STATE OF LOUISIANA ALLOCATION FORM 26 USC §179D

| 1. | The name, address, and telephone number of the State of Louisiana Project Manager: |
|-----------|--|
| 2. | The name, address, and telephone number of an authorized representative of the contractor receiving the allocation of the Energy Efficient Commercial Buildings Tax Deduction: |
| 3. | The address of the building on or in which the energy efficient property is installed: |
| 4. | The cost of the energy efficient property: |
| 5. | The date the energy efficient property was placed in service: |
| 6. | The percentage of the Energy Efficient Commercial Buildings Tax Deduction allocated to the contractor: |
| docur | r penalties of perjury, I declare that I have examined this allocation, including accompanying mentation, and to the best of knowledge and belief, the facts presented in support of this ation are true, correct, and complete. |
| State | of Louisiana Authorized Representative Contractor's Authorized Representative |