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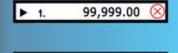
Use the latest version of Adobe Acrobat Reader to complete the form



Do not handwrite any information



Do not use commas when entering amounts



Do not use brackets for negative numbers

99999.00

Use a minus sign to show the amount is negative



Use the print icon on the form to ensure you have completed all required fields



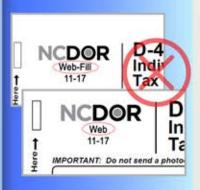
Before printing, select "actual size"



Do not print on both sides of the paper



Do not mix form types



Do not submit photocopies of returns

Submit originals only





Refund Approved: As Filed

E-581

Interstate Carrier Claim for Refund State, County, and Transit Sales and Use Taxes

State Tax		County Tax	7	Transit Tax	Total Tax
			artmental Use On		
Title:				Telephone:	
Signature:	t of my knowledge	this claim is assurat	o and complete	Date:	
					Sasoline and Jet Fuel for quarters IS CLAIM FOR REFUND.
2. Total Refund Requested (A		·		ŕ	\$
•					
County 2.00% Ta	ax	County 2.2	5% Tax	Transit 0.50%	Tax
. Amount of County & Trans Line 9. If you are claiming a	•	an one county's to	ax, complete the reve	erse.)	•
County 2.00% Ta	X	County 2.2	5% Tax	Transit 0.50% 1	rax
. <u>County & Transit</u> Sales and					
(Line 8 divided by Line 6; car			(Ex: . 7546))		
 Amount of State Sales and Ratio of County & Transit S 		•	ie 7)		
. State Tax on Purchases Pe					
paid at the 4.75% State rate.		Adollio Lolino - Elec	. 4.750/ Otata mata)		•
. N.C. <u>State</u> Sales and Use To			(Enter only the amo	unt of tax	_
(See instructions for a description of the control	. , ,	,		ŕ	
. Total Qualifying Purchases	Inside and Outs	ide N.C. Excludi	.,	se Tax Paid	•
. Ratio of Miles Operated in (Line 2 divided by Line 1; can		places (Ex: .7546	5))		
. Miles Operated in North Ca	ırolina				>
. Total Miles of Operation					•
Name of Taxing County (If more than one county, cor	mplete reverse.)				
ame of Person We Should Contact if We	Have Questions Abou	t This Claim	Contact Telephone		Period Ending (MM-DD-YY)
ty	State	Zip Code	County		Period Beginning (MM-DD-YY)
					FEIN or SSN
niling Address					Account is
					Account ID

Date:

Ву:

As Corrected

Instructions

068

092

Complete this Web-Fill form in its entirety on your computer, print the completed form, and mail to the Department.

0.50% Tax Wake Transit

0.50% Tax

Totals for Transit

- Column 13 Enter the name of each taxing county for which a refund is due. If more space is needed, attach an additional sheet.
- Column 14 Enter the amounts of 2.00% and 2.25% county sales and use tax paid on qualifying purchases attributable to the county listed in column 13. The column total must equal the amounts of 2.00% and 2.25% county tax paid on qualifying purchases as reflected on Line 10. If applicable, complete the appropriate entries for Transit 0.50% Tax.
- Column 15 Enter the ratio of county & transit sales and use tax refund for each county as derived on Line 9. Carry decimal amount to four places (Ex: .7546).
- Column 16 Multiply the county or transit tax in column 14 by the ratio in Column 15 and enter the refund due for each county at the 2.00% county tax rates. The column total must equal the amounts of County 2.00% Tax Refund as reflected on Line 11. If applicable, complete the appropriate entries for the Transit 0.50% Tax, and the column total must equal the amounts of Transit 0.50% Tax Refund as reflected on Line 11.
- Column 17 Multiply the county or transit tax in column 14 by the ratio in Column 15 and enter the refund due for each county at the 2.25% county tax rates. The column total must equal the amounts of County 2.25% Tax Refund as reflected on Line 11.

This form is for use by an interstate carrier pursuant to the provisions of N.C. Gen. Stat. § 105-164.14(a). A quarterly claim for refund must be filed within 60 days after the close of each calendar quarter. "Qualifying purchases" reflected on Line 4 can only include purchases of tangible personal property and services that are taxable in North Carolina and include purchases of: railway cars; locomotives; fuel*; lubricants; repair parts; accessories; service contracts; and repair, maintenance, and installation services for a motor vehicle, railroad car, locomotive, or airplane the carrier operates. Refund claims filed more than three years after the due date cannot be allowed and issued. *To request a refund of tax paid at the 7% combined general rate of tax paid on purchases of Aviation Gasoline and Jet Fuel for quarters beginning on or after January 1, 2016, complete E-581A, do not include such tax on this claim for refund.

For a claim for refund filed within the statute of limitations, the Department must take one of the following actions within six months after the date the claim for refund is filed: (1) send the taxpayer a refund of the amount shown due on the claim for refund; (2) adjust the amount of the refund shown due and send the taxpayer a refund of the adjusted amount; (3) deny the refund and send the taxpayer a notice of proposed denial; or (4) request additional information from the taxpayer. If the Department does not take one of the actions within six months, the inaction is considered a proposed denial of the requested refund. A taxpayer who objects to a proposed denial of a refund may request a Departmental review of the proposed action by filing a Form NC-242, Objection and Request for Departmental Review within the time provided in N.C. Gen. Stat. § 105-241.11. If the Department selects a claim for refund for examination, the taxpayer has the same rights that the taxpayer would have during an examination of a return by the Department. If the Department determines that a claim for refund was not filed within the statute of limitations, the refund request will be denied and the Department will issue a notice of proposed denial of refund.

For a full explanation of the Departmental review process, refer to the North Carolina Taxpayers' Bill of Rights found at www.ncdor.gov or the provisions of N.C. Gen. Stat. § 105-241.11.