

**Specifications and Test Scenarios  
for  
Form IT-540B-2D (2013)**

DRAFT

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## General Requirements

The 2013 Louisiana Nonresident Individual Income Tax Return (IT-540B) is a scannable form processed on high-speed scanners. All substitute returns (IT-540B-2D) **MUST** incorporate variable data fields in **exact placement** as specified on Pages 3 through 19 of this document and a **2-D barcode** as specified on Pages 20 through 29 of this document. All 4 pages of the return and any applicable schedules and/or worksheets must be submitted by the taxpayer(s) for proper processing. Please note it is critical that all 4 pages of the return be submitted. Any return received that is missing any page will **not** be processed and will be returned to the taxpayer as an unapproved form. Also, the signature(s) of the taxpayer(s) on the substitute form must be original.

**Software Developer Identification Number:** Each software developer who develops a substitute of Form IT-540B, must have a four-digit software developer's identification number approved by the Louisiana Department of Revenue. This number remains the same each year. If you do not have an approved identification number or are unsure what yours is, please send a request/inquiry by email to [Substitute.Inquiries@LA.gov](mailto:Substitute.Inquiries@LA.gov).

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

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

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

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

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

**Printed Variable Data:** The printed variable data fields must be positioned exactly as specified on Pages 3 through 19 of this document and meet the following criteria:

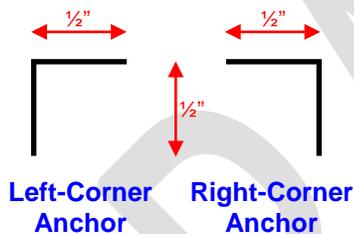
- 12-point Courier font (10 characters per inch).
- Uppercase only.
- No punctuation, symbols, or decimal points.
- Right-justify all dollar amounts; left-justify all other fields, unless specifically instructed otherwise.
- Round all dollar amounts to the nearest whole dollar—no cents allowed.
- Dollar amounts of the return and schedules should **not** be left blank. Use "0" (zero) as the default. This does not apply to the worksheets.
- Negative amounts are **not** allowed.

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

<b>2013 Return / Schedule / Worksheet</b>	<b>Doc ID No.</b>
IT-540B-2D Return, Page 1 .....	6490
IT-540B-2D Return, Page 2 .....	6491
IT-540B-2D Return, Page 3 .....	6492
IT-540B-2D Return, Page 4 .....	6493
IT-540B-2D Nonresident and Part-Year Resident (NPR) Worksheet.....	6494
IT-540B-2D Schedule D-NR .....	6495
IT-540B-2D Schedule F-NR and H-NR.....	6496
IT-540B-2D Schedule G-NR .....	6497
IT-540B-2D School Expense Deduction Worksheet.....	6476
IT-540B-2D Refundable Child Care Credit Worksheet.....	6480
IT-540B-2D Refundable School Readiness Credit Worksheet.....	6481

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

**Anchors:** Print a 2-point 1/2" horizontal line and a 2-point 1/2" vertical line as illustrated below.



**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, schedules, and worksheets. The characters that the barcode represents should **not** be printed with the barcode. These barcodes must read (same as document identification numbers) as follows:

<b>2013 Return / Schedule / Worksheet</b>	<b>Barcode</b>
IT-540B-2D Return, Page 1 .....	6490
IT-540B-2D Return, Page 2 .....	6491
IT-540B-2D Return, Page 3 .....	6492
IT-540B-2D Return, Page 4 .....	6493
IT-540B-2D Nonresident and Part-Year Resident (NPR) Worksheet.....	6494
IT-540B-2D Schedule D-NR .....	6495
IT-540B-2D Schedule F-NR and H-NR.....	6496
IT-540B-2D Schedule G-NR .....	6497
IT-540B-2D School Expense Deduction Worksheet.....	6476
IT-540B-2D Refundable Child Care Credit Worksheet.....	6480
IT-540B-2D Refundable School Readiness Credit Worksheet.....	6481

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

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

- 2013 Nonresident and Part-Year Resident (NPR) Worksheet
- 2013 Louisiana School Expense Deduction Worksheet
- 2013 Louisiana Refundable Child Care Credit Worksheet
- 2013 Louisiana Refundable School Readiness Credit Worksheet

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

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

- Left-Corner Anchor:** none
- Right-Corner Anchor:** 1 positioned 1/2" from the right edge and 1/2" from the bottom edge.
- Reference Points:** none

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

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

**Document Identification Number:** The document identification number must be printed as specified on Page 2 of this document and positioned on Line 62 in Positions 74-77. The following numbers must be use on the worksheets:

<u>Worksheet</u>	<u>Doc ID No.</u>
IT-540B-2D Nonresident and Part-Year Resident (NPR) Worksheet.....	6494
IT-540B-2D School Expense Deduction Worksheet.....	6476
IT-540B-2D Refundable Child Care Credit Worksheet.....	6480
IT-540B-2D Refundable School Readiness Credit Worksheet.....	6481

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

## Exact Placement Specifications – IT-540B-2D Return (Page 1)

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

**Left-Corner Anchors (2):** 1 positioned 1/2" from the left edge and 3" from the top edge.  
1 positioned 1/2" from the left edge and 1/2" from the bottom edge.

**Right-Corner Anchors (2):** 1 positioned 1/2" from the right edge and 3" from the top edge.  
1 positioned 1/2" from the right edge and 1-3/16" from the bottom edge.

**Reference Points (2):** 1 positioned on Line 34 in Position 25.  
1 positioned on Line 58 in Position 49.

**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
- 1-1/4" from the bottom edge.

**Document Identification Number:** The document identification number (6490) must be printed as specified on Page 2 and positioned on Line 58 in Positions 74-77.

**Scan Line:** The scan line must be printed on Line 63 in Positions 11 through 76. A layout of the scan line is as follows:

AAAAB---CCCCCCCCD-EEE--FFFFFFF-GGGGGGGG-HHHHHHHHI-JJJJJJJJK-L

A = Document identification number (4 digits), which is 6490.

B = Check digit (1 digit) for the document identification number, which (in this case) is 7.

C = Primary social security number (9 digits).

D = Check digit (1 digit) for the primary social security number.

E = Tax type code, which is either 663 (balance due Louisiana—Line 47 > 0) or 664 (no balance due Louisiana—Line 47 = 0).

F = Taxable period (8 digits—mmddyyyy), which is 12312013 for the 2013 tax year.

G = This field (8 digits) is an open field, which is all zeros—00000000.

H = Secondary social security number (9 digits)—**joint and separate returns**. If not applicable, zero-fill this field.

I = Check digit (1 digit) for the secondary social security number.

J = Amount of payment (10 digits--\$\$\$\$\$\$c¢). Zero-fill blank data area.

K = Check digit (1 digit) for the amount of payment.

L = Check digit (1 digit) for Fields C, D, E, F, G, H, I, J, AND K.

- = Blank space.

**NOTE:** The **check digits** contained in the scan line are derived using the Modulus 10 self-check digit computation found on Page 30 of this document.

**Example 1:** Primary social security number = 567-10-2345  
 Secondary social security number = 343-21-3434  
 Balance Due (Return Line 47) = \$1,450.00

Scan line should be:

64907 5671023454 663 12312013 00000000 3432134348 00001450006 3

**Example 2:** Primary social security number = 567-10-2345  
 Secondary social security number = 343-21-3434  
 Refund Due (Return Line 36) = \$225.00..... Thus, Return Line 47 should be equal to zero.

Scan line should be:

64907 5671023454 664 12312013 00000000 3432134348 00000000000 2

**Example 3:** Primary social security number = 567-10-2345  
 Secondary social security number = 343-21-3434  
 Overpayment (Line 34) = \$0.00  
 Balance Due (Return Line 46) = \$0.00

Scan line should be:

64907 5671023454 664 12312013 00000000 3432134348 00000000000 2

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

**Printed Variable Data Fields – IT-540B-2D Return (Page 1)**

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 4 Position(s) 77-80	Numeric	4	Software Developer ID	Software Developer Identification Number (4-digit number) preapproved by LDR
Line 8 Position(s) 72-80	Numeric	9	Primary Social Security Number	The social security numbers <b>must</b> appear in the same order as on the federal return. No punctuation allowed. The spouse's social security number <b>must</b> be provided, even if the filing status is married filing separately. If not married, leave blank.
Line 10 Position(s) 72-80	Numeric	9	Secondary Social Security Number	
Line 8 Position(s) 15-57	Alphanumeric	43	Primary Taxpayer's Name (First MI Last Suffix)	Include the middle initial and suffix if applicable.
Line 10 Position(s) 15-57	Alphanumeric	43	Secondary Taxpayer's Name (First MI Last Suffix)	Include the middle initial and suffix if applicable. Provide only if the return is a joint return. Otherwise, leave blank.
Line 12 Position(s) 15-49	Alphanumeric	35	Taxpayer's Mailing Address	This is a required field. Use "GENERAL DELIVERY" as the default.
Line 14 Position(s) 15-39	Alphanumeric	25	Taxpayer's Mailing City	City (mailing address)
Line 14 Position(s) 41-42	Alpha	2	Taxpayer's Mailing State	State (mailing address)
Line 14 Position(s) 44-53	Numeric	10	Taxpayer's Mailing ZIP Code	ZIP Code (mailing address) – A hyphen ( - ) is allowed for a ZIP+4 Code. Example: 70802-5428

## Printed Variable Data Fields – IT-540B-2D Return (Page 1) – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 14 Position(s) 71-80	Numeric	10	Daytime Telephone	Taxpayer's daytime area code and telephone number. No punctuation allowed.
Line 8 Position(s) 12	Alpha	1	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 10 Position(s) 12	Alpha	1	Decedent Filing Indicator	
Line 12 Position(s) 12	Alpha	1	Spouse Decedent Indicator	
Line 14 Position(s) 12	Alpha	1	Amended Return Indicator	
Line 16 Position(s) 12	Alpha	1	NOL Carryback Indicator	
Line 17 Position(s) 26-33	Numeric	8	Taxpayer's Date of Birth	Format must be mmddyyyy. No punctuation allowed.
Line 17 Position(s) 57-64	Numeric	8	Spouse's Date of Birth	
Line 24 Position(s) 10	Numeric	1	Filing Status	Mark the appropriate number for the filing status: 1 = Single 2 = Married filing jointly 3 = Married filing separately 4 = Head of household 5 = Qualifying widow(er)
Line 23 Position(s) 44	Alpha	1	Self Exemption	Hardcode an "X" (uppercase) in the specified position. This exemption must be claimed.
Line 23 Position(s) 52	Alpha	1	Self Exemption – 65 or over	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) 59	Alpha	1	Self Exemption – Blind	
Line 25 Position(s) 44	Alpha	1	Spouse Exemption	
Line 25 Position(s) 52	Alpha	1	Spouse Exemption – 65 or over	
Line 25 Position(s) 59	Alpha	1	Spouse Exemption – Blind	
Line 24 Position(s) 79	Numeric	1	Total of 6A & 6B	Number of exemptions marked on Lines 6A and 6B
Line 32 Position(s) 78-79	Numeric	2	Dependents	Line 6C, total number of dependents (right-justified)
Line 51 Position(s) 78-79	Numeric	2	Total Exemptions	Line 6D, total exemptions claimed (right-justified)

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

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

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

**Left-Corner Anchor:** 1 positioned 1/2" from the left edge and 1/2" from the top edge.

**Right-Corner Anchor:** 1 positioned 1/2" from the right edge and 1/2" from the bottom edge.

**Reference Points (2):**  
1 positioned on Line 18 in Position 38.  
1 positioned on Line 50 in Position 54.

**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 (6491) must be printed as specified on Page 2 of this document and positioned on Line 62 in Positions 74-77.

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

**Printed Variable Data Fields – IT-540B-2D Return (Page 2)**

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 5 Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.
Line 8 Position(s) 36-40	Numeric	5	W-2 Wages	If not required to file a federal return, enter the wages from the W-2(s). <b>If not applicable, leave blank.</b>
Line 8 Position(s) 79	Alpha	1	Federal Return Not Required Indicator	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. <b>Note:</b> If a federal return is not required, print "0" (zero) on Lines 7 – 17.
Line 10 Position(s) 71-77	Numeric	7	Return Line 7	Federal Adjusted Gross Income (AGI) – NPR worksheet, Federal column, Line 12.
Line 12 Position(s) 71-77	Numeric	7	Return Line 8	Louisiana Adjusted Gross Income – NPR worksheet, Louisiana column, Line 33.
Line 14 Position(s) 73-77	Numeric	5	Return Line 9	Ratio of Louisiana AGI to Federal AGI – Divide Line 8 by Line 7. Carry out to 4 decimal places, <b>rounding down</b> . Since no punctuation is allowed, enter the result <b>right-justified and without the decimal point</b> . Example: If Line 7 = 75000 and Line 8 = 35555, then Line 9 = 4740

## Printed Variable Data Fields – IT-540B-2D Return (Page 2) – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 18 Position(s) 71-77	Numeric	7	Return Line 10A	Federal Itemized Deductions
Line 20 Position(s) 73-77	Numeric	5	Return Line 10B	Federal Standard Deduction
Line 22 Position(s) 71-77	Numeric	7	Return Line 10C	Excess Federal Itemized Deductions – Subtract Line <b>10B</b> from Line <b>10A</b> .
Line 24 Position(s) 56	Alpha	1	Federal Disaster Credit 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 24 Position(s) 71-77	Numeric	7	Return Line 10D	Federal Income Tax
Line 26 Position(s) 71-77	Numeric	7	Return Line 10E	Total Deductions – Add Lines <b>10C</b> and <b>10D</b> .
Line 28 Position(s) 71-77	Numeric	7	Return Line 10F	Allowable Deductions – Multiply Line <b>10E</b> by the ratio on Line <b>9</b> .
Line 30 Position(s) 71-77	Numeric	7	Return Line 11	Louisiana Net Income – Subtract Line <b>10F</b> from Line <b>8</b> .
Line 32 Position(s) 71-77	Numeric	7	Return Line 12	Louisiana Income Tax – Tax Computation worksheet, Line <b>1</b>
Line 34 Position(s) 74-77	Numeric	4	Return Line 13A	Federal Child Care Credit
Line 36 Position(s) 74-77	Numeric	4	Return Line 13B	Louisiana Nonrefundable Child Care Credit – See Nonrefundable Child Care Credit worksheet.
Line 38 Position(s) 74-77	Numeric	4	Return Line 13C	Louisiana Nonrefundable Child Care Credit Carried Forward – See Nonrefundable Child Care Credit worksheet.
Line 41 Position(s) 74-77	Numeric	4	Return Line 13D	Louisiana Nonrefundable School Readiness Credit – See Nonrefundable School Readiness Credit worksheet.
Line 42 Position(s) 21	Numeric	1	Number of Qualified Dependents—5-Star (Return Line 13D)	Number of dependents who attended a <b>5-star</b> facility
Line 42 Position(s) 28	Numeric	1	Number of Qualified Dependents—4-Star (Return Line 13D)	Number of dependents who attended a <b>4-star</b> facility
Line 42 Position(s) 35	Numeric	1	Number of Qualified Dependents—3-Star (Return Line 13D)	Number of dependents who attended a <b>3-star</b> facility
Line 42 Position(s) 42	Numeric	1	Number of Qualified Dependents—2-Star (Return Line 13D)	Number of dependents who attended a <b>2-star</b> facility
Line 44 Position(s) 74-77	Numeric	4	Return Line 13E	Louisiana Nonrefundable School Readiness Credit Carried Forward – See Nonrefundable School Readiness Credit worksheet.
Line 46 Position(s) 74-77	Numeric	4	Return Line 14	Education Credit – Multiply the number of qualified dependents who attended school (K – 12) by \$25.
Line 48 Position(s) 71-77	Numeric	7	Return Line 15	Other Nonrefundable Tax Credits – Schedule G-NR, Line <b>10</b>
Line 50 Position(s) 71-77	Numeric	7	Return Line 16	Total Nonrefundable Tax Credits – Add Lines <b>13B</b> – <b>15</b> .
Line 53 Position(s) 71-77	Numeric	7	Return Line 17	Adjusted Louisiana Income Tax – Subtract Line <b>16</b> from Line <b>12</b> .
Line 55 Position(s) 29	Alpha	1	Consumer Use Tax Indicator—No use tax due.	<b>One or other of these indicators must be marked.</b> 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 55 Position(s) 41	Alpha	1	Consumer Use Tax Indicator—Amount from worksheet.	
Line 55 Position(s) 71-77	Numeric	7	Return Line 18	Consumer Use Tax worksheet, Line <b>2</b>
Line 57 Position(s) 71-77	Numeric	7	Return Line 19	Total Income Tax and Consumer Use Tax – Add Lines <b>17</b> and <b>18</b> .
Line 61 Position(s) 38-41	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha, uppercase only. If last name is less than four letters, leave the last position(s) blank. <b>Punctuation and hyphens should be omitted.</b> Name code examples: John Brown = BROW John Bow = BOW

## Exact Placement Specifications – IT-540B-2D Return (Page 3)

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

**Left-Corner Anchor:** 1 positioned 1/2" from the left edge and 1/2" from the top edge.

**Right-Corner Anchor:** 1 positioned 1/2" from the right edge and 1/2" from the bottom edge.

**Reference Points (2):**  
 1 positioned on Line 18 in Position 51.  
 1 positioned on **Line 62** in Position 52.

**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 (**6492**) must be printed as specified on Page 2 of this document and positioned on Line 62 in Positions 74-77.

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

**Printed Variable Data Fields – IT-540B-2D Return (Page 3)**

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 5 Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.
Line 8 Position(s) 74-77	Numeric	4	Return Line 20	Louisiana Refundable Child Care Credit – See Refundable Child Care Credit worksheet.
Line 10 Position(s) 74-77	Numeric	4	Return Line 20A	Refundable Child Care Credit worksheet, Line <b>3</b>
Line 12 Position(s) 74-77	Numeric	4	Return Line 20B	Refundable Child Care Credit worksheet, Line <b>6</b>
Line 15 Position(s) 74-77	Numeric	4	Return Line 21	Louisiana Refundable School Readiness Credit – See Refundable School Readiness Credit worksheet.
Line 16 Position(s) 21	Numeric	1	Number of Qualified Dependents—5-Star (Return Line 21)	Number of dependents who attended a <b>5-star</b> facility
Line 16 Position(s) 28	Numeric	1	Number of Qualified Dependents—4-Star (Return Line 21)	Number of dependents who attended a <b>4-star</b> facility
Line 16 Position(s) 35	Numeric	1	Number of Qualified Dependents—3-Star (Return Line 21)	Number of dependents who attended a <b>3-star</b> facility
Line 16 Position(s) 42	Numeric	1	Number of Qualified Dependents—2-Star (Return Line 21)	Number of dependents who attended a <b>2-star</b> facility
Line 18 Position(s) 71-77	Numeric	7	Return Line 22	Louisiana Citizens Insurance Credit

Use "0"  
(zero) as  
the  
default.

## Printed Variable Data Fields – IT-540B-2D Return (Page 3) – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 20 Position(s) 71-77	Numeric	7	Return Line 23	Other Refundable Tax Credits – Schedule F-NR, Line 7
Line 23 Position(s) 71-77	Numeric	7	Return Line 24	Louisiana Tax Withheld for 2013
Line 25 Position(s) 71-77	Numeric	7	Return Line 25	Credit Carried Forward from 2012
Line 27 Position(s) 71-77	Numeric	7	Return Line 26	Paid by Composite Partnership Filing
Line 29 Position(s) 71-77	Numeric	7	Return Line 27	Amount of Estimated Payments for 2013
Line 31 Position(s) 71-77	Numeric	7	Return Line 28	Amount Paid with Extension Request
Line 34 Position(s) 71-77	Numeric	7	Return Line 29	Total Refundable Tax Credits and Payments – Add Lines 20 and 21 – 28. (Do not include Lines 20A and 20B.)
Line 36 Position(s) 71-77	Numeric	7	Return Line 30	Overpayment: - If Line 29 = Line 19, print “0” (zero) on Lines 30 – 37 and go to Line 38. - If Line 29 > Line 19, subtract Line 19 from Line 29 and print result here. - If Line 29 < Line 19, print “0” (zero) on Lines 30 – 36 and go to Line 37.
Line 38 Position(s) 57	Alpha	1	Farmer Indicator (Return Line 31)	Print an “X” (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the “X” if applicable.
Line 38 Position(s) 71-77	Numeric	7	Return Line 31	Underpayment Penalty for Estimated Tax – See Form R-210NR.
Line 40 Position(s) 71-77	Numeric	7	Return Line 32	Adjusted Overpayment: - If Line 31 = Line 30, print “0” (zero) on Lines 32 – 37 and go to Line 38. - If Line 31 > Line 30, print “0” (zero) on Lines 32 – 36 and go to Line 37. - If Line 31 < Line 30, subtract Line 31 from Line 30 and print result here.
Line 42 Position(s) 71-77	Numeric	7	Return Line 33	Total Donations – Schedule D-NR, Line 26 (Must not be greater than Line 32.)
Line 45 Position(s) 71-77	Numeric	7	Return Line 34	Subtotal – Subtract Line 33 from Line 32.
Line 47 Position(s) 71-77	Numeric	7	Return Line 35	Amount Credited to 2014

## Printed Variable Data Fields – IT-540B-2D Return (Page 3) – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 50 Position(s) 57	Numeric	1	Refund Option (Return Line 36)	Mark the appropriate number for the refund option that the taxpayer selects: 1 = MyRefund Card 2 = Paper check 3 = Direct deposit <b>If not applicable, leave blank.</b>
Line 50 Position(s) 71-77	Numeric	7	Return Line 36	Amount to be Refunded – Subtract Line 35 from Line 34.
Line 56 Position(s) 22	Alpha	1	Direct Deposit—Checking Account Type	Print an “X” (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the “X” if applicable. <b>If not applicable, leave blank.</b>
Line 56 Position(s) 31	Alpha	1	Direct Deposit—Savings Account Type	Print an “X” (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the “X” if applicable. <b>If not applicable, leave blank.</b>

## Printed Variable Data Fields – IT-540-2D Return (Page 3) – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 56 Position(s) 65	Alpha	1	Direct Deposit—Refund Forwarded Outside U.S.— Yes	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. <b>If not applicable, leave blank.</b>
Line 56 Position(s) 72	Alpha	1	Direct Deposit—Refund Forwarded Outside U.S.— No	Print an "X" (uppercase) in the specified position in order to denote the indicator. Do not print a box, only the "X" if applicable. <b>If not applicable, leave blank.</b>
Line 58 Position(s) 17-25	Numeric	9	Direct Deposit—Routing Number	Direct Deposit—Routing Number (9 digits) <b>If not applicable, leave blank.</b>
Line 58 Position(s) 46-62	Alphanumeric	17	Direct Deposit—Account Number	Direct Deposit—Account Number (up to 17 characters) <b>If not applicable, leave blank.</b>
Line 61 Position(s) 38-41	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha, uppercase only. If last name is less than four letters, leave the last position(s) blank. <b>Punctuation and hyphens should be omitted.</b> Name code examples:    John Brown = BROW John Bow    = BOW

**NOTE:** There is an additional printed variable data field (on Return Line 26) on Page 3 of the return that is not listed above. Although that field does not need to meet any particular specifications (which is the reason it is not listed), it **MUST** be completed when applicable.

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

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

**Left-Corner Anchor:** 1 positioned 1/2" from the left edge and 1/2" from the top edge.

**Right-Corner Anchor:** 1 positioned 1/2" from the right edge and 1/2" from the bottom edge.

**Reference Points (2):**  
1 positioned on Line 16 in Position 50.  
1 positioned on Line 60 in Position 23.

**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 (6493) must be printed as specified on Page 2 of this document and positioned on Line 62 in Positions 74-77.

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

**Printed Variable Data Fields – IT-540B-2D Return (Page 4)**

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 5 Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.
Line 8 Position(s) 71-77	Numeric	7	Return Line 37	Amount Owed: - If Line 29 < Line 19, subtract Line 29 from Line 19 and print result here. - If Line 31 > Line 30, subtract Line 30 from Line 31 and print result here. - If Line 34 > 0, print "0" (zero) on Lines 37 – 47. - If Line 34 = 0, print "0" (zero) here and go to Line 38.
Line 10 Position(s) 71-77	Numeric	7	Return Line 38	Additional Donation to Military Family Assistance Fund
Line 12 Position(s) 71-77	Numeric	7	Return Line 39	Additional Donation to Coastal Protection and Restoration Fund
Line 14 Position(s) 71-77	Numeric	7	Return Line 40	Additional Donation to Louisiana Chapter of the National Multiple Sclerosis Society Fund
Line 16 Position(s) 71-77	Numeric	7	Return Line 41	Additional Donation to Louisiana Food Bank Association
Line 18 Position(s) 71-77	Numeric	7	Return Line 42	Additional Donation to the SNAP Fraud and Abuse Detection and Prevention Fund
Line 20 Position(s) 71-77	Numeric	7	Return Line 43	Interest – Interest Calculation worksheet, Line 5

## Printed Variable Data Fields – IT-540B-2D Return (Page 4) – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 22 Position(s) 71-77	Numeric	7	Return Line 44	Delinquent Filing Penalty – Delinquent Filing Penalty worksheet, Line 7
Line 24 Position(s) 71-77	Numeric	7	Return Line 45	Delinquent Payment Penalty – Delinquent Payment Penalty worksheet, Line 7
Line 26 Position(s) 58	Alpha	1	Farmer Indicator (Return Line 46)	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) 71-77	Numeric	7	Return Line 46	Underpayment Penalty for Tax Due – See Form R-210NR.
Line 28 Position(s) 71-77	Numeric	7	Return Line 47	Balance Due Louisiana – Add Lines 37 – 46.
Line 40 Position(s) 27-29	Numeric	3	Status of Return	Status of Return: Position 27: Mark "0" if Line 35 = 0. Mark "1" if Line 35 > 0. (Credit to 2014) Position 28: Mark "0" if Line 36 = 0. Mark "1" if Line 36 > 0. (Refund) Position 29: Mark "0" if Line 47 = 0. Mark "1" if Line 47 > 0. (Balance Due) Examples: If Line 36 is \$200 and Lines 35 and 47 are zero, mark "010". If Line 35 is \$100, Line 36 is \$200, and Line 47 is zero, mark "110".
Line 43 Position(s) 24-29	Numeric	6	Contribution/Donation Status	Contribution and Donation Status (right-justified): Position 24: Mark "0" if Line 33 = 0. Mark "1" if Line 33 > 0. Position 25: Mark "0" if Line 38 = 0. Mark "1" if Line 38 > 0. Position 26: Mark "0" if Line 39 = 0. Mark "1" if Line 39 > 0. Position 27: Mark "0" if Line 40 = 0. Mark "1" if Line 40 > 0. Position 28: Mark "0" if Line 41 = 0. Mark "1" if Line 41 > 0. Position 29: Mark "0" if Line 42 = 0. Mark "1" if Line 42 > 0. Examples: If Lines 33, 39, 40, 41, and 42 are zero and Line 38 is \$100, mark "010000". If Line 33 is \$100, Line 40 is \$200, and Lines 38, 39, 41, and 42 are zero, mark "100100".
Line 54 Position(s) 70-78	Alphanumeric	9	Preparer's FEIN/ PTIN/SSN	Preparer's FEIN, PTIN, or SSN. If not applicable, leave blank.
Line 55 Position(s) 15-18	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha, uppercase only. If last name is less than four letters, leave the last position(s) blank. <b>Punctuation and hyphens should be omitted.</b> Name code examples:     John Brown = BROW John Bow = BOW_

## Printed Variable Data Fields – IT-540B-2D Return (Page 4) – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 55 Position(s) 21-24	Alphanumeric	4	Address Code	Derived from first four positions of address, including blank spaces. If address is less than four characters, leave the last position(s) blank. <b>Punctuation and hyphens should be omitted.</b> Address code examples: 1234 Main St. = 1234 12 Main St. = 12_M P.O. Box = PO_B
Line 58 Position(s) 71-74	Numeric	4	SPEC CODE	Special event code, which will be issued as needed. If not applicable, leave blank.
Line 59 Position(s) 33-57	Alphanumeric	25	LDR's Mailing Address	If Line 47 = 0, print: PO BOX 3440 If Line 47 > 0, print: PO BOX 3550
Line 60 Position(s) 33-57	Alphanumeric	25	LDR's Mailing City State ZIP	If Line 47 = 0, print: BATON ROUGE LA 70821-3440 If Line 47 > 0, print: BATON ROUGE LA 70821-3550

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

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

**Left-Corner Anchor:** 1 positioned 1/2" from the left edge and 1/2" from the top edge.

**Right-Corner Anchor:** 1 positioned 1/2" from the right edge and 1/2" from the bottom edge.

**Reference Points (2):**  
 1 positioned on Line 14 in Position 47.  
 1 positioned on Line 53 in Position 45.

**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 (6495) must be printed as specified on Page 2 of this document and positioned on Line 62 in Positions 74-77.

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

### Printed Variable Data Fields – IT-540-2D Schedule D

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 5 Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.
Line 14 Position(s) 71-77	Numeric	7	Schedule D-NR, Line 1	Adjusted Overpayment – Return Line 32
Line 18 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 2	Military Family Assistance Fund
Line 20 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 3	Coastal Protection and Restoration Fund
Line 22 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 4	SNAP Fraud and Abuse Detection and Prevention Fund
Line 24 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 5	START Program
Line 26 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 6	Wildlife Habitat and Natural Heritage Trust Fund
Line 28 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 7	Louisiana Prostate Cancer Trust Fund
Line 30 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 8	Louisiana Animal Welfare Commission
Line 32 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 9	National Lung Cancer Partnership
Line 34 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 10	Louisiana Chapter of the National Multiple Sclerosis Society Fund
Line 36 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 11	Louisiana Food Bank Association
Line 38 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 12	Louisiana Bicentennial Commission and Battle of New Orleans Bicentennial Commission
Line 40 Position(s) 35-39	Numeric	5	Schedule D-NR, Line 13	Make-A-Wish Foundation of the Texas Gulf Coast and Louisiana
Line 18 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 14	Louisiana Association of United Ways / LA 2-1-1

## Printed Variable Data Fields – IT-540-2D Schedule D – continued

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 20 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 15	Center of Excellence for Autism Spectrum Disorder
Line 22 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 16	Alliance for the Advancement of End of Life Care
Line 24 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 17	American Red Cross
Line 26 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 18	New Opportunities Waiver Fund
Line 28 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 19	Friends of Palmetto Island State Park
Line 30 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 20	Dreams Come True
Line 32 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 21	Louisiana Coalition Against Domestic Violence, Inc.
Line 34 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 22	Decorative Lighting on the Crescent City Connection
Line 36 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 23	Operation and Maintenance of the New Orleans Ferries
Line 38 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 24	Louisiana National guard Honor Guard for Military Funerals
Line 40 Position(s) 73-77	Numeric	5	Schedule D-NR, Line 25	Bastion Community of Resilience
Line 43 Position(s) 71-77	Numeric	7	Schedule D-NR, Line 26	Total Donations – Add Lines 2 – 25. This amount cannot be greater than Line 1.

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

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

**Left-Corner Anchor:** 1 positioned 1/2" from the left edge and 1/2" from the top edge.

**Right-Corner Anchor:** 1 positioned 1/2" from the right edge and 1/2" from the bottom edge.

**Reference Points (2):**  
1 positioned on Line 23 in Position 39.  
1 positioned on Line 57 in Position 48.

**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 (6496) must be printed as specified on Page 2 of this document and positioned on Line 62 in Positions 74-77.

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

**Printed Variable Data Fields – IT-540B-2D Schedule F-NR and H-NR**

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 5 Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.
Line 21 Position(s) 73-77	Numeric	5	Schedule F-NR, Line 1D	Fees for noncommercial Louisiana hunting and fishing licenses
Line 27 Position(s) 55-57	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 2)	Enter 3-character credit code. If not applicable, leave blank.
Line 27 Position(s) 71-77	Numeric	7	Schedule F-NR, Line 2	Additional Refundable Credit, Line 2
Line 29 Position(s) 55-57	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 3)	Enter 3-character credit code. If not applicable, leave blank.
Line 29 Position(s) 71-77	Numeric	7	Schedule F-NR, Line 3	Additional Refundable Credit, Line 3
Line 31 Position(s) 55-57	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 4)	Enter 3-character credit code. If not applicable, leave blank.
Line 31 Position(s) 71-77	Numeric	7	Schedule F-NR, Line 4	Additional Refundable Credit, Line 4
Line 33 Position(s) 55-57	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 5)	Enter 3-character credit code. If not applicable, leave blank.
Line 33 Position(s) 71-77	Numeric	7	Schedule F-NR, Line 5	Additional Refundable Credit, Line 5
Line 35 Position(s) 55-57	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 6)	Enter 3-character credit code. If not applicable, leave blank.
Line 35 Position(s) 71-77	Numeric	7	Schedule F-NR, Line 6	Additional Refundable Credit, Line 6
Line 37 Position(s) 71-77	Numeric	7	Schedule F-NR, Line 7	Total Refundable tax Credits – Add Lines 1D and 2 – 6.
Line 51 Position(s) 71-77	Numeric	7	Schedule H-NR, Line 1	Federal Income Tax Liability
Line 53 Position(s) 71-77	Numeric	7	Schedule H-NR, Line 2	Federal Disaster Credits Allowed by IRS
Line 55 Position(s) 71-77	Numeric	7	Schedule H-NR, Line 3	Total – Add Lines 1 and 2.

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

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

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

- Left-Corner Anchor:** 1 positioned 1/2" from the left edge and 1-1/2" from the top edge.
- Right-Corner Anchor:** 1 positioned 1/2" from the right edge and 1/2" from the bottom edge.
- Reference Points (2):**  
 1 positioned on Line 15 in Position 38.  
 1 positioned on Line 27 in Position 58.

**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 (6497) must be printed as specified on Page 2 of this document and positioned on Line 62 in Positions 74-77.

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

### Printed Variable Data Fields – IT-540B-2D Schedule G-NR

Exact Placement on Grid	Field Type	Field Length	Field Name	Comments
Line 5 Position(s) 72-80	Numeric	9	Primary Social Security Number	No punctuation allowed.
Line 10 Position(s) 79-80	Numeric	2	Schedule G-NR, Line 1D	Total Number of Qualifying Individuals
Line 13 Position(s) 74-77	Numeric	4	Schedule G-NR, Line 1E	Multiply Line 1D by \$100.
Line 21 Position(s) 72-77	Numeric	6	Schedule G-NR, Line 2A	Value of Computer/Technological Equipment Donated
Line 23 Position(s) 72-77	Numeric	6	Schedule G-NR, Line 2B	Multiply Line 2A by 40%.
Line 26 Position(s) 71-77	Numeric	7	Schedule G-NR, Line 3A	Certain Federal Tax Credits
Line 28 Position(s) 76-77	Numeric	2	Schedule G-NR, Line 3B	Multiply Line 3A by 10%. (Limited to \$25)
Line 32 Position(s) 56-58	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 4)	Enter 3-digit credit code. If not applicable, leave blank.
Line 32 Position(s) 71-77	Numeric	7	Schedule G-NR, Line 4	Additional Nonrefundable Credit, Line 4
Line 34 Position(s) 56-58	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 5)	Enter 3-digit credit code. If not applicable, leave blank.
Line 34 Position(s) 71-77	Numeric	7	Schedule G-NR, Line 5	Additional Nonrefundable Credit, Line 5
Line 36 Position(s) 56-58	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 6)	Enter 3-digit credit code. If not applicable, leave blank.
Line 36 Position(s) 71-77	Numeric	7	Schedule G-NR, Line 6	Additional Nonrefundable Credit, Line 6
Line 38 Position(s) 56-58	Numeric	3	(Nonrefundable Credit Code Schedule G-NR, Line 7)	Enter 3-digit credit code. If not applicable, leave blank.
Line 38 Position(s) 71-77	Numeric	7	Schedule G-NR, Line 7	Additional Nonrefundable Credit, Line 7

## Printed Variable Data Fields – IT-540B-2D Schedule G-NR – continued

Exact Placement on Grid		Field Type	Field Length	Field Name	Comments
Line 40	Position(s) 56-58	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 8)	Enter 3-digit credit code. If not applicable, leave blank.
Line 40	Position(s) 71-77	Numeric	7	Schedule G-NR, Line 8	Additional Nonrefundable Credit, Line 8
Line 42	Position(s) 56-58	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 9)	Enter 3-digit credit code. If not applicable, leave blank.
Line 42	Position(s) 71-77	Numeric	7	Schedule G-NR, Line 9	Additional Nonrefundable Credit, Line 9
Line 44	Position(s) 71-77	Numeric	7	Schedule G-NR, Line 10	Total Nonrefundable Tax Credits – Add Lines 1E, 2B, 3B, and 4 – 9.

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

## 2-D Barcode Specifications:

### Requirements:

- The 2-D barcode should be placed on Page 4 of the return on Lines 35-43 in Positions 35-80. 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:

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 **6490** for the Louisiana nonresident form (IT-540B-2D).
- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.
- **Software/Form Version** is a vendor-defined version number that reflects the software and form revision used to produce the barcode.

**Government Specific Data** – For a detailed layout of the government specific data, see Pages 22 through 29 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 Resident (IT-540) and Nonresident (IT-540B) Individual Income Tax Forms**

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

**2-D Barcode Sample**



## 2-D Barcode Fields for Form IT-540B-2D

Header Information				
Field No.	Field Type	Field Length	Field Name	Comments
1	Alphanumeric	2	Header Version	Value is <b>T1</b> .
2	Numeric	4	Developer Code	4-digit code (See Appendix 1 of the <a href="#">2-D Bar Coding Standards</a> .) 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 <b>LA</b> .
4	Numeric	4	Description	Value is <b>6490</b> .
5	Numeric	1	Specification Version	Value is <b>0</b> .
6	Variable	Variable	Software/Form Version	Vendor-defined version number that reflects the software and form revision used to produce the barcode.
Government Specific Data				
IT-540B-2D Return (Page 1)				
Field No.	Field Type	Max. Field Length	Field Name	Comments
7	Numeric	4	Software Developer ID	Software Developer Identification Number (4-digit number) assigned by LDR, which may differ from the software developer ID in Field 2 above
8	Numeric	9	Primary Social Security Number	Primary Taxpayer's Social Security Number (no dashes, hyphens, parentheses, or special characters)
9	Numeric	9	Secondary Social Security Number	Spouse's Social Security Number (no dashes, hyphens, parentheses, or special characters) – This is a required field for both filing statuses of <b>married filing jointly</b> and <b>married filing separately</b> . If not applicable, leave blank.
10	Alphanumeric	25	Primary Taxpayer's First Name	Primary taxpayer's first name
11	Alphanumeric	1	Primary Taxpayer's Middle Initial	Primary taxpayer's middle initial
12	Alphanumeric	25	Primary Taxpayer's Last Name	Primary taxpayer's last name
13	Alphanumeric	3	Primary Taxpayer's Name Suffix	Primary taxpayer's name suffix
14	Alphanumeric	25	Secondary Taxpayer's First Name	Spouse's first name
15	Alphanumeric	1	Secondary Taxpayer's Middle Initial	Spouse's middle initial
16	Alphanumeric	25	Secondary Taxpayer's Last Name	Spouse's last name
17	Alphanumeric	3	Secondary Taxpayer's Name Suffix	Spouse's name suffix
18	Alphanumeric	35	Taxpayer's Mailing Address	Taxpayer's address – This is a required field. Use "GENERAL DELIVERY" as the default.
19	Alphanumeric	25	Taxpayer's Mailing City	City (mailing address)
20	Alpha	2	Taxpayer's Mailing State	State (mailing address)
21	Numeric	9	Taxpayer's Mailing ZIP Code	ZIP Code (mailing address) – No hyphen.
22	Numeric	10	Daytime Telephone	Taxpayer's daytime area code and telephone number
23	Numeric	8	Taxable Period	Taxable Period – Example: <b>12312013</b>
24	Numeric	4	Form ID Number	Form ID Number -- <b>6490</b>
25	Numeric	1	Name Change Indicator	Mark "1" if name has changed. Mark "0" if not applicable.
26	Numeric	1	Decedent Filing Indicator	Mark "1" for decedent taxpayer. Mark "0" if not applicable.

## Government Specific Data (continued)

IT-540B-2D Return (Page 1) – continued					
Field No.	Field Type	Max. Field Length	Field Name	Comments	
27	Numeric	1	Spouse Decedent Indicator	Mark "1" for decedent spouse. Mark "0" if not applicable.	
28	Numeric	1	Amended Return Indicator	Mark "1" for an amended return. Mark "0" if not applicable.	
29	Numeric	1	NOL Carryback Indicator	Mark "1" for NOL carryback. Mark "0" if not applicable.	
30	Numeric	8	Taxpayer's Date of Birth	Format must be mmddyyyy. No punctuation allowed.	
31	Numeric	8	Spouse's Date of Birth		
32	Numeric	1	Filing Status		
33	Numeric	1	Self Exemption – 65 or over	Mark "1" for "Yourself - 65 or older". Mark "0" if not applicable.	<b>NOTE:</b> Fields for the exemptions "Yourself" and "Spouse" have been purposely omitted from the 2-D barcode layout.
34	Numeric	1	Self Exemption – Blind	Mark "1" for "Yourself - Blind". Mark "0" if not applicable.	
35	Numeric	1	Spouse Exemption – 65 or over	Mark "1" for "Spouse - 65 or older". Mark "0" if not applicable.	
36	Numeric	1	Spouse Exemption – Blind	Mark "1" for "Spouse - Blind". Mark "0" if not applicable.	
37	Numeric	2	Dependents	Line 6C, total number of dependents	
38	Numeric	2	Total Exemptions	Line 6D, total exemptions claimed	
IT-540B-2D Return (Page 2)					
Field No.	Field Type	Max. Field Length	Field Name	Comments	
39	Numeric	5	W-2 Wages	If "1" is marked in Field <b>40</b> , enter the wages from the W-2(s). Leave blank if not applicable.	
40	Numeric	1	Federal Return Not Required Indicator	Mark "1" if federal return not required. (If "1" is marked, Lines <b>7 – 16</b> must be left blank and Line <b>17</b> must be "0.") Mark "0" if not applicable.	
41	Numeric	7	Return Line 7	Federal Adjusted Gross Income (AGI) – NPR worksheet, Federal column, Line <b>12</b> .	
42	Numeric	7	Return Line 8	Louisiana Adjusted Gross Income – NPR worksheet, Louisiana column, Line <b>33</b> .	
43	Numeric	5	Return Line 9	Ratio of Louisiana AGI to Federal AGI – Divide Line <b>8</b> by Line <b>7</b> . Carry out to 4 decimal places, <b>rounding down</b> . Since no punctuation is allowed, enter the result <b>without the decimal point</b> . Example: If     Line 7 = 75000 and Line 8 = 35555, then Line 9 = 4740	
44	Numeric	7	Return Line 10A	Federal Itemized Deductions	
45	Numeric	5	Return Line 10B	Federal Standard Deduction	

## Government Specific Data (continued)

IT-540B-2D Return (Page 2) – continued				
Field No.	Field Type	Max. Field Length	Field Name	Comments
46	Numeric	7	Return Line 10C	Excess Federal Itemized Deductions – Subtract Line <b>10B</b> from Line <b>10A</b> .
47	Numeric	1	Federal Disaster Credit Indicator	Mark "1" if federal income tax has been decreased by the federal disaster credit allowed by IRS (Line <b>10D</b> ). Mark "0" if not applicable.
48	Numeric	7	Return Line 10D	Federal Income Tax
49	Numeric	7	Return Line 10E	Total Deductions – Add Lines <b>10C</b> and <b>10D</b> .
50	Numeric	7	Return Line 10F	Allowable Deductions – Multiply Line <b>10E</b> by the ratio on Line <b>9</b> .
51	Numeric	7	Return Line 11	Louisiana Net Income – Subtract Line <b>10F</b> from Line <b>8</b> .
52	Numeric	7	Return Line 12	Louisiana Income Tax – Tax Computation worksheet, Line <b>I</b>
53	Numeric	4	Return Line 13A	Federal Child Care Credit
54	Numeric	4	Return Line 13B	Louisiana Nonrefundable Child Care Credit – See Nonrefundable Child Care Credit worksheet.
55	Numeric	4	Return Line 13C	Louisiana Nonrefundable Child Care Credit Carried Forward – See Nonrefundable Child Care Credit worksheet.
56	Numeric	4	Return Line 13D	Louisiana Nonrefundable School Readiness Credit – See Nonrefundable School Readiness Credit worksheet.
57	Numeric	1	Number of Qualified Dependents—5-Star (Return Line 13D)	Number of dependents who attended a <b>5-star</b> facility
58	Numeric	1	Number of Qualified Dependents—4-Star (Return Line 13D)	Number of dependents who attended a <b>4-star</b> facility
59	Numeric	1	Number of Qualified Dependents—3-Star (Return Line 13D)	Number of dependents who attended a <b>3-star</b> facility
60	Numeric	1	Number of Qualified Dependents—2-Star (Return Line 13D)	Number of dependents who attended a <b>2-star</b> facility
61	Numeric	4	Return Line 13E	Louisiana Nonrefundable School Readiness Credit Carried Forward
62	Numeric	4	Return Line 14	Education Credit – Multiply number of qualified dependents who attended school (K – 12) by \$25.
63	Numeric	7	Return Line 15	Other Nonrefundable Tax Credits – Schedule G-NR, Line <b>10</b>
64	Numeric	7	Return Line 16	Total Nonrefundable Tax Credits – Add Lines <b>13B</b> – <b>15</b> .
65	Numeric	7	Return Line 17	Adjusted Louisiana Income Tax – Subtract Line <b>16</b> from Line <b>12</b> .
66	Numeric	1	Consumer Use Tax Indicator	Consumer Use Tax (must be "1" or "2"): Mark "1" if no use tax due. Mark "2" if amount from worksheet.
67	Numeric	7	Return Line 18	Consumer Use Tax worksheet, Line <b>2</b>
68	Numeric	7	Return Line 19	Total Income Tax and Consumer Use Tax – Add Lines <b>17</b> and <b>18</b> .
IT-540B-2D Return (Page 3)				
Field No.	Field Type	Max. Field Length	Field Name	Comments
69	Numeric	4	Return Line 20	Louisiana Refundable Child Care Credit – See Refundable Child Care Credit worksheet.
70	Numeric	4	Return Line 20A	Refundable Child Care Credit worksheet, Line <b>3</b>
71	Numeric	4	Return Line 20B	Refundable Child Care Credit worksheet, Line <b>6</b>

## Government Specific Data (continued)

IT-540B-2D Return (Page 3) – continued				
Field No.	Field Type	Max. Field Length	Field Name	Comments
72	Numeric	5	Return Line 21	Louisiana Refundable School Readiness Credit – See Refundable School Readiness Credit worksheet.
73	Numeric	1	Number of Qualified Dependents—5-Star (Return Line 21)	Number of dependents who attended a <b>5-star</b> facility
74	Numeric	1	Number of Qualified Dependents—4-Star (Return Line 21)	Number of dependents who attended a <b>4-star</b> facility
75	Numeric	1	Number of Qualified Dependents—3-Star (Return Line 21)	Number of dependents who attended a <b>3-star</b> facility
76	Numeric	1	Number of Qualified Dependents—2-Star (Return Line 21)	Number of dependents who attended a <b>2-star</b> facility
77	Numeric	7	Return Line 22	Louisiana Citizens Insurance Credit
78	Numeric	7	Return Line 23	Other Refundable Tax Credits – Schedule F-NR, Line 7
79	Numeric	7	Return Line 24	Louisiana Tax Withheld for <b>2013</b>
80	Numeric	7	Return Line 25	Credit Carried Forward from <b>2012</b>
81	Numeric	7	Return Line 26	Paid by Composite Partnership Filing
82	Numeric	7	Return Line 27	Amount of Estimated Payments for <b>2013</b>
83	Numeric	7	Return Line 28	Amount Paid with Extension Request
84	Numeric	7	Return Line 29	Total Refundable Tax Credits and Payments – Add Lines <b>20</b> and <b>21</b> – <b>28</b> . Do not include Lines <b>20A</b> and <b>20B</b> .
85	Numeric	7	Return Line 30	Overpayment: <ul style="list-style-type: none"> <li>- If Line <b>29</b> = Line <b>19</b>, mark “0” (zero) on Lines <b>30</b> – <b>37</b>.</li> <li>- If Line <b>29</b> &gt; Line <b>19</b>, subtract Line <b>19</b> from Line <b>29</b>. Enter here.</li> <li>- If Line <b>29</b> &lt; Line <b>19</b>, mark “0” (zero) on Lines <b>30</b> – <b>36</b>.</li> </ul>
86	Numeric	1	Farmer Indicator (Return Line 31)	Farmer Indicator Box for Underpayment Penalty: Mark “1” if farmer indicator box is checked on Line <b>31</b> . Mark “0” if not applicable.
87	Numeric	7	Return Line 31	Underpayment Penalty for Estimated Tax – See Form R-210NR.
88	Numeric	7	Return Line 32	Adjusted Overpayment: <ul style="list-style-type: none"> <li>- If Line <b>31</b> = Line <b>30</b>, mark “0” (zero) on Lines <b>32</b> – <b>37</b>.</li> <li>- If Line <b>31</b> &gt; Line <b>30</b>, mark “0” (zero) on Lines <b>32</b> – <b>36</b>, subtract Line <b>30</b> from Line <b>31</b>, and enter the balance on Line <b>37</b>.</li> <li>- If Line <b>31</b> &lt; Line <b>30</b>, subtract Line <b>31</b> from Line <b>30</b>. Enter here.</li> </ul>
89	Numeric	7	Return Line 33	Total Donations – Schedule D-NR, <b>Line 26</b>
90	Numeric	7	Return Line 34	Subtotal – Subtract Line <b>33</b> from Line <b>32</b> .
91	Numeric	7	Return Line 35	Amount Credited to <b>2014</b>
92	Numeric	1	Refund Option (Return Line 36)	Mark the appropriate number for the refund option that the taxpayer selects: 1 = MyRefund Card 2 = Paper check <b>3 = Direct deposit</b> <b>If not applicable, leave blank.</b>
93	Numeric	7	Return Line 36	Amount to be Refunded – Subtract Line <b>35</b> from Line <b>34</b> .

## Government Specific Data (continued)

IT-540B-2D Return (Page 3) – continued				
Field No.	Field Type	Max. Field Length	Field Name	Comments
94	Numeric	1	Direct Deposit—Bank Account Type	Direct Deposit—Bank Account Type: Mark "1" if checking. Mark "2" if savings. <b>If not applicable, leave blank.</b>
95	Numeric	1	Direct Deposit—Refund Forwarded Outside U.S.	Will refund be forwarded outside the U.S.? Mark "1" if yes. Mark "0" if no. <b>If not applicable, leave blank.</b>
96	Numeric	9	Direct Deposit—Routing Number	Direct Deposit—Routing Number (9 digits) <b>If not applicable, leave blank.</b>
97	Alphanumeric	17	Direct Deposit—Account Number	Direct Deposit—Account Number (up to 17 characters) <b>If not applicable, leave blank.</b>
IT-540B-2D Return (Page 4)				
Field No.	Field Type	Max. Field Length	Field Name	Comments
98	Numeric	7	Return Line 37	Amount Owed: - If Line 29 < Line 19, subtract Line 29 from Line 19. Enter here. - If Line 31 > Line 30, subtract Line 30 from Line 31. Enter here. - If Line 34 > 0, mark "0" on Lines 37 – 46.
99	Numeric	7	Return Line 38	Additional Donation to Military Family Assistance Fund
100	Numeric	7	Return Line 39	Additional Donation to Coastal Protection and Restoration Fund
101	Numeric	7	Return Line 40	Additional Donation to Louisiana Chapter of the National Multiple Sclerosis Society Fund
102	Numeric	7	Return Line 41	Additional Donation to Louisiana Food Bank Association
103	Numeric	7	Return Line 42	<b>Additional Donation to the SNAP Fraud and Abuse Detection and Prevention Fund</b>
104	Numeric	7	Return Line 43	Interest – Interest Calculation worksheet, Line 5
105	Numeric	7	Return Line 44	Delinquent Filing Penalty – Delinquent Filing Penalty worksheet, Line 7
106	Numeric	7	Return Line 45	Delinquent Payment Penalty – Delinquent Payment Penalty worksheet, Line 7
107	Numeric	1	Farmer Indicator (Return Line 46)	Farmer Indicator Box for Underpayment Penalty: Mark "1" if farmer indicator box is checked on Line 46. Mark "0" if not applicable.
108	Numeric	7	Return Line 46	Underpayment Penalty for Tax Due – See Form R-210NR
109	Numeric	7	Return Line 47	Balance Due Louisiana – Add Lines 37 – 45.
110	Numeric	3	Status of Return	Status of Return: 1 <sup>st</sup> Digit: Mark "0" if Line 35 = 0. Mark "1" if Line 35 > 0. (Credit to 2014) 2 <sup>nd</sup> Digit: Mark "0" if Line 36 = 0. Mark "1" if Line 36 > 0. (Refund) 3 <sup>rd</sup> Digit: Mark "0" if Line 47 = 0. Mark "1" if Line 47 > 0. (Balance Due) Examples: If Line 36 is \$200 and Lines 35 and 47 are zero, mark "010". If Line 35 is \$100, Line 36 is \$200, and Line 47 is zero, mark "110".

## Government Specific Data (continued)

IT-540B-2D Return (Page 4) – continued				
Field No.	Field Type	Max. Field Length	Field Name	Comments
111	Numeric	6	Contribution/Donation Status	Contribution and Donation Status (right-justified): 1 <sup>st</sup> Digit: Mark "0" if Line 33 = 0. Mark "1" if Line 33 > 0. 2 <sup>nd</sup> Digit: Mark "0" if Line 38 = 0. Mark "1" if Line 38 > 0. 3 <sup>rd</sup> Digit: Mark "0" if Line 39 = 0. Mark "1" if Line 39 > 0. 4 <sup>th</sup> Digit: Mark "0" if Line 40 = 0. Mark "1" if Line 40 > 0. 5 <sup>th</sup> Digit: Mark "0" if Line 41 = 0. Mark "1" if Line 41 > 0. 6 <sup>th</sup> Digit: Mark "0" if Line 42 = 0. Mark "1" if Line 42 > 0. Examples: If Lines 33, 39, 40, 41, and 42 are zero and Line 38 is \$100, mark "010000". If Line 33 is \$100, Line 40 is \$200, Line 42 is \$50, and Lines 38, 39, and 41 are zero, mark "100101".
112	Alphanumeric	9	Preparer's FEIN/ PTIN/SSN	Preparer's FEIN, PTIN, or SSN. If not applicable, leave blank.
113	Alpha	4	Name Code	Derived from first four positions of last name. Must be alpha, uppercase only. If last name is less than four letters, leave the last position(s) blank. <b>Punctuation and hyphens should be omitted.</b> Name code examples: John Brown = BROW John Bow = BOW
114	Alphanumeric	4	Address Code	Derived from first four positions of address, including blank spaces. If address is less than four characters, leave the last position(s) blank. <b>Punctuation and hyphens should be omitted.</b> Address code examples: 1234 Main St. = 1234 12 Main St. = 12_M P.O. Box = PO_B
115	Numeric	4	SPEC CODE	Special event code, which will be issued as needed. If not applicable, leave blank.
IT-540-2D Schedule D-NR				
Field No.	Field Type	Max. Field Length	Field Name	Comments
116	Numeric	7	Schedule D-NR, Line 1	Adjusted Overpayment – Return Line 32
117	Numeric	5	Schedule D-NR, Line 2	Military Family Assistance Fund
118	Numeric	5	Schedule D-NR, Line 3	Coastal Protection and Restoration Fund
119	Numeric	5	Schedule D-NR, Line 4	SNAP Fraud and Abuse Detection and Prevention Fund
120	Numeric	5	Schedule D-NR, Line 5	START Program
121	Numeric	5	Schedule D-NR, Line 6	Wildlife Habitat and Natural Heritage Trust Fund
122	Numeric	5	Schedule D-NR, Line 7	Louisiana Prostate Cancer Trust Fund
123	Numeric	5	Schedule D-NR, Line 8	Louisiana Animal Welfare Commission
124	Numeric	5	Schedule D-NR, Line 9	National Lung Cancer Partnership
125	Numeric	5	Schedule D-NR, Line 10	Louisiana Chapter of the National Multiple Sclerosis Society Fund

## Government Specific Data (continued)

IT-540-2D Schedule D-NR – continued				
Field No.	Field Type	Max. Field Length	Field Name	Comments
126	Numeric	5	Schedule D-NR, Line 11	Louisiana Food Bank Association
127	Numeric	5	Schedule D-NR, Line 12	Louisiana Bicentennial Commission and Battle of New Orleans Bicentennial Commission
128	Numeric	5	Schedule D-NR, Line 13	Make-A-Wish Foundation of the Texas Gulf Coast and Louisiana
129	Numeric	5	Schedule D-NR, Line 14	Louisiana Association of United Ways / LA 2-1-1
130	Numeric	5	Schedule D-NR, Line 15	Center of Excellence for Autism Spectrum Disorder
131	Numeric	5	Schedule D-NR, Line 16	Alliance for the Advancement of End of Life Care
132	Numeric	5	Schedule D-NR, Line 17	American Red Cross
133	Numeric	5	Schedule D-NR, Line 18	New Opportunities Waiver Fund
134	Numeric	5	Schedule D-NR, Line 19	Friends of Palmetto Island State Park
135	Numeric	5	Schedule D-NR, Line 20	Dreams Come True, Inc.
136	Numeric	5	Schedule D-NR, Line 21	Louisiana Coalition Against Domestic Violence, Inc.
137	Numeric	5	Schedule D-NR, Line 22	Decorative Lighting on the Crescent City Connection
138	Numeric	5	Schedule D-NR, Line 23	Operation and Maintenance of the New Orleans Ferries
139	Numeric	5	Schedule D-NR, Line 24	Louisiana National Guard Honor Guard for Military Funerals
140	Numeric	5	Schedule D-NR, Line 25	Bastion Community of Resilience
141	Numeric	7	Schedule D-NR, Line 26	Total Donations – Add Lines 2 – 25. This amount cannot be more than Line 1.
IT-540B-2D Schedule F-NR and H-NR				
Field No.	Field Type	Max. Field Length	Field Name	Comments
142	Numeric	5	Schedule F-NR, Line 1D	Fees for Louisiana noncommercial hunting and fishing licenses
143	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 2)	Enter 3-character credit code.
144	Numeric	7	Schedule F-NR, Line 2	Additional Refundable Credit, Line 2
145	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 3)	Enter 3-character credit code.
146	Numeric	7	Schedule F-NR, Line 3	Additional Refundable Credit, Line 3
147	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 4)	Enter 3-character credit code.
148	Numeric	7	Schedule F-NR, Line 4	Additional Refundable Credit, Line 4
149	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 5)	Enter 3-character credit code.
150	Numeric	7	Schedule F-NR, Line 5	Additional Refundable Credit, Line 5
151	Alphanumeric	3	Refundable Credit Code (Schedule F-NR, Line 6)	Enter 3-character credit code.
152	Numeric	7	Schedule F-NR, Line 6	Additional Refundable Credit, Line 6
153	Numeric	7	Schedule F-NR, Line 7	Total Refundable tax Credits – Add Lines 1D and 2 – 6.
154	Numeric	7	Schedule H-NR, Line 1	Federal Income Tax Liability
155	Numeric	7	Schedule H-NR, Line 2	Federal Disaster Credits Allowed by IRS
156	Numeric	7	Schedule H-NR, Line 3	Total – Add Lines 1 and 2.
IT-540B-2D Schedule G-NR				
Field No.	Field Type	Max. Field Length	Field Name	Comments
157	Numeric	2	Schedule G-NR, Line 1D	Total Number of Qualifying Individuals
158	Numeric	4	Schedule G-NR, Line 1E	Multiply Line 1D by \$100.
159	Numeric	6	Schedule G-NR, Line 2A	Value of Computer/Technological Equipment Donated

**Government Specific Data (continued)**

<b>IT-540B-2D Schedule G-NR – continued</b>				
<b>Field No.</b>	<b>Field Type</b>	<b>Max. Field Length</b>	<b>Field Name</b>	<b>Comments</b>
160	Numeric	6	Schedule G-NR, Line 2B	Multiply Line 2A by 40%.
161	Numeric	7	Schedule G-NR, Line 3A	Certain Federal Tax Credits
162	Numeric	2	Schedule G-NR, Line 3B	Multiply Line 3A by 10%. (Limited to \$25)
163	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 4)	Enter 3-digit credit code. If not applicable, leave blank.
164	Numeric	7	Schedule G-NR, Line 4	Additional Nonrefundable Credit, Line 10
165	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 5)	Enter 3-character credit code.
166	Numeric	7	Schedule G-NR, Line 5	Additional Nonrefundable Credit, Line 5
167	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 6)	Enter 3-character credit code.
168	Numeric	7	Schedule G-NR, Line 6	Additional Nonrefundable Credit, Line 6
169	Numeric	3	(Nonrefundable Credit Code Schedule G-NR, Line 7)	Enter 3-character credit code.
170	Numeric	7	Schedule G-NR, Line 7	Additional Nonrefundable Credit, Line 7
171	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 8)	Enter 3-character credit code.
172	Numeric	7	Schedule G-NR, Line 8	Additional Nonrefundable Credit, Line 8
173	Numeric	3	Nonrefundable Credit Code (Schedule G-NR, Line 9)	Enter 3-character credit code.
174	Numeric	7	Schedule G-NR, Line 9	Additional Nonrefundable Credit, Line 9
175	Numeric	7	Schedule G-NR, Line 10	Total Nonrefundable Tax Credits – Add Lines 1E, 2B, 3B, and 4 – 9.
<b>Trailer</b>				
176	Indicates the end of the data file. Value is *EOD*.			

**Modulus 10 Self-check Digit Computation:**

1. Multiply the unit's position and every alternate position of the base number by 2 starting with right most position.
2. Add the digits in the products to the digits in the base number that were not multiplied.
3. Subtract the sum from the next higher number ending in zero. The difference is the self-check digit.

**Example:**

Base Number	4 9 9 8 6 5 5 9
Right most position and every other position	9 5 6 9 4
Multiply by 2.	18, 10, 12, 18, 8
Add the digits in the product.	(1+8), (1+0), (1+2), (1+8), 8
Digits not multiplied.	5 5 8 9
Add.	(1+8)+5+(1+0)+5+(1+2)+8+(1+8)+9+8
Sum	57
Next higher number ending in zero	60
Subtract.	60-57
Self-check digit	3

**Submission of Test Samples:**

Substitute forms must be submitted to the Louisiana Department of Revenue for testing and approval prior to distribution. Only **hardcopy samples** are accepted for testing. The test samples of Form IT-540B-2D must use the scenarios that are found on Pages 32 through ? of this document. A test submission should include all returns and applicable schedules and worksheets for all 5 scenarios.

Testing of Form IT-540B-2D will begin ?. All test documents must be submitted to the department on or before December 30, 2013. Test submissions should be sent to:

Attention: Forms Management Unit  
Public Affairs Division, 7<sup>th</sup> Floor  
Louisiana Department of Revenue  
617 N. Third St.  
Baton Rouge, LA 70802-5428

Ten (10) business days will be required for our review and testing. Results will be issued via e-mail or fax. Questions, inquiries, comments, etc., should be directed to:

E-mail: [SubFormInquiries@LA.gov](mailto:SubFormInquiries@LA.gov)  
FAX: (225) 231-6220

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(Test scenarios will be inserted here.)

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