

# LOUISIANA

## DEPARTMENT *of* REVENUE

---

### Direct Marketer Sales Tax Return

Catalogs, Periodicals, Internet, Radio,  
Television, or Other Advertising

---

Louisiana Department of Revenue  
Revenue Processing Center/Error  
Resolution Section  
P.O. Box 3138  
Baton Rouge, LA 70821-3138  
Telephone: (855) 307-3893

Name \_\_\_\_\_

Trade Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

\_\_\_\_\_ Please enter your Revenue Account Number here.

Filing \_\_\_\_\_  
period mm/yy

<b>1</b>	<b>GROSS SALES OF TANGIBLE PERSONAL PROPERTY</b> <small>(Through catalogs, periodicals, Internet, radio, television, or by other advertising)</small>	<b>1</b>	.00
<b>2</b>	<b>TOTAL ALLOWABLE DEDUCTIONS</b> <small>(From Line 18, Schedule A. Do not include as a deduction any item not reported on Line 1.)</small>	<b>2</b>	.00
<b>3</b>	<b>TOTAL TAXABLE AMOUNT</b> (Line 1 minus Line 2)	<b>3</b>	.00
<b>4</b>	<b>TAX DUE</b> (Multiply amount on Line 3 by 9%.)	<b>4</b>	.00
<b>5</b>	<b>EXCESS TAX COLLECTED</b>	<b>5</b>	.00
<b>6</b>	<b>TOTAL</b> (Line 4 plus Line 5)	<b>6</b>	.00
<b>7</b>	<b>VENDOR'S COMPENSATION</b> (.748% of Line 6 if not delinquent. Limited to \$1500. <small>See instructions for additional information.</small> )	<b>7</b>	.00
<b>8</b>	<b>NET TAX DUE</b> (Line 6 minus Line 7)	<b>8</b>	.00
<b>9</b>	<b>DELINQUENT PENALTY</b> <small>(5% of tax for each 30 days of delinquency, or fraction thereof, not to exceed 25% in the aggregate)</small>	<b>9</b>	.00
<b>10</b>	<b>INTEREST</b> <small>(See instructions.)</small>	<b>10</b>	.00
<b>11</b>	<b>TOTAL TAX, PENALTY, AND INTEREST</b> <small>(Total of Lines 8, 9, and 10)</small>	<b>11</b>	.00

<input type="checkbox"/>	Mark this box if payment made electronically.	<b>PAY THIS AMOUNT</b>	Do NOT send cash. →
--------------------------	---	------------------------	---------------------

**SCHEDULE A – ALLOWABLE DEDUCTION**

<b>12</b>	<b>SALES OF PREPAID PHONE CARDS</b>	<b>12</b>	.00
<b>13</b>	<b>MULTIPLY LINE 12 BY 11% (.11) AND ENTER HERE.</b>	<b>13</b>	.00
<b>14</b>	<b>FOOD ITEMS FOR HOME CONSUMPTION</b>	<b>14</b>	.00
<b>15</b>	<b>PRESCRIPTION DRUGS</b>	<b>15</b>	.00
<b>16</b>	<b>SALES TO FEDERAL, STATE, LOCAL GOVERNMENT AGENCIES</b>	<b>16</b>	.00
<b>17</b>	<b>SALES FOR RESALE</b>	<b>17</b>	.00
<b>18</b>	<b>TOTAL</b> (Add Lines 13 through 17. Enter here and on Line 2.)	<b>18</b>	.00

I declare under the penalties for filing false returns that this return (including any accompanying schedules and statements) has been examined by me, and to the best of my knowledge and belief, it is a true, correct, and complete return.

Signature	Date (mm/dd/yyyy)
Telephone Number	Preparer Signature
<b>ID number of independent preparer</b>	

To avoid penalties, return must be transmitted on or before the 20th day following the period covered. If the due date falls on a weekend or holiday, the return is due the next business day and becomes delinquent the first day thereafter.



SPEC CODE 

--	--	--	--