

### NC-5PA

# APPLIED FOR STATUS - WITHHOLDING PAYMENT VOUCHER (REVISION 8-6-19)

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

- Form NC-5PA did not change for 2021.
- One test sample must include the tax amount of \$1,003,849.00.

#### **Production Details:**

Approved By Date:	October 15,2021
Form Period Date Effective:	Months thru December 31, 2022;
	Quarterly thru December 31, 2022
For Filing Periods	January 2021 and later
Form Placed in Software:	After December 17, 2021
Unchanged/Updated:	Unchanged

## 9-12 TEST SAMPLES REQUIRED:

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

#### **BARCODE:**

The barcode must read 32001XX002. Replace (XX) with your two-digit Software Developer Identification Number.

Align barcode between Row 29, Column 6-10 and Row 44, Column 6-10. Print the number either stacked or vertically to the right of the barcode.

#### **USE:**

- 12 point Courier font for scanband
- 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 barcode
- 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-500 TEST SAMPLES									
TEST SAMPLE:	1	2	3	4	5	6	7		
FILING FREQ	SEMI- WKLY								
E/D/C/P	10 31 22	12 31 22	05 31 22	09 30 22	02 28 22	06 30 22	06 30 22		
TAX YEAR	2022	2022	2022	2022	2022	2022	2022		



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

Print Line Number	Identification	Begin Print Position	Maximum Field Length	End Print Position	Field Description
30	Legal Name	20	35	54	Alphanumeric
32	Legal Name	20	35	54	Alphanumeric
34	Address	20	35	54	Alphanumeric
36	City	20	20	39	Alpha
36	State	44	2	45	Alpha
36	Zip Code	50	5	54	Numeric; 5-digit zip code
36	Date Compensation Paid	64	12	75	Numeric; No dashes MM DD YYYY
43	FEIN or SSN	23	9	31	Numeric; No dashes Print number consecutively
43	Tax Year	44	4	47	Numeric; No dashes Print number consecutively
43	Amount Due	65	12	76	Numeric; 0.00