

Quarterly Income Tax Withholding Return
North Carolina Department of Revenue

This return is for semiweekly payers only. Monthly payers use Form NC-3M and quarterly payers use Form NC-3.

Account ID

123456789

Date Quarter Ended

12 45 78

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)

ABCDEFGHIJKLMN OPQRSTUVWXYZABCDEFGHIJKLM

Street Address

ABCDEFGHIJKLMN OPQRSTUVWXYZABCDEFGHI

ABCDEFGHIJKLMN OPQRSTUVWXYZABCDEFGHI

City State Zip Code (5 Digit)
ABCDEFGHIJKLMN OPQRST AB 12345



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

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

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: ( )

**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								<b>I.</b>	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								<b>II.</b>	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								<b>III.</b>	12345678.01

IV. Total for Quarter (Add Lines I, II, and III; enter here and on Line 1 on Page 1)								<b>IV.</b>	12345678.01
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