Virginia Department of Taxation

Substitute Forms Specifications

500V - Corporate Income Tax Payment Coupon

Attention: All 500V payments and vouchers / returns must be made electronically. Paper vouchers are only allowed for customers with an approved waiver.

Special Notes

- Document ID 500
- Barcode No
- Rounding Yes; the length of 15 for numeric fields includes the 2 places for the ".00" rounded cents.
- Due Date
 - All except Nonprofits 15th of the 4th month following end of taxable year
 - Nonprofits 15th of the 6th month following end of taxable year
- Neither the OCR Line nor the Account Number field may contain dashes or hyphens (-).
- Review the instructions provided via the <u>main Forms page</u> when computations are required and/or when amount/numbers must be transferred to/from another form.

Use the Check Digit Calculator to determine the correct digit used in the applicable section of the OCR Line.

OCR Table

Example - 35XXXXXXXXXX1001D 505VVVV 1YYMMD

| Section | Length | Position | Format / Data | Description / Details |
|----------------------------------|--------|----------------|------------------|--|
| Tax Code | 2 | Col. 6, Row 52 | Numeric | 35 |
| FEIN | 9 | | Numeric | XXXXXXXX = 9 digits or V with 8 digits |
| External ID Type | 1 | | Numeric | 1 = indicates the 9 digits before it as the FEIN |
| Account Suffix | 3 | | Numeric | 001 |
| Check Digit (for Account Number) | 1 | | Numeric | D = Check Digit Calculator result |
| Blank Space | 1 | | N/A | - |
| Doc ID (for OCR Line) | 3 | | Numeric | 505 |
| Vendor ID | 4 | | Numeric | VVVV = 4 digits of the NACTP Vendor ID code |
| Blank Space | 1 | | N/A | |
| Filing Period | 5 | | Date | Ending date of the Filing Period |
| - | | | (1YYMM) | 1 = Century, YY = Tax Year, MM = Month |
| Check Digit (for Filing Period) | 1 | | Numeric | D = Check Digit Calculator result |

Form Table

| Field | Length | Justified / Position | Format | Negative Allowed? | Description / Details |
|-----------------------------------|--------|--------------------------|--------------|----------------------|--|
| OCR Line | 31 | Col. 6, Row 52 | Numeric | N/A | See OCR Table for details |
| Federal Employer's ID Number | 9 | Left | Alphanumeric | N/A | 9 digits or V with 8 digits |
| Name of Corporation | 40 | Left | Alphanumeric | N/A | Name of customer |
| First 4 Letters of Corp Name | 4 | Left | Alphanumeric | N/A | First 4 Letter of customer name |
| Address (Number & Street) | 40 | Left | Alphanumeric | N/A | Street address of customer |
| Address (con't) | 40 | Left | Alphanumeric | N/A | Street address of customer |
| City, State & ZIP Code | 52 | Left | Alphanumeric | N/A | City, State Abbreviation & ZIP Code of |
| | | | | | customer |
| Month Ending (Calendar Year) | 2 | Left | Date | N/A | 12 = Month |
| Year Ending (Calendar Year) | 4 | Left | Date | N/A | YYYY = Year |
| Month Ending (Fiscal Year) | 2 | Left | Date | N/A | MM = Month |
| Year Ending (Fiscal Year) | 4 | Left | Date | N/A | YYYY = Year |
| Month Ending (Short Taxable Year) | 2 | Left | Date | N/A | MM = Month |
| Year Ending (Short Taxable Year) | 4 | Left | Date | N/A | YYYY = Year |
| Amount of this Payment | 15 | Right Col. 60, Row 60 | Numeric | No | Amount |