LDR
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Supplement Schedule for Refund of Louisiana Citizens Property Insurance Assessment

Corporation or Legal Entity ➜	Legal Name	Louisiana Revenue Account Number
Individual Only ➜	First and Last Name	Your Social Security Number

If you have more than one property that incurred a Citizens assessment, use this form to identify those properties. You **must** use this form as an attachment to the following Louisiana income tax forms: Form IT-540, Form IT-540B, Form R-540INS, Form R-620INS, and Form CIFT-620. The Declaration page supporting the credit claimed for each property must be attached in order to receive the credit. On Line 5, print the total of the assessments claimed on this page.

1 Physical Address of Property:

Address 1 _____

Address 2 _____

City, State _____ ZIP _____

Insurance Company _____

Policy Number _____

Amount of Assessment _____ **.00**

2 Physical Address of Property:

Address 1 _____

Address 2 _____

City, State _____ ZIP _____

Insurance Company _____

Policy Number _____

Amount of Assessment _____ **.00**

3 Physical Address of Property:

Address 1 _____

Address 2 _____

City, State _____ ZIP _____

Insurance Company _____

Policy Number _____

Amount of Assessment _____ **.00**

4 Physical Address of Property:

Address 1 _____

Address 2 _____

City, State _____ ZIP _____

Insurance Company _____

Policy Number _____

Amount of Assessment _____ **.00**

5 Total amount of assessments claimed on this page ..... _____ **.00**