

**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> (Through catalogs, periodicals, Internet, radio, television, or by other advertising)	<b>1</b>		.00
<b>2</b>	<b>TOTAL ALLOWABLE DEDUCTIONS</b> (From Line 18, Schedule A. Do not include as a deduction any item not reported on Line 1.)	<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 8.45%)	<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> (.840% of Line 6 if timely filed and paid. Limited to \$1500. See instructions for additional information.)	<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> (5% of tax for each 30 days of delinquency, or fraction thereof, not to exceed 25% in the aggregate)	<b>9</b>		.00
<b>10</b>	<b>INTEREST</b> (See instructions.)	<b>10</b>		.00
<b>11</b>	<b>TOTAL TAX, PENALTY, AND INTEREST</b> (Total of Lines 8, 9, and 10)	<b>11</b>	<b>PAY THIS AMOUNT</b> Do NOT send cash. →	.00
<b>SCHEDULE A – ALLOWABLE DEDUCTION</b>				
<b>12</b>	<b>SALES OF PREPAID PHONE CARDS</b>	<b>12</b>		.00
<b>13</b>	<b>MULTIPLY LINE 12 BY 11.8% (.118) 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

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.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature _____		Date (mm/dd/yyyy) _____
Print Name _____	Title _____	Telephone _____

<b>PAID PREPARER USE ONLY</b>	Print Preparer's Name _____	Preparer's Signature _____	Date (mm/dd/yyyy) _____	Check <input type="checkbox"/> if Self-employed
	Firm's Name ► _____		Firm's FEIN ► _____	
	Firm's Address ► _____		Telephone ► _____	



For office use only.

PTIN, FEIN, or LDR Account Number of Paid Preparer

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