Indicator Return Line IE- Yes". Mark "0" if not applicable
56	Numeric	11	Return Line 1E	Louisiana Taxable Income
57	Binary	1	Return Line 2	Mark "1" for "LA Income Tax". Mark "0" if not applicable
58	Numeric	9	Return Line 2	Louisiana Income Tax
59	Numeric	8	Return Line 3	Total Nonrefundable Income Tax Credits.
60	Numeric	8	Return Line 4	Income Tax after Nonrefundable Credits
61	Binary	1	Negative Indicator (Return Line 5A)	Mark "1" for "Negative Indicator Return Line 5A- Yes". Mark "0" if not applicable
62	Numeric	12	Return Line 5A	Total Capital Stock, Surplus, and Undivided Profits
63	Numeric	5	Return Line 5B	Franchise Tax Apportionment Percentage –
64	Binary	1	Negative Indicator (Return Line 5C)	Mark "1" for "Negative Indicator Return Line 5C- Yes". Mark "0" if not applicable
65	Numeric	11	Return Line 5C	Franchise Tax Base
66	Numeric	9	Return Line 6	Amount of Assessed Value of Real and Personal Property in Louisiana in 2015
67	Binary	1	Return Line 7	Mark "1" for "Louisiana Franchise Indicator". Mark "0" if not applicable
68	Numeric	8	Return Line 7	Louisiana Franchise Tax
69	Numeric	8	Return Line 8	Total Nonrefundable Franchise Tax Credits
70	Numeric	8	Return Line 9	Franchise Tax after Nonrefundable Credits
71	Numeric	4	Software Developer ID	Software Developer Identification Number (4-digit number) preapproved by LDR

Government Specific Data (continued)

CIFT- 620 2D Page 2

Field No.	Field Type	Max. Field Length	Field Name	Comments
Column 1 Income Tax				
72	Numeric	8	Return Line 10	Tax liability after priority 1 credits
73	Numeric	8	Return Line 11	Louisiana Citizens Insurance Assessment Paid
74	Numeric	8	Return Line 11A	Louisiana Citizens Insurance Credit
75	Numeric	8	Return Line 11B	Refundable credits from Schedule RC-P2
76	Numeric	8	Return Line 12	Total priority 2 credits
77	Numeric	8	Return Line 13	Tax liability after priority 2 credits
78	Numeric	8	Return Line 14	Overpayment after priority 2 credits
79	Numeric	8	Return Line 15	Nonrefundable credits from Schedule NRC-P3
80	Numeric	8	Return Line 16	Tax liability after priority 3 credits

2-D Barcode Specifications for Form CIFT-620SD

Field No.	Field Type	Max. Field Length	Field Name	Comments
81	Numeric	8	Return Line 17A	Overpayment after priority 2 credits
82	Numeric	8	Return Line 17B	Refundable credits from Schedule RC-P4
83	Numeric	8	Return Line 17C	Credit carryforward from prior year return
84	Numeric	8	Return Line 17D	Estimated payments
85	Numeric	8	Return Line 17E	Payment made with extension
86	Numeric	8	Return Line 17F	Total refundable credits and payments
87	Numeric	8	Return Line 18	Overpayment.
88	Numeric	8	Return Line 19	Tax due
89	Numeric	8	Return Line 22	Interest
90	Numeric	8	Return Line 23	Delinquent filing penalty
91	Numeric	8	Return Line 24	Delinquent payment penalty
92	Numeric	8	Return Line 25	Additional donation to The Military Family Assistance Fund
93	Numeric	8	Return Line 26	Total amount due
Column 2 Franchise Tax				
94	Numeric	8	Return Line 10	Tax liability after priority 1 credits
95	Numeric	8	Return Line 11B	Refundable credits from Schedule RC-P2**.**
96	Numeric	8	Return Line 12	Total priority 2 credits
97	Numeric	8	Return Line 13	Tax liability after priority 2 credits
98	Numeric	8	Return Line 14	Overpayment after priority 2 credits
99	Numeric	8	Return Line 15	Nonrefundable credits from Schedule NRC-P3
100	Numeric	8	Return Line 16	Tax liability after priority 3 credits
101	Numeric	8	Return Line 17A	Overpayment after priority 2 credits
102	Numeric	8	Return Line 17B	Refundable credits from Schedule RC-P4
103	Numeric	8	Return Line 17C	Credit carryforward from prior year return
104	Numeric	8	Return Line 17E	Payment made with extension
105	Numeric	8	Return Line 17F	Total refundable credits and payments
106	Numeric	8	Return Line 18	Overpayment
107	Numeric	8	Return Line 19	Tax due
108	Numeric	8	Return Line 20	Amount of income tax overpayment applied to franchise tax
109	Numeric	8	Return Line 21	Net tax due
110	Numeric	8	Return Line 22	Interest
111	Numeric	8	Return Line 23	Delinquent filing penalty
112	Numeric	8	Return Line 24	Delinquent payment penalty
113	Numeric	8	Return Line 25	Additional donation to The Military Family Assistance Fund
114	Numeric	8	Return Line 26	Total amount due
Column 3 (Total)				
115	Numeric	9	Return Line 16	Tax liability after priority 3 credits
116	Numeric	9	Return Line 18	Overpayment
117	Numeric	9	Return Line 26	Total amount due
CIFT-6202D Page 3				
Column 2 (Franchise Tax)				
Field No.	**Field Type**	**Max. Field Length**	**Field Name**	**Comments**
118	Numeric	8	Return Line 27, Column 2	Net overpayment
Column 3 (Total)				

2-D Barcode Specifications for Form CIFT-620SD

Field No.	Field Type	Max. Field Length	Field Name	Comments
119	Numeric	9	Return Line 27	Net overpayment
120	Numeric	9	Return Line 28	Amount of overpayment donated to The Military Family Assistance Fund.
121	Numeric	9	Return Line 29	Amount of overpayment to be refunded
122	Numeric	9	Return Line 30	Amount of overpayment to be credited to 2019
Declaration and Signature(s) of Officer/ Preparer				
123	Alphanumeric	9	Paid Preparer's ID	Social Security Number, PTIN, or FEIN of Paid Preparer

CIFT-6202D Schedule NRC-P1 and RC-P4 Page 5
Schedule NRC-P1 (Nonrefundable Priority 1 Tax Credits)

Field No.	Field Type	Max. Field Length	Field Name	Comments
124	Numeric	3	Nonrefundable Priority 1 Tax Credit **Code** (Line 1)	
125	Numeric	3	Nonrefundable Priority 1 Tax Credit **Code** (Line 2)	
126	Numeric	3	Nonrefundable Priority 1 Tax Credit **Code** (Line 3)	Enter 3-digit credit code. If not applicable, leave blank.
127	Numeric	3	Nonrefundable Priority 1 Tax Credit **Code** (Line 4)	
128	Numeric	3	Nonrefundable Priority 1 Tax Credit **Code** (Line 5)	
129	Numeric	3	Nonrefundable Priority 1 Tax Credit **Code** (Line 6)	
130	Numeric	8	NRC-P1 Amount Claimed Against **Income** Tax (Line 1)	Adjusted Overpayment – Return Line **36**
131	Numeric	8	NRC-P1 Amount Claimed Against **Income** Tax (Line 2)	
132	Numeric	8	NRC-P1 Amount Claimed Against **Income** Tax (Line 3)	Enter amount of allowable credit claimed against corporation income tax in Column
133	Numeric	8	NRC-P1 Amount Claimed Against **Income** Tax (Line 4)	
134	Numeric	8	NRC-P1 Amount Claimed Against **Income** Tax (Line 5)	A.
135	Numeric	8	NRC-P1 Amount Claimed Against **Income** Tax (Line 6)	

Schedule NRC-P-1 (Nonrefundable Priority 1 Tax Credits)- continued

Field No.	Field Type	Max. Field Length	Field Name	Comments
136	Numeric	8	Total NRC-P1 Income Tax Credits (Line 7)	Total Income Tax Credits
137	Numeric	8	NRC-P1 Amount Claimed Against **Franchise** Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
138	Numeric	8	NRC-P1 Amount Claimed Against **Franchise** Tax (Line 2)	

139	Numeric	8	NRC-P1 Amount Claimed Against **Franchise** Tax (Line 3)	
140	Numeric	8	NRC-P1 Amount Claimed Against **Franchise** Tax (Line 4)	
141	Numeric	8	NRC-P1 Amount Claimed Against **Franchise** Tax (Line 5)	
142	Numeric	8	NRC-P1 Amount Claimed Against **Franchise** Tax (Line 6)	
143	Numeric	8	Total NRC-P1 Franchise Tax Credits (Line 8)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-6).
Schedule RC-P4 (Refundable Priority Tax Credits				
144	Alphanumeric	3	Refundable Priority 4 Tax Credit **Code** (Line1)	Enter 3-character credit code. If not applicable, leave blank.
145	Alphanumeric	3	Refundable Priority 4 Tax Credit **Code** (Line 2)	
146	Alphanumeric	3	Refundable Priority 4 Tax Credit **Code** (Line 3)	
147	Alphanumeric	3	Refundable Priority 4 Tax Credit **Code** (Line 4)	
148	Alphanumeric	3	Refundable Priority 4 Tax Credit **Code** (Line 5)	
149	Numeric	8	RC-P4 Amount Claimed Against **Income** Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.
150	Numeric	8	RC-P4 Amount Claimed Against **Income** Tax (Line 2)	
151	Numeric	8	RC-P4 Amount Claimed Against **Income** Tax (Line 3)	
152	Numeric	8	RC-P4 Amount Claimed Against **Income** Tax (Line 4)	
153	Numeric	8	RC-P4 Amount Claimed Against **Income** Tax (Line 5)	
154	Numeric	8	Total RC-P4 Income Tax Credits (Line 6)	Add credit amounts claimed against Income Tax (Column A, Lines 1-5).
155	Numeric	8	RC-P4 Amount Claimed Against **Franchise** Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
156	Numeric	8	RC-P4 Amount Claimed Against **Franchise** Tax (Line 2)	
157	Numeric	8	RC-P4 Amount Claimed Against **Franchise** Tax (Line 3)	
158	Numeric	8	RC-P4 Amount Claimed Against **Franchise** Tax (Line 4)	
159	Numeric	8	RC-P4 Amount Claimed Against **Franchise** Tax (Line 5)	
160	Numeric	8	Total RC-P4 **Franchise** Tax Credits (Line 7)	

Schedule NRC-P3 (Refundable Priority Tax Credits) - Part 1- Nonrefundable Priority 3 Tax Credits   Page 6

Schedule RC-P3 (Refundable Priority Tax Credits) - Part 1- Nontransferable

Field No.	Field Type	Max. Field Length	Field Name	Comments
161	Numeric	3	Nonrefundable Priority 3 Tax Credit **Code** (Line 1)	Enter 3-digit credit code. If not applicable, leave blank.
162	Numeric	3	Nonrefundable Priority 3 Tax Credit **Code** (Line 2)	
163	Numeric	3	Nonrefundable Priority 3 Tax Credit **Code** (Line 3)	
164	Numeric	3	Nonrefundable Priority 3 Tax Credit **Code** (Line 4)	
165	Numeric	3	Nonrefundable Priority 3 Tax Credit **Code** (Line 5)	

2-D Barcode Specifications for Form CIFT-620SD

Field No.	Field Type	Max. Field Length	Field Name	Comments
166	Numeric	3	Nonrefundable Priority 3 Tax Credit **Code** (Line 6)	
167	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.
168	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 2)	
169	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 3)	
170	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 4)	
171	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 5)	
172	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 6)	
173	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
174	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 2)	
175	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 3)	
176	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 4)	
177	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 5)	
178	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 6)	

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

Field No.	Field Type	Max. Field Length	Field Name	Comments
179	Numeric	3	Transferable, Nonrefundable Priority 3 Tax Credit **Code** (Line 7)	
180	Numeric	3	Transferable, Nonrefundable Priority 3 Tax Credit **Code** (Line 8)	Enter 3-digit credit code. If not applicable, leave blank.
181	Numeric	3	Transferable, Nonrefundable Priority 3 Tax Credit **Code** (Line 9)	
182	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 7)	Enter amount of allowable credit claimed against corporation income tax in Column A.
183	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 8)	

2-D Barcode Specifications for Form CIFT-620SD

Field No.	Field Type	Max. Field Length	Field Name	Comments
184	Numeric	8	NRC-P3 Amount Claimed Against **Income** Tax (Line 9)	
185	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 7)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
186	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 8)	
187	Numeric	8	NRC-P3 Amount Claimed Against **Franchise** Tax (Line 9)	
188	Alphanumeric	26	LDR State Certification Number (Line 7A)	Enter the LDR State Certification Number from Form R-6135.
189	Alphanumeric	26	LDR State Certification Number (Line 8A)	Enter the LDR State Certification Number from Form R-6135.
190	Alphanumeric	26	LDR State Certification Number (Line 9A)	Enter the LDR State Certification Number from Form R-6135.
191	Numeric	8	Total NRC-P3 Income Tax Credits (Line 10)	Enter amount of credit allowed. See instructions.
192	Numeric	8	Total NRC-P3 Franchise Tax Credits (Line 11)	Total Refundable Priority 4 Credits. Add Lines 1-5.
Schedule RC-P2 Part 1 Refundable Priority 2 Tax Credits Page 7				
193	Numeric	10	Louisiana Revenue Account Number	Louisiana Revenue Account Number
194	Numeric	3	Refundable Priority 2 Tax Credit **Code** (Line 1)	Enter 3-digit credit code. If not applicable, leave blank.
195	Numeric	3	Refundable Priority 2 Tax Credit **Code** (Line 2)	
196	Numeric	3	Refundable Priority 2 Tax Credit **Code** (Line 3)	
197	Numeric	3	Refundable Priority 2 Tax Credit **Code** (Line 4)	
198	Numeric	3	Refundable Priority 2 Tax Credit **Code** (Line 5)	
Schedule RC-P2 Part 1 Refundable Priority 2 Tax Credits Page 7				
Field No.	**Field Type**	**Max. Field Length**	**Field Name**	**Comments**
199	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 1)	Enter amount of allowable credit claimed against corporation income tax in Column A.
200	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 2)	
201	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 3)	
202	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 4)	
203	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 5)	
204	Numeric	8	RC-P2 Amount Claimed Against **Franchise** Tax (Line 1)	Enter amount of allowable credit claimed against corporation franchise tax in Column B.
205	Numeric	8	RC-P2 Amount Claimed Against **Franchise** Tax (Line2)	
206	Numeric	8	RC-P2 Amount Claimed Against **Franchise** Tax (Line 3)	

2-D Barcode Specifications for Form CIFT-620SD

207	Numeric	8	RC-P2 Amount Claimed Against **Franchise** Tax (Line4)	
208	Numeric	8	RC-P2 Amount Claimed Against **Franchise** Tax (Line 5)	

Schedule RC-P2 Part II Transferable, Refundable Priority 2 Tax Credits Page 7

209	Alphanumeric	3	Transferable, Refundable Priority 3 Tax Credit **Code** (Line 6)	Enter 3-character credit code. If not applicable, leave blank.
210	Alphanumeric	3	Transferable, Refundable Priority 3 Tax Credit **Code** (Line 7)	
211	Alphanumeric	3	Transferable, Refundable Priority 3 Tax Credit **Code** (Line 8)	
212	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 6)	Enter amount of allowable credit claimed against corporation income tax in Column A.
213	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 7)	
214	Numeric	8	RC-P2 Amount Claimed Against **Income** Tax (Line 8)	
215	Alphanumeric	26	LDR State Certification Number (Line 6A)	Enter the LDR State Certification Number from Form R-6135.
216	Alphanumeric	26	LDR State Certification Number (Line 7A)	
217	Alphanumeric	26	LDR State Certification Number (Line 8A)	
218	Numeric	8	Total RC-P2 Income Tax Credits (Line 9)	Add credit amounts claimed against Income Tax (Column A, Lines 1-8).
219	Numeric	8	Total RC-P2 Franchise Tax Credits (Line 10)	Add credit amounts claimed against Franchise Tax (Column B, Lines 1-5).

CIFT 620 2D Schedule A Page 9

CIFT-620 2D Schedule A

Field No.	Field Type	Max. Field Length	Field Name	Comments
220	Binary	1	Schedule A- Line 1 Yes/No	At the end of the tax year, did you directly or indirectly own 50% or more of the voting stock of any corporation or an interest of any partnership, including any entity treated as a corporation or partnership? Mark "1" for "Yes". Mark "0" for No
221	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
222	Numeric	5	Percentage	Percentage
223	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
224	Numeric	5	Percentage	Percentage
225	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
226	Numeric	5	Percentage	Percentage

2-D Barcode Specifications for Form CIFT-620SD

Field No.	Field Type	Max. Field Length	Field Name	Comments
227	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
228	Numeric	5	Percentage	Percentage
229	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
230	Numeric	5	Percentage	Percentage
231	Binary	1	Schedule A- Line 2 Yes/No	At the end of the tax year, did any corporation, individual, partnership, trust, or association directly or indirectly own 50% or more of your voting stock? Mark "1" for "Yes". Mark "0" for No
232	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
233	Numeric	5	Percentage	Percentage
234	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
235	Numeric	5	Percentage	Percentage
236	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
237	Numeric	5	Percentage	Percentage
238	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
239	Numeric	5	Percentage	Percentage
240	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
241	Numeric	5	Percentage	Percentage
242	Binary	1	Schedule A- Line 3 Yes/No	If you answered yes to Line I on CIFT 620, list the FEIN of five of those entities. Also, attach a schedule listing the names, addresses FEIN of all entities. Mark "1" for "Yes". Mark "0" for NO
243	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
244	Numeric	5	Percentage	Percentage
245	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
246	Numeric	5	Percentage	Percentage
247	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
248	Numeric	5	Percentage	Percentage
249	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
250	Numeric	5	Percentage	Percentage
251	Numeric	9	Federal Employer Identification Number	Federal Employer Identification Number
252	Numeric	5	Percentage	Percentage

CIFT-620 2D Schedule G- Liabilities and Capital from Balance Sheet

CCIFT-620 2D Schedule G- Liabilities and Capital from Balance Sheet Continued- Liabilities and Capital from Balance Sheet- Beginning of Year

Field No.	Field Type	Max. Field Length	Field Name	Comments
253	Numeric	12	Line 1, Col 1	Accounts Payable - **Beginning of Year**
254	Numeric	12	Line 2, Col 1	Mortgages, notes, and bonds payable one year old or less at balance sheet date and having a maturity of one year or less from original date incurred
255	Numeric	12	Line 3, Col 1	Other current liabilities
256	Numeric	12	Line 4, Col 1	Loans from stockholders
257	Numeric	12	Line 5, Col 1	Due to subsidiaries and affiliates

258	Numeric	12	Line 6, Col 1	Mortgages, notes, and bonds payable more than one year old at balance sheet date or having a maturity of more than one year from original date incurred
259	Numeric	12	Line 7, Col 1	Other liabilities
260	Numeric	12	Line 8, Col 1	Capital stock: a. Preferred Stock
261	Numeric	12	Line 8, Col 1	Capital stock: a. Common Stock
262	Numeric	12	Line 9, Col 1	Paid-in or capital surplus
263	Numeric	12	Line 10, Col 1	Surplus reserves
264	Numeric	12	Line 11, Col 1	Earned surplus and undivided profits
265	Numeric	12	Line 12, Col 1	Excessive reserves or undervalued assets
266	Numeric	12	Line 13, Col 1	Total- Add Lines 1 through 12.

Liabilities and Capital from Balance Sheet- End of Year

267	Numeric	12	Line 1, Col 2	Accounts Payable- **End of Year**
268	Numeric	12	Line 2, Col 2	Mortgages, notes, and bonds payable one year old or less at balance sheet date and having a maturity of one year or less from original date incurred
269	Numeric	12	Line 3, Col 2	Other current liabilities
270	Numeric	12	Line 4, Col 2	Loans from stockholders
271	Numeric	12	Line 5, Col 2	Due to subsidiaries and affiliates
272	Numeric	12	Line 6, Col 2	Mortgages, notes, and bonds payable more than one year old at balance sheet date or having a maturity of more than one year from original date incurred
273	Numeric	12	Line 7, Col 2	Other liabilities
274	Numeric	12	Line 8, Col 2	Capital stock: a. Preferred Stock
275	Numeric	12	Line 8, Col 2	Capital stock: a. Common Stock
276	Numeric	12	Line 9, Col 2	Paid-in or capital surplus
277	Numeric	12	Line 10, Col 2	Surplus reserves
278	Numeric	12	Line 11, Col 2	Earned surplus and undivided profits
279	Numeric	12	Line 12, Col 2	Excessive reserves or undervalued assets
280	Numeric	12	Line 13, Col 2	Total- Add Lines 1 through 12.

Schedule K- Summary of Estimated Tax Payment

Schedule K- Summary of Estimated Tax Payments

281	Numeric	8	Line 1	Credit from Prior Year- Date This field should be formatted as "mmddyyyy".
282	Numeric	9	Line 1	Credit from prior year return- Amount
283	Numeric	9	Line 2	First Quarter Estimated Payment- Check Number
284	Numeric	8	Line 2	Date -This field should be formatted as "mmddyyyy".
285	Numeric	9	Line 2	First Quarter Estimated Payment- Amount
286	Numeric	9	Line 3	Second quarter Estimated Payment- Check Number
287	Numeric	8	Line 3	Date- This field should be formatted as "mmddyyyy".
288	Numeric	9	Line 3	Second quarter Estimated Payment - Amount

2-D Barcode Specifications for Form CIFT-620SD

289	Numeric	9	Line 4	Third Quarter Estimated Payment- Check Number
290	Numeric	8	Line 4	Date- This field should be formatted as "mmddyyyy".
291	Numeric	9	Line 4	Third Quarter Estimated Payment- Amount
292	Numeric	9	Line 5	Fourth Quarter Estimated Payment- Check Number
293	Numeric	8	Line 5	Date- This field should be formatted as "mmddyyyy".
294	Numeric	9	Line 5	Fourth Quarter Estimated Payment- Amount
295	Numeric	9	Line 6	Payment Made with Extension- Check Number
296	Numeric	8	Line 6	Date- This field should be formatted as "mmddyyyy".
297	Numeric	9	Line 6	Payment Made with Extension – Amount

Schedule N- Summary of Estimated Tax Payment				
Schedule N- Additional Information Required				
298	Alphanumeric	26	Line 1	Describe the nature of your business activity and specify your principal product or service in Louisiana
299	Alphanumeric	26	Line 1	Describe the nature of your business activity and specify your principal product or service in Elsewhere
300	Numeric	8	Line 2	Date of Corporation
301	Alphanumeric	2	Line- 2	State of Corporation
302	Alpha	10	Line 2	Indicate parishes in which property is located.

Trailer	
303	Indicates the end of the data file. Value is ***EOD***.

2-D Barcode Specifications for Form CIFT-620SD

2-D Barcode Specifications for Form CIFT-620SD

2-D Barcode Specifications: 2019 Corporate Income/Franchise Tax Return (CIFT-620)

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

Requirements:

- The 2-D barcode should be placed on Page 4 of the return on Lines 29-36 in Positions 27-61. The barcode must fit within this area of the form.

- Use a carriage return <CR> to delimit fields. Each barcode field should have a carriage return, even if no information is contained in the field. This carriage return should measure as 1 byte of data.

- No punctuation is allowed in any field. No hyphens, dashes, parentheses, or other separators should be used.

- All alpha characters must be in uppercase.

- If a field is not applicable, leave blank unless specifically instructed otherwise.

- Negative amounts are not accepted. If less than zero, enter zero.

- Only whole dollar amounts should be entered.

- Do not include supplemental information in the barcode.

- Error correction level should be set to 4.

Barcode Layout:

4. Header Information

5. Government Specific Data

6. Trailer

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

- **Header Version Number** will be incremented each time the standards group alters the physical structure of the barcodes that were created using multiple header formats. This value is static for all barcodes and is currently T2.

- **Developer Code** is a four-digit code used to identify the software developer whose application produced the barcode. The purpose of the field is to allow forms to be traced to the vendor producing them. Software developer codes are assigned through the NACTP and may differ from software developer ID for the form that is assigned by LDR.

- **Jurisdiction** is an alphanumeric identifier indicating the taxing jurisdiction. Use the U.S. Postal Service's official state abbreviations. For Louisiana, use LA.

- **Description** is an alphanumeric identifier used to describe the form being processed. Use 22041 for the Louisiana Corporation Income and Franchise (CIFT-620-2D).

- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.

- **Software/Form Version** is a vendor-defined version number that reflects the software and form revision used to produce the barcode.

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

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

Example of 2-D Barcode:

T1<CR>	(Header Version Number)
9999<CR>	(Developer Code)
LA<CR>	(Jurisdiction)
6173<CR>	(Description)
0<CR>	(Specification Version)
1.0<CR>	(Software Version)
…	
…	
…	
EOD<CR>	

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

Louisiana Corporate Income/Franchise Tax Return

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

2-D Barcode Sample

2-D Barcode Specifications for Form CIFT-620SD

2-D Barcode Specifications: 2019 Corporate Income/Franchise Tax Return (CIFT-620)

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

Field No.	Field Type	Field Length	Field Name	Comments
			Header Information	
1	Alphanumeric	2	Header Version	Value is **T2**.
2	Numeric	4	Developer Code	4-digit code (See Appendix 1 of the 2-D Bar Coding Standards.) used to identify the software developer whose application produced the barcode and may differ from the software developer ID in Field 7 below
3	Alpha	2	Jurisdiction	Value is **LA**.
4	Numeric	5	Description	Value is **22041**.
5	Numeric	1	Specification Version	Value is **0**.
6	Alphanumeric	10	Software/Form Version	Vendor-defined version number that reflects the software and form revision used to produce the barcode.
			Government Specific Data	
7	Numeric	10	Revenue Account Number	Revenue Account Number

2019 CIFT-620 2D Schedule B- Computation of Income Tax Apportionment Percentage

Field No.	Field Type	Max. Field Length	Field Name	Comments
8	Numeric	10	Revenue Account Number	Revenue Account Number
9	Numeric	12	Line 1A	Net Sales of Merchandise and / or Charges Total Amount Sales- Sales
10	Numeric	12	Line 1A	Net Sales of Merchandise and / or Charges Louisiana Amount-Sales
11	Numeric	12	Line 1B	Net Sales of Merchandise and / or Charges Total Amount Sales-Charges for Services
12	Numeric	12	Line 1B	Net Sales of Merchandise and / or Charges Louisiana Amount-Charges for Services
13	Numeric	12	Line 1C	Net Sales of Merchandise and / or Charges Total Amount Sales-Other Gross Apportionable Income
14	Numeric	12	Line 1C	Net Sales of Merchandise and / or Charges Louisiana Amount- Other Gross Apportionable Income
15	Numeric	12	Line 1D	Net Sales of Merchandise and / or Charges Total Amount Sales- Total Add the Amounts in Columns 1 and 2
16	Numeric	12	Line 1D	Net Sales of Merchandise and / or Charges Louisiana Amount- Total Add the Amounts in Columns 1 and 2
17	Numeric	5	Line 1D	Percentage

2019 CIFT-620 2D Schedule B- Computation of Income Tax Apportionment Percentage (Continued)

Field No.	Field Type	Field Length	Field Name	Comments
18	Binary	1	Line 2	For certain oil & gas businesses only. Wages, salaries, and other personal service compensation paid during the year. (See instructions.)Ratio not used. Check box. Mark "1" for "Negative Indicator Return Line 5A- Yes". Mark "0" if not applicable
19	Numeric	12	Line 2	Line 2 Wages, salaries, and other personal service compensation paid during the year/ Total Amount
20	Numeric	12	Line 2	Line 2 Wages, salaries, and other personal service compensation paid during the year/ LA Amount
21	Numeric	5	Line 2	Percentage
22	Binary	1	Line 3	Income tax property ratio – Enter percentage from Schedule 2019C, Line 24. Mark "1" for "Ratio Not Used- Yes". Mark "0" if not applicable
23	Numeric	5	Line 3	Percentage
24	Numeric	5	Line 4	Percentage- ONLY corporations primarily in the oil and gas business, enter ratio from Line 1D, Column 4 (See Instructions.)
25	Numeric	5	Line 5	Total of Percents in Column 3
26	Numeric	5	Line 6	Average of Percents — Divide Line 5 by applicable number of ratios. Enter here and on CIFT-620, Line D.

CIFT- 620 2D Schedule C- Computation of Corporate Income Tax Property Ratio

Computation of Corporate Income Tax Property Ratio- Located Everywhere- Intangible Assets

Field No.	Field Type	Field Length	Field Name	Comments
27	Numeric	12	Line 1	Cash - Beginning of Year
28	Numeric	12	Line 1	Cash - End of Year
29	Numeric	12	Line 2	Notes and Accounts Receivable - Beginning of Year
30	Numeric	12	Line 2	Notes and Accounts Receivable – End of Year
31	Numeric	12	(Line 3)	Reserve for Bad Debts- Beginning of Year- Negative Amount
32	Numeric	12	(Line 3)	Reserve for Bad Debts- End of Year- Negative Amount
33	Numeric	12	Line 4	Investment in U.S. govt. obligations- Beginning of Year
34	Numeric	12	Line 4	Investment in U.S. govt. obligations- End of Year
35	Numeric	12	Line 5	Stock and Obligation Assets- Beginning of Year
36	Numeric	12	Line 5	Stock and Obligation Assets- End of Year
37	Numeric	12	Line 6	Other Investments- Beginning of Year
38	Numeric	12	Line 6	Other Investments- End of Year
39	Numeric	12	Line 7	Loans to Stockholders- Beginning of Year
40	Numeric	12	Line 7	Loans to Stockholders- End of Year
41	Numeric	12	Line 8	Other Intangible Assets- Beginning of Year

CIFT- 620 2D Schedule C- Computation of Corporate Income Tax Property Ratio (Continued)

Field No.	Field Type	Field Length	Field Name	Comments

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

2-D Barcode Specifications for Form CIFT-620SD

76	Numeric	12	(Line 13)	Accumulated Depletion- End of Year
77	Numeric	12	Line 14	Depletable Assets- Beginning of Year
78	Numeric	12	Line 14	Depletable Assets- End of Year
79	Numeric	12	(Line 15)	Accumulated Depletion- Beginning of Year
80	Numeric	12	(Line 15)	Accumulated Depletion- End of Year
81	Numeric	12	Line 16	Land- Beginning of Year
82	Numeric	12	Line 16	Land- End of Year
83	Numeric	12	Line 17	Other Real and Tangible Assets- Beginning of Year
84	Numeric	12	Line 17	Other Real and Tangible Assets- End of Year
85	Numeric	12	Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets- Beginning of Year
86	Numeric	12	Line 18	Excessive Reserves. Assets not reflected on books, or undervalued assets- End of Year
87	Numeric	12	Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- Beginning of Year
88	Numeric	12	Line 19	Total Real and Tangible Assets- Add Lines 11 through 18- End of Year
89	Numeric	12	Line 20	Line 20 Less real and tangible assets not used in production of net apportionable income- Beginning of Year
90	Numeric	12	Line 20	Line 20 Less real and tangible assets not used in production of net apportionable income- End of Year
91	Numeric	12	Line 21	Balance- Subtract line 20 from Line 19- Beginning of Year
92	Numeric	12	Line 21	Balance- Subtract line 20 from Line 19- End of Year
93	Numeric	12	Line 22	Beginning of year balance- End of Year
94	Numeric	12	Line 23	Total Add Lines 21 and 22- End of Year
95	Numeric	5	Line 24	Income Tax Property Ratio(Line 23, Column 4/Line23, Column 2)
CIFT- 620 2D Schedule D- Computation of Louisiana Net Income				
96	Numeric	12	Line 1A.	Total- Gross Receipts
97	Numeric	12	Line 1B	Total- Less returns and allowances
98	Numeric	12	Line 1C.	Balance, Subtract Line 1B from Line 1A
99	Numeric	12	Line 2	Less: Cost of goods sold and/ or operations- Attach Schedule
100	Numeric	12	Line 3	Gross Profit- Subtract Line 2 from Line 1C
101	Numeric	12	Line 4	Gross Rents
102	Numeric	12	Line 5	Gross Royalties
103	Numeric	12	Line 6	Income from estates, trusts, and partnerships
104	Numeric	12	Line 7	Income from construction, repair, etc.
105	Numeric	12	Line 8	Attach Schedule
106	Numeric	12	Line 9	Add Lines 3 through 8.
107	Numeric	12	Line 10	Compensation of Officers
108	Numeric	12	Line 11	Salaries and wages (not deducted elsewhere)
109	Numeric	12	Line 12	Repairs
110	Numeric	12	Line 13	Bad Debt
CIFT- 620 2D Schedule D- Computation of Louisiana Net Income (Continued)				

2-D Barcode Specifications for Form CIFT-620SD

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

CIFT- 620 2D Schedule E Reconciliation of Income Per Books with Income Per Return

Field No.	Field Type	Field Length	Field Name	Comments
140	Numeric	12	Line 1	Net Income per books
141	Numeric	12	Line 2	Louisiana Income Tax
142	Numeric	12	Line 3	Excess of Capital Loss over Capital Gains
143	Numeric	12	Line 4	Taxable Income not recorded on books this year, but not deducted in this return:

2-D Barcode Specifications for Form CIFT-620SD

			Line 5 Expenses Recorded on books this year	
144	Numeric	12	Line 5a	Depreciation
145	Numeric	12	Line 5b	Depletion
146	Numeric	12	Line 5c	Other
147	Numeric	12	Line 6	Total- Add Line 1 through 5c
148	Numeric	12	Line 7	Income recorded on books this yea, but not included in this return
			Line 8 Deductions	**Deductions in this tax return not charged against book income this year:**
149	Numeric	12	Line 8a	Depreciation
150	Numeric	12	Line 8b	Depletion
151	Numeric	12	Line 8c	Other
152	Numeric	12	Line 9	Total- Add Lines 7 through 8c
153	Numeric	12	Line 10	Net Income from all Sources per return- Subtract Line 9 from Line 6
CIFT- 620 2D Schedule F Reconciliation of Federal and Louisiana Net Income				
154	Numeric	12	Line 1	Enter the total net income calculated under federal law before special deductions
			Line 2 Additions to Federal Net Income	
155	Numeric	12	Line 2a	Louisiana income Tax
156	Numeric	12	Line 2b	Related Members, interest\ intangible\management fee expenses or cost. From Form R- 6950
157	Numeric	12	Line 2c	Donation to School Tuition Organization Credit
158	Numeric	12	Line 2d	Other Additions
159	Numeric	12	Line 2e	Total Additions- Add Lines 2a through 2d
			Line 3 Subtractions from Federal Net Income	
160	Numeric	12	Line 3a	Column 2 -Bank Dividends
161	Numeric	12	Line 3b	All Other Dividends
162	Numeric	12	Line 3c	Interest
163	Numeric	12	Line 3d	Road Home- The amount included in federal taxable income
164	Numeric	12	Line 3e	LA depletion in excess federal depletion
165	Numeric	12	Line 3f	Expenses not deducted on the federal return due to IRS Code Section 280C
166	Numeric	12	Line 3g	Exempt amount of related members interest\intangible\management fee expenses or costs, From Form R- 6950
167	Numeric	12	Line 3h	Compensation for Disaster Services
168	Numeric	12	Line 3i	Act 123 Recovery
169	Numeric	12	Line 3j	Expense not deducted on federal return due to IRC Section 280E
170	Numeric	12	Line 3K	Other Subtractions
171	Numeric	12	Line 3l	Total Subtractions. Add Lines 3a through 3k.
172	Numeric	12	Line 4	Louisiana Net Income from All Sources- This amount should agree with Schedule D, Line 25
Government Specific Data- Schedule J				
Field No.	**Field Type**	**Field Length**	**Field Name**	**Comments**

2-D Barcode Specifications for Form CIFT-620SD

			Schedule J- Calculation of Income Tax	
173	Binary	1	Line 1	Short Period Filers Checkbox
174	Numeric	12	Line 1	Enter the amount of net taxable income from CIFT-620, Line 1E
			Line 2 Calculation of Tax	
175	Numeric	5	Line 2a, Column 1	First $25,000 of net taxable income – Net income in Each Bracket
176	Numeric	12	Line 2a, Column 2	First $25,000 of net taxable income- Tax
177	Numeric	5	Line 2b, Column 1	Next $25,000 – Net Income in Each Bracket
178	Numeric	12	Line 2b, Column 2	Next $25,000 – Tax
179	Numeric	5	Line 2c, Column 1	Next $50,000- Net Income in Each Bracket
180	Numeric	12	Line 2c, Column 2	Next $50,000- Tax
181	Numeric	6	Line 2d, Column 1	Next $100,000, - Net Income in Each Bracket
182	Numeric	12	Line 2d, Column 2	Next $100,000, - Tax
183	Numeric	12	Line 2e, Column 1	Over $200,000- Net Income in Each Bracket
184	Numeric	12	Line 2e, Column 2	Over $200,000- Tax
185	Numeric	12	Line 3, Column 1	Add amounts in Column 1, Line 2a through 2e and enter the result
186	Numeric	12	Line 4, Column 2	Add amounts in Column 2, Line 2a through 2e, Round to the nearest dollar. Enter the result in Column 2 and on CIFT-620, Line 2
Schedule J- Pass Through Entity Tax Election Calculation of Income Tax				
187	Numeric		Line 1	Short Period Filers-Indicator Box
188	Numeric		Line 1	Amount of Net Taxable Income from CIFT-620 1E
189	Numeric		Line 2a; Column 1	Next $25,000 – Net Income in Each Bracket
190	Numeric		Line 2a; Column 2	Next $25,000 – Tax
191	Numeric		Line 2b	Next $50,000- Net Income in Each Bracket
192	Numeric		Line 2b	Next $50,000- Tax
193	Numeric		Line 2c	Next $100,000, - Net Income in Each Bracket
194	Numeric		Line 2c	Next $100,000, - Tax
195	Numeric		Line 3	Add amounts in Column 1, Lines 2a through 2c and enter the result.
196	Numeric		Line 4	Add the amounts in Column 2, Lines 2a through 2c. Enter the amount in Column 2 and on CIFT-620, Line2.
Trailer				
197			Indicates the end of the data file. Value is ***EOD***.	

2-D Barcode Specifications for Form CIFT-620SD

2-D Barcode Specifications: 2019 Corporate Income/Franchise Tax Return (CIFT-620)

Schedules G-1, H, L, M

Requirements:

- The 2-D barcode should be placed on Page 4 of the return on Lines 51-57 in Positions 27- 61. The barcode must fit within this area of the form.

- Use a carriage return <CR> to delimit fields. Each barcode field should have a carriage return, even if no information is contained in the field. This carriage return should measure as 1 byte of data.

- No punctuation is allowed in any field. No hyphens, dashes, parentheses, or other separators should be used.

- All alpha characters must be in uppercase.

- If a field is not applicable, leave blank unless specifically instructed otherwise.

- Negative amounts are not accepted. If less than zero, enter zero.

- Only whole dollar amounts should be entered.

- Do not include supplemental information in the barcode.

- Error correction level should be set to 4.

Barcode Layout:

7. Header Information

8. Government Specific Data

9. Trailer

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

- **Header Version Number** will be incremented each time the standards group alters the physical structure of the barcodes that were created using multiple header formats. This value is static for all barcodes and is currently T3.

- **Developer Code** is a four-digit code used to identify the software developer whose application produced the barcode. The purpose of the field is to allow forms to be traced to the vendor producing them. Software developer codes are assigned through the NACTP and may differ from software developer ID for the form that is assigned by LDR.

- **Jurisdiction** is an alphanumeric identifier indicating the taxing jurisdiction. Use the U.S. Postal Service's official state abbreviations. For Louisiana, use LA.

- **Description** is an alphanumeric identifier used to describe the form being processed. Use 22041 for the Louisiana Corporation Income/Franchise (CIFT-620-2D).

- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.

- **Software/Form Version** is a vendor-defined version number that reflects the software and form revision used to produce the barcode.

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

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

Example of 2-D Barcode:

T1<CR>	(Header Version Number)
9999<CR>	(Developer Code)
LA<CR>	(Jurisdiction)
6173<CR>	(Description)
0<CR>	(Specification Version)
1.0<CR>	(Software Version)
…	
…	
…	
EOD<CR>	

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

Louisiana Corporate Income/Franchise Tax Return

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

2-D Barcode Sample

2-D Barcode Specifications for Form CIFT-620SD

Header Information

Field No.	Field Type	Field Length	Field Name	Comments
1	Alphanumeric	2	Header Version	Value is **T3**.
2	Numeric	4	Developer Code	4-digit code (See Appendix 1 of the 2-D Bar Coding Standards.) used to identify the software developer whose application produced the barcode and may differ from the software developer ID in Field 7 below
3	Alpha	2	Jurisdiction	Value is **LA**.
4	Numeric	5	Description	Value is **22041**.
5	Numeric	1	Specification Version	Value is **0**.
6	Alphanumeric	10	Software/Form Version	Vendor-defined version number that reflects the software and form revision used to produce the barcode.

Government Specific Data

Field No.	Field Type	Max. Field Length	Field Name	Comments
7	Numeric	10	Louisiana Revenue Account Number	Louisiana Revenue Account Number NOTE: This is not the FEIN.

Schedule G1- Computation of Franchise Tax Base

Capital Stock

8	Numeric	12	Line 1A	Common Stock- Include paid – in or Capital Surplus
9	Numeric	12	Line 1B	Preferred Stock- Include paid in or Capital Surplus
10	Numeric	12	Line 2	Add Line 1A and 1B
11	Numeric	12	Line 3	Surplus and Undivided Profits
12	Numeric	12	Line 4	Surplus Reserves- include any excessive reserves or undervalued assets
13	Numeric	12	Line 5	Total Add Lines 2,3, and 4
14	Numeric	12	Line 6	Due to Subsidiaries and Affiliates- Do not net the receivables
15	Numeric	12	Line 7	Deposit Liabilities to Affiliates- Include in the amount on Line 7
16	Numeric	12	Line 8	Accounts Payable less than 180 days old- Include in the amount on Line 6
17	Numeric	12	Line 9	Adjusted Debt to Affiliates-Subtract Line 7 and 8 from 6
18	Numeric	12	Line 10 a	If Line 9 is greater than zero, AND Line 5 is greater than or equal to zero, subtract Line 5 from Line 9, IF both conditions of this line do not apply, skip to Line10B
19	Numeric	12	Line 10b	If Line 9 is greater than zero, AND Line 5 is less than or equal to zero, subtract Line 5 from Line 9. Multiply the difference by 50 percent and enter the result here.
20	Numeric	12	Lin e11	Additional Surplus and Undivided Profits- See Instructions

Total Franchise Taxable Base

21	Numeric	12	Line 12	Capital Stock: Common Stock
22	Numeric	12	Line 12	Capital Stock: Preferred
23	Numeric	12	Line 13	Paid in or Capital Surplus- Include Items of paid-in capital in excess of par value
24	Numeric	12	Line 14	Surplus Reserves- Attach Schedule
25	Numeric	12	Line 15	Earned Surplus and Undivided Profits
26	Numeric	12	Line 16	Excessive Reserves or Undervalued Assets

Government Specific Data (continued)

2-D Barcode Specifications for Form CIFT-620SD

Field No.	Field Type	Max. Field Length	Field Name	Comments
Schedule G1- Computation of Franchise Tax Base- Total Franchise Taxable Base- Continued				
27	Numeric	12	Line 17	Additional Surplus and Undivided Profits- From Line 11 above
28	Numeric	12	Line 18	Allowable Deductions- See instructions
29	Numeric	12	Line 19	Total Capital, Surplus, and Undivided Profits- Add Lines 12 through 18. Also enter the total on CIFT-620, Lin e5A. Round to the nearest dollar
Government Specific Data- Schedule H- Computation of Corporate Franchise Tax Property Ratio				
End of Year- Located Everywhere				
30	Numeric	12	Line 1	Cash
31	Numeric	12	Line 2	Notes and accounts receivables
32	Numeric	12	(Line 3)	Reserve for bad debts
33	Numeric	12	Line 4	Investment in U.S. govt. obligations
34	Numeric	12	Line 5	Stock and Obligations of subsidiaries
35	Numeric	12	Line 6	Other Investments- Attach Schedule
36	Numeric	12	Line 7	Loans to Stockholders
37	Numeric	12	Line 8	Other Intangible Assets- Attach Schedule
38	Numeric	12	(Line 9)	Accumulated Depreciation
39	Numeric	12	Line 10	Total Intangible Assets- Add Line 1-9
40	Numeric	12	Lin e11	Inventories
41	Numeric	12	Line 12	Bldgs, and other depreciable assets
42	Numeric	12	(Line 13)	Accumulated Depreciation
43	Numeric	12	Lin e14	Depletable Assets
44	Numeric	12	(Line 15)	Accumulated Depletion
45	Numeric	12	Line 16	Land
46	Numeric	12	Line 17	Other real & tangible assets
47	Numeric	12	Line 18	Excessive reserves, assets not reflected on books, or undervalued assets
48	Numeric	12	Line 19	Total real and tangible assets- Add Line 11 through 18
49	Numeric	12	Line 20	Total Assets- Add Line 10 and 19
End of Year- Located in Louisiana				
50	Numeric	12	Line 1	Cash
51	Numeric	12	Line 2	Notes and accounts receivables
52	Numeric	12	(Line 3)	Reserve for bad debts
53	Numeric	12	Line 4	Investment in U.S. govt. obligations
54	Numeric	12	Line 5	Stock and Obligations of subsidiaries
55	Numeric	12	Line 6	Other Investments- Attach Schedule
56	Numeric	12	Line 7	Loans to Stockholders
57	Numeric	12	Line 8	Other Intangible Assets- Attach Schedule
58	Numeric	12	(Line 9)	Accumulated Depreciation
59	Numeric	12	Line 10	Total Intangible Assets- Add Line 1-9
60	Numeric	12	Lin e11	Investories
61	Numeric	12	Line 12	Bldgs, and other depreciable assets

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

2-D Barcode Specifications for Form CIFT-620SD

Field No.	Field Type	Max. Field Length	Field Name	Comments
62	Numeric	12	(Line 13)	Accumulated Depreciation
63	Numeric	12	Lin e 14	Depletable Assets
64	Numeric	12	(Line 15)	Accumulated Depletion
65	Numeric	12	Line 16	Land
66	Numeric	12	Line 17	Other real & tangible assets
67	Numeric	12	Line 18	Excessive reserves, assets not reflected on books, or undervalued assets
68	Numeric	12	Line 19	Total real and tangible assets- Add Line 11 through 18
69	Numeric	12	Line 20	Total Assets- Add Line 10 and 19
70	Numeric	5	Lin e 21	Franchise Tax Property Ratio – Line 20, Column 2/ Line20, Col 1
Schedule I- Computation of Corporate Franchise Tax Apportionment Percentage				
71	Numeric	12	Line 1A	Net sales of merchandise- Total Amount
72	Numeric	12	Line 1A	Net Sales- Louisiana Amount
73	Numeric	12	Line 1B	Charges for Services- Total Amount
74	Numeric	12	Line 1B	Charges for services- LA Amount
75	Numeric	12	Line 1Ci	Other Revenues- Rents and Royalties- Total Amount
76	Numeric	12	Line 1Ci	Other Revenues- Rents and Royalties- LA Amount
77	Numeric	12	Lin e1Cii	Other Revenues- Dividends and Interest- Total Amount
78	Numeric	12	Line 1Cii	Other Revenues- Dividends and Interest- LA Amount
79	Numeric	12	Line 1Ciii	Other Dividends and Interest- Total Amount
80	Numeric	12	Line 1Ciii	Other Dividends and Interest- LA Amount
81	Numeric	12	Line 1Civ	All Other Revenue- Total Amount
82	Numeric	12	Line 1Civ	All Other Revenue-LA Amount
83	Binary	1	1D	If ration is not used check the box.
84	Numeric	12	1D	Total- Total Amount
85	Numeric	12	1D	Total- LA Amount
86	Numeric	5	1D	Total- Percent
87	Binary	1	Line 2	Franchise Tax Property Ratio- Schedule H, Line 21
88	Numeric	5	Lin e 2	Franchise Tax Property Ratio- Schedule H, Line 21
89	Numeric	5	Lin e3	Lin e3 Total of Applicable Percents in Column 3
90	Numeric	5	Line 4	Line 4 Average of Percents- Divide Line 3 by applicable number of ratios
Schedule L- Calculation of Franchise Tax				
91	Binary	1	Line 1	Short Period Check Box
92	Numeric	12	Line 1	Enter the amount from CIFT-620, Line 5C or Line 6, whichever is greater
93	Numeric	6	Line 2	Enter the amount of Line 1 or $300,000, whichever is less
94	Numeric	3	Line 3	Multiply the amount on line 2 by $1.50 for each $1,000 or major fraction and enter the result
95	Numeric	12	Line 4	Subtract Line 2 from Lin e1 and enter the result.
96	Numeric	9	Line 5	Multiply the amount on line 4 by $3.00 for each $1,000 or major fraction and enter the result
97	Numeric	9	Line 6	Add Lines 3 and 5. Round to the nearest dollar. Enter the result here and on CIFT-620, Line 7
Schedule M Analysis of Schedule G, Line 11, Column 2 Earned Surplus and Undivided Profits per Books				
98	Numeric	12	Line 1	Balance at beginning of year
99	Numeric	12	Line 2	Net Income Per Books

2-D Barcode Specifications for Form CIFT-620SD

100	Numeric	12	Line 3	Other increases- Attach Schedule
101	Numeric	12	Line 4	Total – Add Line 1, 2, and 3
102	Numeric	12	Line 5a	Distributions- Cash
103	Numeric	12	Line 5b	Distributions- stock
104	Numeric	12	Line 5c	Distributions- Property
105	Numeric	12	Line 6	Other Decreases- Attach Schedule
106	Numeric	12	Line 7	Total – Add Lines 5a through 6
107	Numeric	12	Line 8	Balance at end of year- Subtract Line 7 from Line 4
Trailer				
108			Indicates the end of the data file. Value is ***EOD***.	

2-D Barcode Specifications for Form CIFT-620SD