

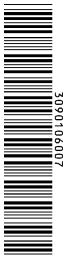
## NC-5Q Quarterly Income Tax Withholding Return

This return is for semiweekly payers only.

DOR Use Only	-
Only	

	Account ID  Name and Address	Date Quarter Ended  (MM-DD-YY)	Do not send payment with this form. Use Form NC-5PX to pay additional tax and interest.
Legal Name (USE (	CAPITAL LETTERS FOR YOUR NAME AND A	DDRESS)	
Street Address			
City			State Zip Code (5 Digit)
	1. Total tax required to (From Line IV on rev		<b>&gt;</b>
	2. Total payments to N	North Carolina for quarter	,
	3. If Line 1 is more that and enter underpay		,
30901060	4. If Line 1 is less than The overpayment will b	n Line 2, subtract and enter overpa be refunded	nyment00
7	MAIL TO: North Carolina	Department of Revenue, Post Office Box	c 25000, Raleigh, North Carolina 27640-0605
	Signature:	his return is accurate and complete.	Date:
	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)

Account ID

## 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	<b>.</b> 00	8	<b>.</b> 00	15	<b>.</b> 00	22	<b>.</b> 00	29	<b>.</b> 00
2	<b>.</b> 00	9	<b>.</b> 00	16	<b>.</b> 00	23	<b>.</b> 00	30	<b>.</b> 00
3	<b>.</b> 00	10	<b>.</b> 00	17	<b>.</b> 00	24	<b>.</b> 00	31	<b>.</b> 00
4	.00	11	.00	18	<b>.</b> 00	25	.00		
5	<b>.</b> 00	12	<b>.</b> 00	19	<b>.</b> 00	26	.00		
6	<b>.</b> 00	13	<b>.</b> 00	20	<b>.</b> 00	27	<b>.</b> 00		
7	<b>.</b> 00	14	<b>.</b> 00	21	<b>.</b> 00	28	<b>.</b> 00		
I. T	I. Total tax required to be withheld for first month of quarter						ı.	<b>.</b> 00	
			II. Tax Withho	eld	- Second Month	of	Quarter		
1	<b>.</b> 00	8	<b>.</b> 00	15	<b>-</b> 00	22	<b>.</b> 00	29	<b>.</b> 00
2	<b>.</b> 00	9	<b>.</b> 00	16	<b>.</b> 00	23	<b>.</b> 00	30	<b>.</b> 00
3	<b>-</b> 00	10	<b>-</b> 00	17	<b>-</b> 00	24	<b>-</b> 00	31	<b>.</b> 00
4	<b>-</b> 00	11	<b>.</b> 00	18	<b>.</b> 00	25	<b>.</b> 00		
5	<b>.</b> 00	12	<b>.</b> 00	19	<b>.</b> 00	26	.00		
6	<b>-</b> 00	13	<b>.</b> 00	20	<b>-</b> 00	27	<b>.</b> 00		
7	<b>.</b> 00	14	<b>.</b> 00	21	<b>.</b> 00	28	<b>.</b> 00		
II. Total tax required to be withheld for second month of quarter							II.	<b>-</b> 00	
			III. Tax With	nhe	ld - Third Month	of	Quarter		
1	-00	8	-00	15	-00	22	-00	29	<b>-</b> 00
2	<b>.</b> 00	9	<b>.</b> 00	16	<b>-</b> 00	23	<b>.</b> 00	30	<b>.</b> 00
3	<b>-</b> 00	10	-00	17	<b>-</b> 00	24	<b>-</b> 00	31	<b>.</b> 00
4	<b>.</b> 00	11	<b>.</b> 00	18	<b>.</b> 00	25	.00		
5	<b>.</b> 00	12	<b>.</b> 00	19	<b>.</b> 00	26	<b>.</b> 00		
6	<b>.</b> 00	13	<b>.</b> 00	20	<b>.</b> 00	27	<b>.</b> 00		
7	<b>.</b> 00	14	<b>.</b> 00	21	<b>.</b> 00	28	<b>.</b> 00		
III. Total tax required to be withheld for third month of quarter							111.	<b>-</b> 00	
-	IV. Total for Quarter (Add Lines I, II, and III; enter here and on Line 1 on front)							IV.	•00