

Franchise Tax Return Electric Companies

North Carolina Department of Revenue

Application for Period	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)

Trade Name

Mailing Address

City State Zip Code

Name of Contact Person State of Domicile

Phone Number Fax Number

Federal Employer ID Number

NCDOR ID

Fill in applicable circles:

Amended Return

Corporation is a first-time filer in N.C.

Address has changes since prior quarter

Part 1. Computation of Amount Due for Quarter

<p>1. Total gross receipts derived from the business of furnishing electricity <i>(Receipts must be reported on accrual basis)</i></p> <p>2a. Gross receipts derived from sources outside of North Carolina</p> <p>b. Gross receipts billed to others for resale on which the purchaser pays the franchise tax when resold</p> <p>c. Bad Debts</p> <p>d. Gross receipts included in Line 1 that are not listed in Lines 2a-2c and are not subject to franchise tax</p> <p>3. Taxable Receipts Line 1 minus Lines 2a - 2d</p> <p>4. Tax on Receipts Derived From Furnishing Electricity Multiply Line 3 by 3.22%</p> <p>5. Tax Credits <i>(Attach Form NC-478)</i></p> <p>6. Tax Payments <i>(Include any electronic prepayments made for the quarter)</i></p> <p>7. Net Tax Due Line 4 minus Lines 5 and 6</p> <p>8. Penalty <i>(10% for late payment; 5% per month, maximum 25%, for late filing)</i> Multiply Line 7 by applicable penalty if return with full payment is not filed timely.</p> <p>9. Interest <i>(Click www.dorncc.com/taxes/rate.html for current interest rate.)</i> Multiply Line 7 by applicable interest rate if return with full payment is not filed timely.</p> <p>10. Total Payment Due with the Return Add Lines 7 through 9</p>	<p>1. _____ .00</p> <p>2a. _____ .00</p> <p>b. _____ .00</p> <p>c. _____ .00</p> <p>d. _____ .00</p> <p>3. _____ .00</p> <p>▶ 4. _____ .00</p> <p>▶ 5. _____ .00</p> <p>▶ 6. _____ .00</p> <p>▶ 7. _____ .00</p> <p>▶ 8. _____ .00</p> <p>▶ 9. _____ .00</p> <p>10. \$ _____ .00</p>
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Signature: _____ Title: _____ Date: _____

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

Signature of Preparer other than Taxpayer: _____ Preparer's FEIN, SSN, or PTIN: _____

Tax payments are due either monthly or quarterly depending on the taxpayer's tax liability. A taxpayer that is consistently liable for less than \$100 per month must pay on a quarterly basis. A taxpayer that is consistently liable for \$100 or more must pay on a monthly basis. In addition, a taxpayer who is consistently liable for at least \$20,000 a month must make a monthly prepayment of the next month's tax liability. The prepayment is due at the same time the payment for the previous month is due and must be made by electronic funds transfer. Monthly tax payments are due by the 20th day of the month following the month in which the tax accrues. Quarterly tax payments and returns are due by the last day of the month following the end of each calendar quarter. Checks or money orders must be in the form of U.S. currency from a domestic bank.

MAIL TO: North Carolina Department of Revenue, Attn: Distribution Unit, P.O. Box 871, Raleigh, North Carolina 27602-0871

Part 2. Quarterly Distribution *(Attach additional Quarterly Distribution forms, Form CD-313, available from the Department's website if needed.)*

(A) City <i>(List in alphabetical order)</i>	(B) Gross Receipts within City		(C) Amount Distributable <i>(Multiply Column (B) by 3.09%)</i>
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