R-1029S <b>Louisi</b>	E (8/20) ana Departmen	t of Rev	venu	ıe																	
Fairs, Festivals, and Other Special Events Sales Tax Return Business Location Address								Name of Fair, Festival, or Other Special Event													
Return  Business Location Address							LDR Account Number														
. L		Legal	Legal Name																		
FOR OFFICE USE ONLY.	o not use this f		Trade Name																		
De De	periods prior to August 2020.  Filing Period (mm/yy)							Business Mailing Address								Unit Type Unit Number					
C Filling Period (mm/yy)								City								State ZIP					
								Foreign Nation, if not United States (do not abbreviate)													
	.S. NAICS	4 5	4	3 9	9 0																
C	ode														Т	axpay	yer's	FEIN	or SS	N	
											Please use blue or black ink. Round to the nearest dollar. Do not use dashes.										
1 Gro	1 Gross Sales of Taxable Tangible Personal Property and Services												. 1				00				
2 Tax Rate											2	2				X .0445					
3 Tax Due (Multiply amount on Line 1 by Line 2)  4 Vendor's Compensation (Multiply Line 3 by 0.944%, only if return is filed and paid timely. Limited to \$1500 per Louisiana dealer)										3				Л							
										4			Ι					00			
	5 Total Sales Tax Due (Subtract Line 4 from Line 3)											5				$\Box$				00	
ivia	ke payment to. I	Jouisian	іа De	рапп	eni oi r	neve	enue. (L	DO NO	I WAIL	CASE	1.)										
Under penalties of belief, they are tru										_								•	_		
Signature															Date	(mm/d	d/yyy	у)			
Print Name Title									Ţ							Telephone					
If your return was penter his or her ider number must be proor provide an identisign or failing to pro	ntification number i ovided. If the paid p fication number w	n the spa preparer Il result i	ace propertion in the	rovided sents a	under the	he b e firi	ox. If the m's FEIN	e paid pre N must be	eparer h	nas a P1 ed in the	ΓIN, the e "Paid P	PTIN i	must be er Use	provi Only" l	ded; o box. T	therwi	se, thure o	ne FEIN f a paid	or LDI	R account rer to sign	
	Print Preparer's Name						Preparer's Signature						Date (mm/dd/yyyy)				Check ☐ if Self-employed				
PAID PREPARER USE ONLY	Firm's Name	Firm's Name ➤												Firm's FEIN ➤							
	Firm's Address	Firm's Address ▶										Telephone >									
	'												·	PTII	N, FE			Acco	unt Nu er	mber	
									For O	Office											

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