LA Return Intake Sheet

(Boldface items have blue BEGIN blocks.)

Resident state: ____________

Basic Information
   Change name or address? Yes ___ no ___
   Federal Filing Requirement? yes ___ no ___

Additions to Income
   Interest/dividend from other states in federal AGI? yes ___ no ___ amount ______
   Interest/dividend on U.S. Obligations in 1099-B details? yes ___ no ___ amount ______
   Recapture of START contribution? yes ___ no ___ amount ______
   Add-back of donation to Student tuition program credit? yes ___ no ___ amount ______
   Add-back of Pass-Through Entity Exemption? yes ___ no ___ amount ______

Subtractions from Income
   Retirement Benefits? yes ___ no ___

LA School Expense Deduction
   Dependents in K- 12? yes ___ no ___
   Per dependent, amounts for: tuition/fees ______ uniforms _______
   textbooks ______ supplies ______

Other Subtractions
   Native American Income? yes ___ no ___ amount ______
   START Savings Contribution? yes ___ no ___ amount ______
   Military pay exclusion? yes ___ no ___ amount ______
   Road Home included in federal AGI? yes ___ no ___ amount ______
   Recreation Volunteer? yes ___ no ___
   Volunteer Firefighter? yes ___ no ___
   Taxable Disability income? yes ___ no ___ amount ______
Adapt home for disabled person? yes ___ no ___ cost ______

**Federal Income Tax Deduction**

Katrina, Rita, or other disaster relief credits? yes ___ no ___ amount ______

**Use Tax**

Owe LA sales tax for out of state/on-line purchases? yes ___ no ___ amount of purchases ______

**Credits**

**Non-Refundable**

Disabled Taxpayer, Spouse? yes ___ no ___ disability ______

**Disabled Dependent**? yes ___ no ___ disability ______

Donated Computer Equipment? yes ___ no ___ FMV ______

Federal Elderly or Foreign Tax Credit? yes ___ no ___ amount ______

**Credit for Taxes Paid to Other States**? yes ___ no ___

Child Care Credit Carry forward? yes ___ no ___amount ______

**Other Non-Refundable Priority 1 Credits**

Family Responsibility? yes ___ no ___ amount ______

Small Town Health Professionals? yes ___ no ___amount ______

Enforcement Education? yes ___ no ___ expense ______

Bulletproof Vest? yes ___ no ___ price ______

Qualified Playground donations? yes ___ no ___ amount ______

Conversion/Purchase of Alternative Fuel Vehicle? yes ___ no ___ cost/price ______

**Other Non-Refundable Priority 3 Credits**

Living Organ Donation to spouse? yes ___ no ___ expenses ______

Household expenses for Physically Incapable Person? yes ___ no ___ amount ______

Donations to School Tuition Organization? yes ___ no ___ amount ______

Build/renovate Barrier-free home? yes ___ no ___ cost ______
Refundable

**Military Serviceman**, spouse or dependent hunting/fishing license?

yes ___ no ___ amount ______

**Other Refundable Credits**

Refundable Priority 2 Credits

Historic Residential? yes ___ no ___ rehab expense ______

Child Care Directors and Staff? yes ___ no ___ level ___

Director I/Child Care Teacher I      $1756
Director II/Child Care Teacher II    $2341
Director III/Child Care Teacher III $2926
Director IV/Child Care Teacher IV   $3511

**Citizens Property Assessment?** yes ___ no ___ amount ______

**School Readiness Credit**

Child in Day Care? yes ___ no ___ # of stars ___

School Readiness Carry forward? yes ___ no ___ amount ______

**Payments**

Payments during year? yes ___ no ___ amount ______

Pay with extension? yes ___ no ___ amount ______

Credits Carry forward? yes ___ no ___ amount ______

Apply refund to next year? yes ___ no ___ amount ______