

Supplement Schedule for Refund of Louisiana Citizens Property Insurance Assessment

Corporation	10
Legal Entity	

Indiv	idual	Only

→	Legal Name	Louisiana Revenue Account Number
→	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:	Amount of Accessment	00
	Address 1		
	Address 2		
	City, State		
	Insurance Company		
	Policy Number		
	,	Amount of Assessment	
4	Physical Address of Property:	Amount of Accessment	00
	Address 1		
	Address 2		
	City, State		
	Insurance Company		
	Policy Number		
		Amount of Assessment	00
5	Total amount of assessments claimed on this page		.00
J	rotal amount of accessments dialined on this page		00

