

**Louisiana General Information**

Mark if name has changed \_\_\_\_\_[1]

**Use Tax**

Enter the amount of any out-of-state purchases on which sales tax was not paid \_\_\_\_\_[2]

**Contributions**

Military Family Assistance Fund	_____ [3]	National Guard Honor Guard for Military Funerals	_____ [13]
Coastal Protection and Restoration Fund	_____ [4]	Louisiana State Troopers Charities, Inc	_____ [14]
START Program	_____ [5]	Louisiana Horse Rescue Association	_____ [15]
Wildlife Habitat and Natural Heritage Fund	_____ [6]	Louisiana Coalition Against Domestic Violence	_____ [16]
Louisiana Cancer Trust Fund	_____ [7]	Dreams Come True	_____ [17]
Pet Overpopulation Advisory Council	_____ [8]	Sexual Trauma Awareness	_____ [18]
Louisiana Food Bank Association	_____ [9]	Louisiana State University Agricultural Center	_____ [19]
Make-A-Wish of Texas Gulf Coast/Louisiana	_____ [10]	Maddie's Footprints	_____ [20]
Louisiana Association of United Ways / 2-1-1	_____ [11]	University of New Orleans Foundation	_____ [21]
American Red Cross	_____ [12]	Southeastern Louisiana University Foundation	_____ [22]

**Part-year Resident Information**

	<b>Taxpayer</b>	<b>Spouse</b>
Part-year residency dates:		
From	_____ [23]	_____ [25]
To	_____ [24]	_____ [26]

**Retirement Information**

	<b>Taxpayer</b>	<b>Spouse</b>
Date retired as a:		
Louisiana state employee	_____ [27]	_____ [28]
Louisiana teacher	_____ [29]	_____ [30]
Federal employee	_____ [31]	_____ [32]

	<b>Taxpayer</b>	<b>Spouse</b>
<b>Retirement System Name</b>	<b>Date Retired</b>	
Other retirement information:		
_____	_____	_____ [33]
_____	_____	_____
_____	_____	_____
_____	_____	_____

**NOTES/QUESTIONS:**