1			1		
2			2		
5	6 8 10 12 14 16 18 2 5 7 9 11 13 15 17 19	10 22 24 26 28 30 32 34 36 38 40 42 44 46 48 50 52 54 56 58 60 62 64 66 68 70 72 74 76 78 1 21 23 25 27 29 31 33 35 37 39 41 43 45 47 49 51 53 55 57 59 61 63 65 67 69 71 73 75 77 79	80 81		
4	NC-3X (SD)	Amended Annual Withholding Reconciliation	4		
5	1-16-19	North Carolina Department of Revenue	5		
6	1-10-13	Troitir Garonna Department of Nevenue	6		
7		ements Here	7		
	Staple Corrected Stat	eniens nere	8		
٥			9		
9					
10	Form NC-3X and corrected the Department's website a	W-2 and 1099 statements, collectively ("Form NC-3X") may be filed electronically. To file Form NC-3X electronically, visit tww.ncdor.gov .	10		
12	General Instructions		12		
13	Use this form to amend a pre	eviously filed Form NC-3, Annual Withholding Reconciliation, if you do not submit the information electronically. If corrections	13		
14	were made to previously filed W-2 or 1099 statement(s) (including Form 1042-S), attach the corrected statement(s) to this form in the designated area.				
15		NC-3X and the corrected statements must be filed with the Department as soon as an error is discovered on Form NC-3	15		
16	or any statement attached t	o Form NC-3.	16		
17		anges or corrects the amount of tax the taxpayer is required to withhold and pay to the IRS, Form NC-3X and the corrected	17		
18		th the Department within six months of being notified about each change or correction.	18		
19	If the taxpayer voluntarily file	es an amended return or corrected statements with the IRS, the taxpayer must file Form NC-3X and corrected statements	19		
20	Carolina income tax withhol	six months of filing the amended return or statements with the IRS. If the adjustment results in a decrease in the North- Idings, generally, the claim for refund of overpayment of taxes must be filed with the Department on or before three years	20		
after the due date of the return or two years after payment of the tax, whichever is later. Important: No refund is allowed if the taxpayer with					
22	the overpaid amount from t	he wages or compensation of the taxpayer's employees or contractors.	21		
		partment may impose the following penalties against a taxpayer for failure to comply with the tax statutes:	23		
23	tailure to file a tax retu failure to pay tax where	ırn on the date it is due (5% per month with a maximum of 25% on the amount of additional tax due), and n due (10% on the amount of additional tax due).			
24			24		
25		vill not be assessed if the amount of tax shown due on an amended return is paid when the return is filed.	25		
26	Specific Instructions		26		
27	Identifying Information - E not use dashes to separate	Enter the Account ID, Federal Identification Number (FEIN), or Social Security Number (SSN) in the space provided. Dothe FEIN or SSN.	27 28		
29	I egal Name and Address	- Enter the taxpayer's legal name and address in the space provided. Use capital letters.	29		
30			30		
31	Line 1 - Total annual tax withheld per W-2, W-2C, or 1099 statements as corrected. Submit only the corrected North Carolina statements for verification. Attach the statements to this page at the box located at the top left-hand corner of the page.				
32		neld per statements as originally reported or previously adjusted.	32		
33		an Line 1, subtract and enter the refund due. an Line 2, subtract and enter the additional tax due. Make check payable in U.S. currency.	33		
34		ole interest and penalties. The interest rate is set semiannually by the Secretary of Revenue and is published on the	34		
35		site at www.ncdor.gov.	35		
36		This is the total tax, penalties, and interest due. Make your check or money order payable to the North Carolina Department	36		
37	of Revenue. The D in U.S. dollars.	repartment will not accept a check or money order unless it is drawn on a U.S. (domestic) bank and the funds are payable	37		
38	III U.S. dollars.		38		
39			39		
40			40		
41		Do not out this form or detach the hettern neution	41		
42		Do not cut this form or detach the bottom portion.	42		
43		Submit this form in its entirety.	43		
44	Mail	to: N.C. Department of Revenue, P.O. Box 25000, Raleigh, NC 27640-0630	44		
45		+++++++++++++++++++++++++++++++++++++++	45		
46			46		

NC-3X (1-16-19			Total Annual Tax Withheld as Corrected (Attach corrected wage and 1099 statements) 12345678.01 Tax Withheld as Originally Reported or Previously		
Tax Year	Account ID	FEIN or SSN	Adjusted (Per original statements) 3. Refund Due (If Line 2 is more than Line 1,	12345678.01	
1234	123456789	999456789	subtract and enter Refund Due) 4. Additional Tax Due (If Line 1 is more than	12345678.01	
ABCDEFO	GHIJKLMNOPQRSTU	VWXYZABCDEFGHI	Line 2, subtract and enter Tax Due)	12345678.01	
ABCDEFO	GHIJKLMNOPQRSTU	VWXYZABCDEFGHI	5. Interest and Penalties	12345678.01	
ABCDEFO	GHIJKLMNOPQRSTU	AB 12345	6. Total Amount Due (Add Lines 4 and 5)	12345678.01	

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

Mail to: NCDOR, PO Box 25000, Raleigh, NC 27640-0630