# NCDOR

# E-585S

## INCENTIVE CLAIM FOR REFUND STATE, COUNTY, AND TRANSIT SALES AND USE TAXES (REVISION 1-25-18)

#### **CHANGES FOR THE YEAR**

- The Form E-585S was not updated for 2021.
- If your company reproduced Form E-585S last year, your data placement for the form should match the approved trained version.
- If your company has not reproduced Form E-585S, then match the SD version.

#### **Production Details:**

Approved By Date:	October 8, 2021
Form Period Date Effective:	Period Ending October 31, 2021
For Filing Periods	October 2021 - September 2022
Form Placed in Software:	After September 14, 2021
Unchanged/Updated:	Unchanged

## 9-12 TEST SAMPLES REQUIRED:

- 1 Blank
- 1 Full Field
- 7 by PDF or 10 by Mail:

**Note:** This form is part of a set; all forms in the set require approval.

### **BARCODE:**

The barcode must read 83901XX011. Replace (XX) with your two-digit Software Developer Identification Number.

Align barcode between Row 18, Column 7-11 and Row 33, Column 7-11. Print the number either stacked or vertically to the right of the barcode

#### USE:

- 12 point Courier font for variable fields
- All capital letters for variable text
- Amount due with 0.00 format
- Correct barcode length
- Correct matching line geometry
- Data placement from SD version
- High resolution bitmap for barcodes
- Matching alignment between the full field and test samples
- No punctuation or special characters in address field
- Period Ending Chart
- Right aligned amount due
- Various ID numbers using the prefixes of 999, 900, 000 or 666 for FEINs/SSNs



#### **BARCODE DIMENSIONS:**

- IF YOUR COMPANY SUPPORTED THIS FORM FOR 2020, DO NOT UPDATE THE ALIGNMENT, PLACEMENT OR BARCODE DIMENSIONS ON YOUR 2021 UNCHANGED FORM
- SYMBOLOGY CODE 39
- DENSITY 4.18 CPI
- HEIGHT 0.500
- HIGH RESOLUTION BITMAP FOR BARCODES
- RATIO 3:1

#### **TEST SAMPLES:**

- IF YOUR COMPANY SUPPORTED THIS FORM FOR 2020, DO NOT SHIFT VERBIAGE AND LINE NUMBERS ON YOUR 2021 UNCHANGED FORM TEST SAMPLES
- PLEASE NOTE: BLANK AND FULL FIELD ARE REQUIRED BUT ARE NOT CONSIDERED TEST SAMPLES
- IF SENDING IN BY COURIER, PLEASE SEND ADDITIONAL TEST SAMPLES AS REQUIRED
- USE THE FIELD DESCRIPTION FORMATTING FOR PLACEMENT OF VARIABLE DATA
- USE A DIFFERENT AMOUNT FOR EACH FIELD
- ENSURE EACH LINE IS POPULATED ACROSS REQUIRED TEST SAMPLES

PROPOSED VARIETY OF E-585S TEST SAMPLES							
TEST SAMPLE:	1	2	3	4	5	6	7
FILING FREQ	MONTHLY	QRTLY	MONTHLY	QRTLY	MONTHLY	QRTLY	MONTHLY
P/E	11 30 21	12 31 21	10 31 21	03 31 22	02 28 22	06 30 22	09 30 22
FILE BY	12 20 21	01 31 22	11 20 21	04 30 22	03 20 22	07 31 22	10 20 22



#### **Placement of Variable Data**

Print Line Number	Identification	Begin Print Position	Maximum Field Length	End Print Position	Field Description
7	SSN/FEIN	23	9	31	Numeric; No dashes Printed number consecutively
8	Account ID	23	9	31	Numeric; No dashes Print number consecutively
8	Period Beginning	47	10	56	Numeric; No punctuation Period Begin Ex. 11 01 21
8	Period Ending	68	10	77	Numeric; No Punctuation Period Ending Ex 11 30 21
9	NAICS Code	23	6	28	Numeric; No dashes Print number consecutively
15	Legal Name	7	10	16	Alphanumeric
15	SSN	21	9	29	Numeric; No dashes Print number consecutively
15	Account ID	33	9	41	Numeric; No dashes Print number consecutively
15	NAICS Code	45	6	50	Numeric; No dashes Print number consecutively
15	MRF	55	3	57	MRF
15	MRF	60	1	60	Alpha: Y or N Y: Yes N: No
15	ERI	64	3	66	ERI
15	ERI	69	1	69	Alpha: Y or N Y: Yes N: No
15	PMT	73	3	75	РМТ
15	РМТ	78	1	78	Alpha: Y or N Y: Yes N: No

#### NCDOR NORTH GAROLINA DEPARTMENT OF REVENUE

17	Line 1	17	2	18	01
17	Line 1	21	12	32	Alpha Taxing County
17	Line 5S	39	3	41	05S
17	Line 5S	44	11	54	Numeric; with 0.00
17	Line 10S	62	3	64	10S
17	Line 10S	67	11	77	Numeric; with 0.00
19	Line 2S	17	3	19	02S
19	Line 2S	22	11	32	Numeric; with 0.00
19	Line 5C	39	3	41	05C
19	Line 5C	44	11	54	Numeric; with 0.00
19	Line 10C	62	3	64	10C
19	Line 10C	67	11	77	Numeric; with 0.00
21	Line 2C	17	3	19	02C
21	Line 2C	22	11	32	Numeric; with 0.00
21	Line 7	39	2	40	07
21	Line 7	43	12	54	Alpha; Taxing County
21	Line 11	62	2	63	11
21	Line 11	67	11	77	Numeric; with 0.00
23	Line 3S	17	3	19	03S
23	Line 3S	22	11	32	Numeric; with 0.00
23	Line 8S	39	3	41	08S
23	Line 8S	44	11	54	Numeric; with 0.00
23	Line 12A	62	3	64	12A
23	Line 12A	62	11	77	Numeric; with 0.00
25	Line 3C	17	3	19	03C
25	Line 3C	22	11	32	Numeric; with 0.00
25	Line 8C	39	3	41	08C
25	Line 8C	44	11	54	Numeric; with 0.00
25	Line 12B	62	3	64	12B
25	Line 12B	67	11	77	Numeric; with 0.00

#### NCDOR NORTH CAROLINA DEPARTMENT OF REVENUE

27	Line 4S	17	3	41	04S
27	Line 4S	22	11	32	Numeric; with 0.00
27	Line 9S	39	3	41	09S
27	Line 9S	44	11	54	Numeric: with 0.00
27	Line 12C	62	3	64	12C
27	Line 12C	67	11	77	Numeric; with 0.00
29	Line 4C	17	3	19	04C
29					
	Line 4C	22	11	32	Numeric; with 0.00
29	Line 4C Line 9C	22 39	11 3	32 41	Numeric; with 0.00 09C