

Quarterly Income Tax Withholding Return
North Carolina Department of Revenue

DOR
Use
Only

This return is for semiweekly payers only.

Account ID	Date Quarter Ended	Do not send payment with this form. Use Form NC-5PX to pay additional tax and interest.
123456789	MM DD YY	
Business Name and Address		
<small>Legal Name (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)</small>		
ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHIJKLM		
<small>Street Address</small>		
ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHI		
ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHI		
<small>City</small>	<small>State</small>	<small>Zip Code (5 Digit)</small>
ABCDEFGHIJKLMNQRST	AB	12345



1. Total tax required to be withheld <i>(From Line IV on Page 2 of this form)</i>	▶	1. 12345678.01
2. Total payments to North Carolina for quarter		2. 12345678.01
3. If Line 1 is more than Line 2, subtract and enter underpayment		3. 12345678.01
4. If Line 1 is less than Line 2, subtract and enter overpayment <small>The overpayment will be refunded</small>		4. 12345678.01

MAIL TO: North Carolina Department of Revenue, Post Office Box 25000, Raleigh, North Carolina 27640-0605

Signature: _____ **Date:** _____

I certify that, to the best of my knowledge, this return is accurate and complete.

Title: _____ **Phone:** () _____

This form must be filed on or before the last day of the month following the close of the quarter.

Employer's Record of State Tax Liability

See NC-30 for more information about withholding tax returns.

Complete this schedule by entering the N.C. income tax required to be withheld each payday, not payments.

I. Tax Withheld - First Month of Quarter

1	12345678.01	8	12345678.01	15	12345678.01	22	12345678.01	29	12345678.01
2	12345678.01	9	12345678.01	16	12345678.01	23	12345678.01	30	12345678.01
3	12345678.01	10	12345678.01	17	12345678.01	24	12345678.01	31	12345678.01
4	12345678.01	11	12345678.01	18	12345678.01	25	12345678.01		
5	12345678.01	12	12345678.01	19	12345678.01	26	12345678.01		
6	12345678.01	13	12345678.01	20	12345678.01	27	12345678.01		
7	12345678.01	14	12345678.01	21	12345678.01	28	12345678.01		
I. Total tax required to be withheld for first month of quarter									I. 12345678.01

II. Tax Withheld - Second Month of Quarter

1	12345678.01	8	12345678.01	15	12345678.01	22	12345678.01	29	12345678.01
2	12345678.01	9	12345678.01	16	12345678.01	23	12345678.01	30	12345678.01
3	12345678.01	10	12345678.01	17	12345678.01	24	12345678.01	31	12345678.01
4	12345678.01	11	12345678.01	18	12345678.01	25	12345678.01		
5	12345678.01	12	12345678.01	19	12345678.01	26	12345678.01		
6	12345678.01	13	12345678.01	20	12345678.01	27	12345678.01		
7	12345678.01	14	12345678.01	21	12345678.01	28	12345678.01		
II. Total tax required to be withheld for second month of quarter									II. 12345678.01

III. Tax Withheld - Third Month of Quarter

1	12345678.01	8	12345678.01	15	12345678.01	22	12345678.01	29	12345678.01
2	12345678.01	9	12345678.01	16	12345678.01	23	12345678.01	30	12345678.01
3	12345678.01	10	12345678.01	17	12345678.01	24	12345678.01	31	12345678.01
4	12345678.01	11	12345678.01	18	12345678.01	25	12345678.01		
5	12345678.01	12	12345678.01	19	12345678.01	26	12345678.01		
6	12345678.01	13	12345678.01	20	12345678.01	27	12345678.01		
7	12345678.01	14	12345678.01	21	12345678.01	28	12345678.01		

III. Total tax required to be withheld for third month of quarter									III. 12345678.01
IV. Total for Quarter (Add Lines I, II, and III; enter here and on Line 1 on Page 1)									IV. 12345678.01