2023 Louisiana Refundable Child Care Credit Worksheet (For use with Form IT-540)

Your Name	Social Security Number

Your Federal Adjusted Gross Income must be \$25,000 or less in order to complete this form. See the Louisiana Child Care Credit instructions.

1. Care Provider Information Schedule – Complete columns A through E for each person or organization that provided care to your child. You may use Federal Form W-10, supplied by your provider, to obtain the information. If your care provider does not provide a Federal Form W-10, complete those parts of the Care Provider Information Schedule for which you have the information. If your child attended a child care facility that participated in the Quality Start program, you must enter the facility license number from Form R-10614 in column D. You must follow the same rules of "Due Diligence" as the IRS requires if you do not have all of the care provider information. See IRS 2023 Publication 503 for information on "Due Diligence." Retain copies of canceled checks, receipts and other documentation in order to support the amount of qualifying expenses or submit this documentation with the return for faster processing. If additional lines are required for Lines 1 or 2, attach a schedule. Falsification of any information provided on this form constitutes fraud and can result in criminal penalties.

Α	В	С	D	Е
Care provider's name	Address (number, street, apartment number, city, state, and ZIP)	Identifying number (SSN or EIN)	Facility license number	Amount paid (See instructions.)
				.00
				.00
				.00
				.00
				.00

2. For each child under age 13, enter their name in column F, their Social Security Number in column G, and the amount of Qualified Expenses you incurred and paid in 2023 in column H. See the definitions in the instructions for information on Qualified Expenses.

	F	G	Н	
Qualifying person's name First Last		Qualifying person's Social Security Number	Qualified expenses you incurred and paid in 2023 for	
i iist	Lasi	,	the person listed in column (F)	
			.00	
			.00	
			.00	
			.00	
			.00	

3	Add the amounts in column H, Line 2. Do not enter more than \$3,000 for one qualifying person or \$6,000 for two or more persons. Enter this amount here and on Form IT-540, Line 13A.			3		.00
4	Enter your earned income. See the definitions in the instructions.			4		.00
5	If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see IRS Publication 503). All other filing statuses, enter the amount from Line 4.			5		.00
6	Enter the smallest of Lines 3, 4, or 5. Enter this amount on Form IT-540, Line 13B.			6		.00
7	Enter your Federal Adjusted Gross Income from Form IT-540, Line 7, or Schedule E, Line 1, if filed.			7		.00
8	Enter on Line 8 the decimal amount show If Line 7 is:	wn below that applies to the but not over \$15,000 \$17,000 \$19,000 \$21,000 \$23,000 \$25,000	amount on Line 7. decimal amount .35 .34 .33 .32 .31 .30	8	X	
9	Multiply Line 6 by the decimal amount on Line 8.			9		.00
10	Multiply Line 9 by 50 percent and enter this amount on Line 11.			10	X .50	
11	Enter this amount on Form IT-540, Line 13.			11		.00

