Do Not Include This Page



## Instructions For Handwritten Forms

## Guidelines



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



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



Printing



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

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



Before Sending



Do not submit photocopies of returns. Submit originals only.





## NCDOR Web 1-22 IB-43 Gross Premiums Tax Return Self-Insured Workers' Compensation Corporation

For tax year beginning (MM-DD-YY) = and ending	g (MM-DD-YY) =		DOR Use Only ——
egal Name (First 35 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)			
lailing Address			
ity	State Zip Code	Fede	eral Employer ID Number
ame of Contact Person Phone Number	State of Domicile		
Fill in circle if applicable:         O         Payment has been made through electronic funds transfer (EFT)         O         Amended Return			
If Company Ceased to be Self-Insured in North Carolina Durir Part 1. Computation of Gross Premiums Tax	ig the Year Enter Effe	ctive Date	<u> </u>
1. Adjusted Taxable Premiums (From Part 5)		▶ 1	00
<ul> <li><b>2.</b> Gross Premiums Tax Multiply Line 1 by 2.5%</li> </ul>		2.	,,
<ul> <li><b>3. Tax Credits</b> <ul> <li>a. Guaranty Fund (Credit cannot exceed tax amount on Line 2. Attach 2 Assessment Tax Credit Available notice in support of credit claimed.)</li> </ul> </li> </ul>	2021 Guaranty	► 3a.	
b. CD-425 and NC-478 Tax Credits (Attach applicable forms)	I	▶ 3b.	
<ol> <li>Gross Premiums Tax Liability</li> <li>Line 2 minus Line 3a and 3b, but not less than zero</li> </ol>	I	▶ 4.	
5. Prior Year Credit Applied to 2021 (From Part 4, Line 1, Column 1)	I	▶ 5.	
6. Gross Premiums Tax Installment Payments (From Part 4, Line 5, Column 1)	I	► 6.	
<ol> <li>Balance of Gross Premiums Tax Due Line 4 minus Lines 5 and 6, but not less than zero. If less than zero, e</li> </ol>	nter amount on Line 10.	7. 	
8. a. Penalties <b>b</b> interest <b>b</b>		(Se intere	ee <u>www.ncdor.gov</u> for current est rate and penalty information)
9. Total Gross Premiums Tax Due Add Lines 7, 8a and 8b		9. \$	
10. Overpayment	I	▶ 10.	
11. Amount of Line 10 to be Applied to 2022 Gross Premiums Tax	I	▶ 11. 	
12. Gross Premiums Tax to be Refunded Line 10 minus Line 11		12.	
Printed Name:	Title:		
Signature: I certify that, to the best of my knowledge, this return is accurate and complete.	Date:		

Returns are due by the 15th day of the 3rd month following the end of the calendar year. Your check or money order must be in the form of U.S. currency from a domestic bank. Electronic filing of returns is not available. N.C. Department of Revenue, Insurance Premiums Tax Unit, P.O. Box 25000, Raleigh, NC 27640-0300

	rt 2. Computation of Insurance Regulatory Charge			
13.	Gross Premiums Tax Liability (From Part 1, Line 2)		▶ 13.	,,,
14.	Insurance Regulatory Charge Multiply Line 13 by 6.5%		14.	,,
15.	Prior Year Credit Applied to 2021 (From Part 4, Line 1, Column 2)		▶ 15.	,,
16.	Insurance Regulatory Charge Installment Payments (From Part 4, Line 5, Column 2)		▶ 16.	,,
17.	Balance of Insurance Regulatory Charge Due Line 14 minus Lines 15 and 16, but not less than zero. If less than zero,	enter amount on Line 20.	17.	,,
18.	a. Penalties <b>&gt;</b> 00 b. Interest <b>&gt;</b>		in	(See <u>www.ncdor.gov</u> for current terest rate and penalty information)
19.	Total Insurance Regulatory Charge Due Add Lines 17, 18a and 18b	19	. \$ _	.00
20.	Overpayment	Þ	▶ 20.	,,
21.	Amount of Line 20 to be Applied to 2022 Insurance Regulatory C	Charge	▶ 21.	.00
22.	Insurance Regulatory Charge to be Refunded Line 20 minus Line 21		22.	<b>, , , .</b> 00
Pa	rt 3. Amount Due			
23.	Total Payment Due for 2021           Add Line 9 and Line 19 (An overpayment in one part cannot be used)		•	
	amount due in the other part.)	d to offset 23	<sup>s.</sup> \$ _	,,
Pa	amount due in the other part.) rt 4. Installment Payments Made (Do not include any negative		Ψ	
Pa	· · ·		Ψ	
	· · ·	ve amounts or amounts from	Ψ	Lines 2-4)
1.	rt 4. Installment Payments Made (Do not include any negative Prior Year Credit Applied to 2021 (Gross Premiums Tax - from prior IB-43, Part 1, Line 11)	ve amounts or amounts from	Ψ	Lines 2-4)
1. 2.	rt 4. Installment Payments Made (Do not include any negative Prior Year Credit Applied to 2021 (Gross Premiums Tax - from prior IB-43, Part 1, Line 11) (Insurance Regulatory Charge - from prior IB-43, Part 2, Line 21) Installment Payment made April 15, 2021 (Gross Premiums Tax - from IB-44, Part 1, Line 4)	ve amounts or amounts from	Ψ	Lines 2-4)
1. 2. 3.	<b>Prior Year Credit Applied to 2021</b> (Gross Premiums Tax - from prior IB-43, Part 1, Line 11) (Insurance Regulatory Charge - from prior IB-43, Part 2, Line 21) <b>Installment Payment made April 15, 2021</b> (Gross Premiums Tax - from IB-44, Part 1, Line 4) (Insurance Regulatory Charge - from IB-44, Part 2, Line 10) <b>Installment Payment made June 15, 2021</b> (Gross Premiums Tax - from IB-44, Part 1, Line 4) (Insurance Regulatory Charge - from IB-44, Part 2, Line 10)	ve amounts or amounts from	Ψ	Lines 2-4)

Job Class Description	Job Class	Taxable Percentage (00.00000%)	Payroll Amount	Taxable Premium				
		Tota	I Taxable Premiums					
Approved Experience Modification Factor								