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4 **NC-5PX (SD)**

5 8-1-18

6  
7  
8 **Instructions for Form NC-5PX (SD)**  
9 **Amended Withholding Payment Voucher**  
10 **For Semiweekly Payers**

11  
12  
13 Form NC-5PX is to be used by semiweekly payers who underpaid the tax for a previous  
14 period. If you discover that you underpaid the tax for a previous period, complete Form  
15 NC-5PX and include the tax and interest with the voucher. If you overpaid the tax withheld  
16 for a prior payday, you may reduce the payment of the tax withheld for a subsequent  
17 payday by that amount, if both paydays are in the same quarter. If you do not make an  
18 adjustment for the overpayment during the quarter, the overpayment will be reflected on  
19 Form NC-5Q, Quarterly Income Tax Withholding Return.  
20

21  
22 Enter the account ID, tax year, and date the compensation was paid. Enter the legal  
23 name and address in capital letters.  
24

25  
26  
27 **Please do not fold, staple, tape, or paper clip the voucher or payment.**

28  
29 Make check payable in U.S. currency to N.C. Department of Revenue.  
30 Cut return on line below and mail it with your payment to the address on the return.  
31



44 **Cut Here**



46  
47 **NC-5PX (SD)**

48 9-22-09

47 **Amended Withholding Payment Voucher**

48 North Carolina Department of Revenue

49  
50 Account ID 999123456 Tax Year 1999 Enter Date Compensation Paid 12 19 2018  
51

52  
53 ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHI  
54 ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHI  
55 ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHI  
56 ABCDEFGHIJKLMNOPQRST AB 12345  
57

53 1. Additional Tax ► 12345678.01  
54  
55 2. Interest 12345678.01  
56  
57 3. Total Due \$ 12345678.01

58 **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

60 **Title:** \_\_\_\_\_ **Phone:** ( ) \_\_\_\_\_

61 **Mail to:** NCDOR, PO Box 25000, Raleigh, NC 27640-0050

60 30801XX012



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63 9999X 9999999999X 0000000 9999X  
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