

NC-5Q (SD) 9-3-19

Quarterly Income Tax Withholding Return

North Carolina Department of Revenue

This return is for semiweekly payers only.

DOR
Use
Only

Account ID

123456789

Date Quarter Ended

MM DD YY

Do not send payment with this form. Use Form NC-5PX to pay additional tax and interest.

Business Name and Address

Legal Name (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)

ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHIJKLM

Street Address

ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHI

ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHI

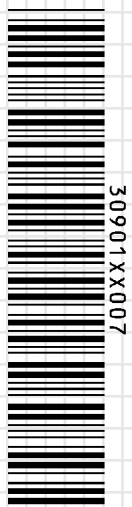
City

State

Zip Code (5 Digit)

ABCDEFGHIJKLMNQRST

AB 12345



- 1. Total tax required to be withheld
(From Line IV on Page 2 of this form) ▶ 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
The overpayment will be refunded 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.

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Legal Name (First 10 Characters) ABCDEFGHIJ

Account ID 123456789

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