



## STATE OF SOUTH CAROLINA

**SC 1120S** (Rev. 7/16/19) 3095

S CORPORATION INCOME TAX RETURN
Return is due on or before the 15th day of the 3rd month following the close of the taxable year.

,	SC fi	le#				
	Incor	ne Tax period ending				
ı	Licer	se Fee period ending				
		e				
		ng address				
(	City <sub>.</sub>	State ZIP				
(	Char	nge of Daniel Address Accounting Period Officers				
-	۸ 44 - ،	sh career late complete for development				
		ch complete copy of federal return				
l	C	heck if you filed a federal or state extension				
(	Chec	k if: ▶ ☐ Initial Return ▶ ☐ Amended Return	County or counties in SC where propert	y is loc	ated:	
		Includes QSSSs and/or Disregarded LLCs (See Schedule L)				
-	•		Audit location: Street address, city, state	e, and 2	ZIP	
	Chec					
		Merged ▶ ☐ Reorganized ▶ ☐ Final				
	Total	gross receipts Total cost of depreciable personal property in SC	Audit contact	Phone	e number	
		•				
	_		10 11 0 11 0	1. \		
	Doe	s the corporation have any shareholders who are nonresidents	of South Carolina?	Yes	☐ No	
		Total of line 1 through 10, Schedule K of the federal 1120S		1.		00
		Net adjustment from Schedule A and B, line 15				00
		Total net income as reconciled (add line 1 and line 2)				00
-		If multi-state corporation, enter amount from Schedule G, line 6;				00
3		LESS: Income on line 4 taxed to shareholders of S Corporation		5.	<	00 >
0		South Carolina net income subject to tax (subtract line 5 from li	•	6.		00
		TAX: Multiply line 6 by .05 (5%)		7.		00
ž	8.	Payments: (a) Tax withheld (attach 1099s, I-290s, and/or W-2s)	·			00
Ц		(b) Paid by declaration	1			00
5		(c) Paid with extension		8d.		00
킬		(d) Credit from Line 23b	_	8e.		00
Ę		(f) Milk Credit	ı	8f.		00
z		(g) Motor Fuel Income Tax Credit	1	8g.		00
2	9	Total payments and refundable credits (add lines 8a through 8g		9.		00
1		Balance of tax (subtract line 9 from line 7)		10.		00
김		(a) Interest		11a.		00
5		(b) Late file/pay penalty		11b.		00
د		(c) Declaration penalty (attach SC2220)		11c.		00
		Total (add lines 11a, 11b, and 11c.) See penalty and interest in		11.		00
	12.	Total Income Tax, interest and penalty (add lines 10 and 11)	•	12.		00
		Overpayment (subtract line 7 from line 9)				00
		To be applied as follows: (a) Estimated Tax		13a.		00
		(b) License Fee	· · · · · · · · · · · · · · · · · · ·	13b.		00
		(c) REFUND		13c.		00



SC 112	205				raye z	
14.	Fotal capital and paid in surplus (Multi-state corporations see	Schedule E)		🕨 14.	00	
	icense Fee: multiply line 14 by .001, then add \$15 <b>(Fee ca</b> n	i l	00			
16. l	LESS: Credits taken this year against License Fee from SC1120T	C, Part II, Column C (a	ttach SC1120T	C) ▶ 16. <	00	
	Balance (subtract line 16 from line 15)				00	
18. I	Payments: (a) Paid with extension			▶18a.	00	
	(b) Credit from line 13b			18b.	00	
19.	Fotal payments (add line 18a and 18b)			19.	00	
20. E	Balance of L <u>icense Fee (subtract line</u> 19 from line 17)	<u> </u>	<u></u>	🕨 20.	00	
21. (	(a) Interest	alty	00			
7	Total (add lines 21a and 21b.) See penalty and interest in SC112	20 Instructions		🕨 21	00	
	Fotal License Fee, interest, and penalty (add <u>lines 20 and 21</u>				00	
23. (	Overpayment (subtract line 17 from line 19)	00 To be app	lied as follows	s:		
	a) Estimated Tax 00 (b) Income Tax			FUND	00	
24. (	GRAND TOTAL: INCOME TAX and LICENSE FEE DUE (a	dd lines 12 and 22) .		24.	00	
SCH	EDULE A AND B ADDITIONS TO FEDE	RAI TAXARIFIN	COME			
	axes on or measured by income					
	xcess net passive income subject to federal tax					
3. Ta	axable portion of certain built-in gains subject to federal tax					
4. <u> </u>						
	ther additions (attach schedule)					
	otal additions (add lines 1 through 6)					
7. 1	oral additions (add lines 1 tillough 0)			/		
	DEDUCTIONS FROM FE	DERAL TAXABLE	INCOME			
8.		8.				
12						
13. O	ther deductions (attach schedule)	13				
14. To	otal deductions (add lines 8 through 13)			14		
15. N	et adjustment (subtract line 14 from line 7) Also enter on SC112	0S, Part 1, line 2		15		
SCH	EDULE C RES	ERVED				
	As a principal officer of the corporation for which this return	is made, I declare that	this return, inc	cluding accompanyir	ng annual report,	
Cian	statements, and schedules, has been examined by me and	is to the best of my kno	owledge and be	elief, true and compl	ete.	
Sign Here		1		ı		
чеге	0	055 1 655				
	Signature of officer	Officer's title		Email		
	= · · · · · ·	_				
	Print officer's name	Date		Phone number	er ————————————————————————————————————	
	I <b>authorize</b> the Director of the SCDOR or delegate to discuss attachments, and related tax matters with the preparer.	· I —	No   Print	preparer's name		
Paid	Preparer's	Date Che	eck if	Preparer's phone nu	mber	
raiu Prepai	signaturo		-employed [			
Use O	Firm's name (or		PTIN or FEIN			
	yours if self-employed) and address		ZIP			
	is a corporation's final return, signing here authorizes the SCDOR t	o disclose that informati	on to the South	Carolina Secretary o	of State (SCSOS)	
You m	ust close with the SCSOS and the SCDOR.					
				1		
Tayna	yer's signature			Date		
raxpa	yei ə əiyilatüle			Date		



SC1120S Page 3 SCHEDULE D ANNUAL REPORT TO BE COMPLETED BY ALL CORPORATIONS 1. Name \_ 2. Incorporated under the laws of the state of 3. Location of the registered office of the corporation in South Carolina In the city of \_\_\_\_\_ Registered agent at this address \_\_\_ 4. Location of principal office (street address) \_ Nature of principal business in South Carolina 5. The total number of **authorized shares** of capital stock, itemized by class and series, if any, within each class: Number of shares Class 6. The total number of issued and outstanding shares of capital stock itemized by class and series, if any, within each class: Number of shares Class 7. The names and business addresses of the directors (or individuals functioning as directors) and principal officers in the corporation: Attach separate schedules if you need more space. Date commenced business in South Carolina \_\_\_\_\_ Date incorporated \_\_\_\_ 9. Date of this report 10. If foreign corporation, the date qualified to do business in South Carolina \_\_\_ 11. Was the name of the corporation changed during the year? \_\_\_\_\_ Previous name \_\_\_\_\_ 12. The corporation's books are in the care of Located at (street address) 13. The total amount of stated capital per balance sheet: A. Total paid in capital stock (cannot be a negative amount) . . . . . . . . \$ B. Total paid in capital surplus (cannot be a negative amount) . . . . . . . \$ \_\_\_\_\_\_ 

### ATTACH COMPLETE COPY OF YOUR FEDERAL RETURN

#### File electronically using Modernized Electronic Filing (MeF).

**Pay online** using our free tax portal, MyDORWAY, at **dor.sc.gov/pay**. Select Business Income Tax Payment to get started.

If you pay by check, make your check payable to SCDOR and write business name and FEIN in the memo.

Mail Balance Due returns to:
SCDOR
Corporate Taxable
PO Box 100151
Columbia. SC 29202

Mail Refund or Zero Tax returns to: SCDOR Corporate Refund PO Box 125 Columbia, SC 29214-0032



SC1120S Page 4 ONLY MULTI-STATE CORPORATIONS MUST COMPLETE SCHEDULES E, F, G, AND H **SCHEDULE E** COMPUTATION OF LICENSE FEE OF MULTI-STATE CORPORATIONS 1. Total capital and paid in surplus at end of year ......\$ 2. SC proportion (multiply line 1 by ratio from Schedule H-1, H-2 or H-3, as appropriate) Also enter on SC1120S, line 14 **SCHEDULE F** INCOME SUBJECT TO DIRECT ALLOCATION (B) Gross (C) Related (D) Net Amounts (E) Net Amounts **Amounts** Expenses (Column B minus Column C) Allocated Directly to SC (A) Allocated Income 1. Total allocated income (Enter the total of Column D) 2. Total income allocated to SC (Enter the total of Column E) Attach an explanation of each type of income listed above that is not allocated to South Carolina. **SCHEDULE G** COMPUTATION OF TAXABLE INCOME OF MULTI-STATE CORPORATIONS 2. Income subject to direct allocation to SC and other states from Schedule F, line 1 . . . . . . . . . . 2. 4. Multiply amount on line 3 by appropriate ratio from Schedule H-1, H-2, or H-3 . . . . . . . . . . . . . . . . . 4. 6. Total SC net income (add lines 4 and 5). Also enter on SC1120S, Part 1, line 4 . . . . . . . . . 6. \_ **COMPUTATION OF SALES RATIO SCHEDULE H-1** Ratio Amount 1. Total sales within South Carolina (see instructions) 2. Total sales everywhere (see instructions) % 3. Sales ratio (line 1 divided by line 2) Note: If there are no sales anywhere: Enter 100% on Line 3 if South Carolina is the principal place of business Enter 0% on Line 3 if principal place of business is outside South Carolina. **SCHEDULE H-2 COMPUTATION OF GROSS RECEIPTS RATIO** Amount Ratio 1. South Carolina gross receipts Amounts allocated to South Carolina on Schedule F < > 3. South Carolina adjusted gross receipts (subtract line 2 from line 1) Total gross receipts 5. Total amounts allocated on Schedule F < > Total adjusted gross receipts (subtract line 5 from line 4) 7. Gross receipts ratio (line 3 divided by line 6) % **SCHEDULE H-3** COMPUTATION OF RATIO FOR SECTION 12-6-2310 COMPANIES Amount Ratio 1. Total within South Carolina (see instructions) 2. Total everywhere

%

3. Taxable ratio (line 1 divided by line 2)



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# **SCHEDULE SC-K WORKSHEET**

 $\ensuremath{^{*}}$  Enter amounts from corresponding lines on your federal Schedule K in Column B.

Г				I		
	(A)	(B) *	(C)	(D)	(E)	(F)
	Description	Amounts From Federal Schedule K	Plus or Minus South Carolina Adjustments	Federal Schedule K Amounts After SC Adjustments	Col. (D) Amounts Not Apportioned or Allocated to SC	Col. (D) Amounts Apportioned or Allocated to SC
	Ordinary business					
1	income (loss)					
	Net rental real					
2	estate income (loss)					
	Other net rental					
3	income (loss)					
4	Interest income					
5	Dividends					
6	Royalties					
	Net short-term					
7	capital gain (loss)					
	Net long-term					
8	capital gain (loss)					
	Net section					
9	1231 gain (loss)					
10	Other income (loss)					
11	Section 179 deduction					
12a	Contributions					
	Investment					
12b	interest expense					
	Section 59(e)(2)					
12c	expenditures					
12d	Other deductions					

Non-Refundable Tax Credits: Enter Total Credits from SC1120TC	
SC1120TC must be attached to return.	



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SCHEDULE L QSSSs AND DISREGARDED LLCs INCLUDED IN RETURN					
A. List each Qualified Subchapter S Subsidiary (	QSSS) doing business in South Carolina	s) doing business in South Carolina or registered with the SCSOS.			
Name	FEIN	SC File # (if applicable)			
List each disregarded Limited Liability Compar	y (LLC) doing business in South Carolin	a or registered with the SCSOS.			
Name	FEIN	SC File # (if applicable)			



SC1120S Page 7 **SCHEDULE N** PROPERTY INFORMATION Property within South Carolina (a) Beginning Period (b) Ending Period 1. Land 2. Buildings 3. Machinery and equipment 4. Construction in progress 5. Other property\* Total \*Provide an explanation or listing of property from line 5 above. (a) Beginning Period (b) Ending Period Description of Property Total