

1350



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
Withholding Tax Coupon

WH-1601

(Rev. 6/13/17)
3127

Pay WH-1601 electronically at mydorway.dor.sc.gov. Click on MyDORWAY and pay with VISA or MasterCard or by Electronic Funds Withdrawal (EFW - Bank Draft). Do not mail this form when paying online.

A person owing \$15,000 or more in connection with any return or a withholding agent making at least 24 payments in a year should pay the tax liability electronically by the federal due date.

To apply for a withholding file number, go online to MyDORWAY at **MyDORWAY.dor.sc.gov** or complete and submit form SCDOR-111 (Tax Registration Application) located on our website at **dor.sc.gov**.

INSTRUCTIONS FOR FORM WH-1601

THIS IS NOT A RETURN.

1. Only use **BLACK INK** on this form and on your check.
2. **You must enter the SC withholding file number.**
3. Enter the Federal Employer Identification Number (FEIN).
4. **Place an X in the box** by the quarter for which this payment is to be applied. The date on the employee's paycheck determines the quarter.
5. Enter the **tax year** for the payment, "YYYY".
6. Enter the **payment amount**. Do **not** enter a dollar sign \$. If entering a whole dollar amount, you must enter "00" in the cents field. (Example: 154.00)
7. **IMPORTANT - Print the business name and address** in the space under the FEIN.
8. **Provide contact name and date.** Include a daytime telephone contact number including the area code.

Make check payable to SCDOR and enter the **quarter, year and SC withholding file number** in the memo section of the check. Coupon must accompany payment. **Do not** staple the check to the coupon. **Do not** fold coupon or check. **Only** use an original coupon. **Do not** send a photocopy.

Mail the completed WH-1601 with payment to:
SC Department of Revenue
Withholding
Columbia, SC 29214-0004

USE BLACK INK ONLY

..... detach here

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SC DEPARTMENT OF REVENUE
WITHHOLDING TAX PAYMENT COUPON

WH-1601

(Rev. 6/13/17)
3127

SC WITHHOLDING FILE NO.

[Empty box for SC Withholding File No.]

Mark Quarter with X (Required)
Paycheck Date Determines Quarter

1st Qtr Jan, Feb, Mar	2nd Qtr Apr, May, Jun
3rd Qtr Jul, Aug, Sep	4th Qtr Oct, Nov, Dec

YEAR

[Empty box for Year]

THIS IS NOT A RETURN

PAYMENT AMOUNT

FOR FIELD USE ONLY

FEIN
Business Name and Address:

14-0811

SC payments must be made at same time as federal payments.

Contact Name _____ Date _____

Phone _____ Email _____

Mail to: SC DOR, Withholding, Columbia, SC 29214-0004

31271059

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14-0811

YEAR

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