

Mailing Address
Louisiana Economic Development
 P.O. Box 94185
 Baton Rouge, LA 70804-9185

Physical Address
 1051 North Third Street
 Baton Rouge, LA 70802



R&D Tax Credit Program Application

www.OpportunityLouisiana.com

| For Office Use Only | |
|---------------------|--|
| Deposit Date | |
| Receipt # | |
| Check # | |
| Check Amt. | |
| Initials | |

BUSINESS INFORMATION

Business Name _____

Business Address1 _____ Business Address2 _____

City _____ State _____ Zip Code _____ - _____ Parish _____

Phone Number _____ Ext _____ Fax Number _____

Business Contact _____ Email Address _____

LA State Senator _____ LA State Representative _____

NAICS Code _____ Dept of Revenue ID _____

Federal Tax ID _____ Unemployment ID _____

Third Party/Consultant (if applicable) _____

RESEARCH & DEVELOPMENT INFORMATION

Tax Year _____

Business Industry _____

List Louisiana Locations _____

Federal Qualified Research Expenses _____ LA Qualified Research Expenses _____

SBIR/STTR grants expensed in LA _____

LA Resident Employees _____ LA Resident R&D Employees _____

Average Wage of Non-R&D LA Employees _____ Average Wage of R&D LA Employees _____

Average Value of Benefits Received by all LA Employees _____ Cost of Health Ins Coverage Offered _____

APPLICATION FEE: \$250

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Please make checks payable to LED.

Business Name _____

RESEARCH & DEVELOPMENT EXPENSES

| EMPLOYEE NAME | TITLE | JOB DESCRIPTION | SALARY | % ENGAGED IN R&D |
|---------------|-------|-----------------|--------|------------------|
| | | | | |

| List of Supplies and Contracted Research | | |
|--|-------------|----------|
| VENDOR | DESCRIPTION | COST |
| | | |
| TOTAL AMOUNT | | \$ _____ |

If including payments to a research company, or clinical trial company, please include a copy of the agreement with a copy of all payments made during the year.

Business Name _____

CHECKLIST OF ATTACHMENTS

- ___ Detailed Narrative of Research and Development conducted
- ___ Federal Income Tax Return and supporting documentation (Tax Years 2003 - 2008)
- ___ Copy of Small Business Innovation Research Grant (SBIR) with documentation showing payments received (if applicable)
- ___ Copy of the complete tax study (if applicable)
- ___ Notarized Affidavit
- ___ If less than 50 employees, include the following:
 - list of research expenses incurred:
 - 3rd and 4th Louisiana Employer's Quarterly Wage & Tax Report (LWC ES4) for tax year claiming credit
 - W-2's for wages listed on the application
 - Invoices for supplies or contracted research listed on the application
 - Audited or Reviewed Financial Statements for the last 2 tax years including certification from CPA that the claimed research and development expenditures meet the requirements of Internal Revenue Code Section 41 (b) and (d).

- ___ \$250 application fee, made payable to **LOUISIANA ECONOMIC DEVELOPMENT** or **LED**

Research & Development Tax Credit Program
Administrator: Shamelda Pete - Email: spete@la.gov
Phone: 225.342.5341- Fax: 225.342.0142

Business Name _____

AFFIDAVIT

The undersigned authority hereby certifies: That he/she is _____ of

_____ and that he/she has the authority to sign on behalf of the company. That he/she has
Company

examined the information contained in this application and found the information given to be true and correct to the best of their knowledge.

That he/she has verified that these expenditures meet the requirements of Internal Revenue Code Section 41. That he/she understands the R&D Tax credits are subject to audit and recapture for a period of three years.

Subscribed on _____, 20 ____.

Company Official

Print Company Official

Notary