NCDOR NORTH CAROLINA DEPARTMENT OF REVENUE

Instructions for Handwritten Forms

Guidelines

Do not use red ink. Use blue or black ink.

Do not use dollar signs, commas, or other punction marks.

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Printing

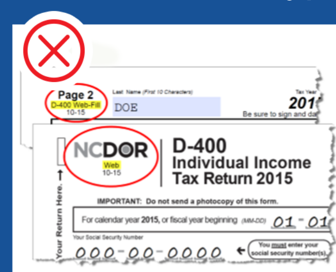
Set page scaling to "none." The Auto-Rotate and Center checkbox should be unchecked.

Do not select "print on both sides of paper."

Before You Send

Do not submit photocopies of returns. Submit originals only.

Do not mix form types



NCDOR
Web
1-23

B-203
Installment Paper Dealer Tax Return

Return for Quarter Ended *(MM-DD-YY)* __ - __ - __

DOR Use Only

Legal Name *(First 35 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)*

Trade Name

Mailing Address

City **State** **Zip Code**

Name of Contact Person

Phone Number **Fax Number**

FEIN or SSN

NCDOR ID/Account Number

Fill in applicable circle:

○ Amended Return

Part 1. Computation of Installment Paper Dealer Tax

1. Total Installment Paper Acquired During Quarter ▶ 1. .00

2. Tax Due
Multiply Line 1 by .277% ▶ 2. .00

3. Penalty *(5% for late payment; 5% per month, maximum 25%, for late filing)*
Multiply Line 2 by rate above if return with full payment is not filed timely. ▶ 3. .00

4. Interest *(See the Department's website, www.ncdor.gov, for current interest rate.)*
Multiply Line 2 by applicable rate if return with full payment is not filed timely. ▶ 4. .00

5. Total Payment Due
Add Lines 2 through 4 ▶ 5. .00

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

A return must be filed quarterly by each person subject to the installment paper dealers tax levied in G.S. 105-83. Returns are to be filed by the 20th day of January, April, July, and October and must be filed even if there were "no transactions" for the quarter. If the return covers more than one business location, list each location and the amount of installment paper acquired for the previous calendar quarter on Page 2. Your check or money order must be in the form of U.S. currency from a domestic bank.

North Carolina Department of Revenue, PO Box 25000, Raleigh, North Carolina 27640-0110

 Legal Name ______________________ **NCDOR ID** ______________

Part 2. Installment Paper Dealer Locations

Location Address	Installment Paper Acquired
Total Installment Amount *(Add the amount of obligations reported; enter the sum here and on Part 1, Line 1)*	