



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
CORPORATION DECLARATION OF ESTIMATED INCOME TAX

SC1120-CDP
(Rev. 7/26/18)
3093

CORPORATE DECLARATION INSTRUCTIONS

The Corporate declaration payment coupons are for you to paper file and pay your declaration of estimated income tax. Quarterly billing will not be made. Therefore, the payment coupon must be attached to your remittance to assure accurate posting to your account.

A declaration of estimated tax for the period must be completed on SC1120-CDP and cover 100% of the current or prior year income tax liability, whichever is less. You may pay your estimated tax in four equal amounts on or before the 15th day of the 4th, 6th, 9th, and 12th month of your accounting period or pay all of your estimated tax on or before the 15th day of the first installment date.

If handprinting, make your figures as shown. USE BLACK INK ONLY.

1 2 3 4 5 6 7 8 9 . 0 0

Pay Online by credit card or electronic check using our free tax portal, MyDORWAY, at **dor.sc.gov/pay**. Select Business Income Tax Payment to get started.

Do not submit the SC1120-CDP if you pay online.

No declaration of estimated tax is required for taxpayers whose estimated tax for the current accounting year is less than \$100.

A. Estimated tax for the current accounting year. \$ _____

B. Overpayment from last year credited to estimated tax for this year. \$ _____

INTEREST CHARGED FOR FAILURE TO FILE AND PAY ESTIMATED TAX

You may be charged for the failure to file and pay estimated tax. South Carolina Estimated Income Tax payments are computed in the same manner as provided for Federal Estimated Income Tax payments in Internal Revenue Code Section 6655. Refer to Form SC2220 at **dor.sc.gov/forms** for additional information.

Mail to: SC Department of Revenue, Corporation Voucher, PO Box 100153, Columbia SC 29202.
Include Business Name and FEIN on both the form and the check.



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
CORPORATION DECLARATION OF ESTIMATED INCOME TAX

SC1120-CDP
(Rev. 7/26/18)
3093

SC CORPORATE FILE #	INCOME ACCT PERIOD END (MM-YY)

FEIN

Corporate Name and Address

1. Amount of
Payment

. 00

STAPLE PAYMENT HERE

(Signature of duly authorized officer or taxpayer)

Date