

# Gross Premium Tax Return Self-Insured Workers' Compensation Corporation

North Carolina Department of Revenue

<b>Application for Period</b>	Beginning (MM-DD-YY) _____	Ending (MM-DD-YY) _____
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DOR Use Only
____ / ____ / ____

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name of Contact Person \_\_\_\_\_ Phone Number \_\_\_\_\_ State of Domicile \_\_\_\_\_

<p><b>Federal Employer ID Number</b></p> <p>_____</p>
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**Fill in circle if applicable:**

Payment has been made through electronic funds transfer (EFT)

Amended Return

If Company Ceased to be Self-Insured in North Carolina During the Year Enter Effective Date	_____
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Part 1. Computation of Gross Premium Tax	
1. <b>Adjusted Taxable Premiums</b> (From Part 4)	1. _____ .00
2. <b>Gross Premium Tax</b> Multiply Line 1 by 2.5%	2. _____ .00
3. <b>Tax Credits</b>	
a. Guaranty Fund (Credit cannot exceed tax amount on Line 2. Attach 2013 Guaranty Assessment Tax Credit Available notice in support of credit claimed.)	3a. _____ .00
b. CD-425 and NC-478 Tax Credits (Attach applicable forms)	3b. _____ .00
4. <b>Gross Premium Tax Liability</b> Line 2 minus Line 3a and 3b, but not less than zero	4. _____ .00
5. <b>Prior Year Credit Applied to 2013</b>	5. _____ .00
6. <b>Gross Premium Tax Installment Payments</b>	6. _____ .00
7. <b>Balance of Gross Premium Tax Due</b> Line 4 minus Lines 5 and 6, but not less than zero. If less than zero, enter amount on Line 10.	7. _____ .00
8. a. Penalties ▶ _____ .00      b. Interest ▶ _____ .00	(See <a href="http://www.dornc.com">www.dornc.com</a> for current interest rate and penalty information)
9. <b>Total Gross Premium Tax Due</b> (Add Lines 7, 8a and 8b)	9. \$ _____ .00
10. <b>Overpayment</b>	10. _____ .00
11. <b>Amount of Line 10 to be Applied to 2014 Gross Premium Tax</b>	11. _____ .00
12. <b>Gross Premium Tax to be Refunded</b> Line 10 minus Line 11	12. _____ .00

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that, to the best of my knowledge, this return is accurate and complete.

**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.**

