

Publishers of Newsprint Publications Privilege Tax Return

North Carolina Department of Revenue

Return for Calendar Year (YYYY) _____

DOR Use Only
____ / ____ / ____

Legal Name (First 35 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)

Trade Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Name of Contact Person _____

Phone Number _____ Fax Number _____

FEIN or SSN

NCDOR ID/Account Number

Fill in applicable circle:
 Amended Return

Part 1. Computation of Newsprint Publications Privilege Tax

- 1. Virgin Newsprint Consumed (In tons) ▶ 1. _____
- 2. Nonvirgin Newsprint Consumed (In tons) ▶ 2. _____
- 3. All Newsprint Consumed (In tons)
Add Line 1 and Line 2 3. _____
- 4. Total Recycled Content of Nonvirgin Newsprint Consumed (In tons)
(From Part 2, Column 3, Total) ▶ 4. _____
- 5. Recycled Content Percentage of All Newsprint Consumed
Divide Line 4 by Line 3 5. _____ %
- 6. Recycled Content of All Newsprint Consumed (In tons)
Multiply Line 3 by Line 5 6. _____
- 7. Required Minimum Recycled Content (In tons)
Multiply Line 3 by 40% 7. _____
- 8. Recycled Content Below Required Minimum (In tons)
Line 7 minus Line 6, but not less than zero; if less than zero, enter zero 8. _____
- 9. Exempt Amount of Virgin Newsprint Consumed (In tons)
(From Part 3A, Line 4) ▶ 9. _____
- 10. Newsprint and Magazines Recycled or Diverted for Recycling (In tons) ▶ 10. _____
- 11. Adjustments to Recycled Content Below Required Minimum (In tons)
Add Line 9 and Line 10 11. _____
- 12. Recycled Content Below Required Minimum on Which Tax is Due (In tons)
Line 8 minus Line 11, but not less than zero; if less than zero, enter zero 12. _____
- 13. Tax Due
Multiply Line 12 by \$15.00 ▶ 13. _____ .00
- 14. Penalty (10% for late payment; 5% per month, maximum 25%, for late filing)
Multiply Line 13 by rate above if return with full payment is not filed timely. ▶ 14. _____ .00
- 15. Interest (See the Department's website, www.dornc.com, for current interest rate.)
Multiply Line 13 by applicable rate if return with full payment is not filed timely. ▶ 15. _____ .00
- 16. Total Payment Due
Add Lines 13 through 15 ▶ 16. _____ .00

Signature: _____ Title: _____ Date: _____
I certify that, to the best of my knowledge, this return is accurate and complete.

