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STATE OF SOUTH CAROLINA PUBLIC UTILITY TAX RETURN

Return is due on or before the 15th day of the 4th month following the close of the taxable year.

SC 1120U (Rev. 7/10/19) 3097

SC file #, County or counties in SC where property is located, Income Tax period ending, License Fee period ending, FEIN, Name, Mailing address, City, State, ZIP, Audit location: Street address, Audit contact, Phone number, Change of Address, Accounting Period, Check if Initial Return, Amended Return, Consolidated Return, Check if federal or state extension.

Attach complete copy of federal return

Check if: Merged, Reorganized, Final

PART I COMPUTATION OF INCOME TAX LIABILITY

Table with 25 rows for Part I. Rows include: 1. Federal taxable income, 2. Net adjustment from Schedule A and B, 3. Total net income as reconciled, 4. If multi-state corporation, 5. LESS: Distribution to shareholders, 6. South Carolina net income subject to tax, 7. TAX: Multiply line 6 by .05 (5%), 8. Nonrefundable credits, 9. Balance of tax, 10. Payments/Refundable Credit (a-e), 11. Total payments and refundable credit, 12. Balance of tax, 13. (a) Interest, (b) Late file/pay penalty, (c) Declaration penalty, 14. Total Income Tax, interest, and penalty (BALANCE DUE), 15. Overpayment (To be applied as follows: (a) Estimated Tax, (b) License Fee, (c) REFUND).

PART II COMPUTATION OF LICENSE FEE

Table with 10 rows for Part II. Rows include: 16. Total License Fee from Schedule K, line 7, 17. Section 12-20-105 credit, 18. Total License Fee, 19. Payments: (a) Paid with extension, (b) Credit from line 15b, 20. Total payments, 21. Balance of License Fee, 22. (a) Interest, (b) Late file/pay penalty, 23. Total License Fee, interest, and penalty (BALANCE DUE), 24. Overpayment (To be applied as follows: (a) Estimated Tax, (b) Income Tax, (c) REFUND), 25. INCOME TAX and LICENSE FEE DUE (GRAND TOTAL DUE).



SCHEDULE A AND B ADDITIONS TO FEDERAL TAXABLE INCOME

- 1. Taxes on or measured by income 1. _____
- 2. Federal net operating loss 2. _____
- 3. _____ 3. _____
- 4. _____ 4. _____
- 5. Other additions (attach schedule) 5. _____
- 6. Total additions (add lines 1 through 5) 6. _____

DEDUCTIONS FROM FEDERAL TAXABLE INCOME

- 7. Interest on US obligations 7. _____
- 8. _____ 8. _____
- 9. _____ 9. _____
- 10. Other deductions (attach schedule) 10. _____
- 11. Total deductions (add lines 7 through 10) 11. _____
- 12. Net adjustment (subtract line 11 from line 6) Also enter on SC1120U, Part 1, line 2 12. _____

SCHEDULE C SUMMARY OF CREDITS (FROM SC1120-TC)

- 1. Credit carryover from previous year's SC1120U, Schedule C (Should match SC1120-TC Column A, line 13) 1. _____
- 2. Enter total credits from SC1120-TC, Column B, line 13 (attach SC1120-TC) 2. _____
- 3. Total credits (add lines 1 and 2) 3. _____
- 4. Tax from SC1120U, Part 1, line 7 4. _____
- 5. Lesser of line 3 or 4 (enter on SC1120U, Part 1, line 8) (Should match SC1120-TC, Column C, line 13.) 5. _____
- 6. Enter credits lost due to statute (Should match SC1120-TC, Column D, line 13.) 6. _____
- 7. Credit carryover (subtract lines 5 and 6 from line 3) (Should match SC1120-TC, Column E, line 13.) 7. _____

As a principal officer of the corporation for which this return is made, I declare that this return, including accompanying annual report, statements, and schedules, has been examined by me and is to the best of my knowledge and belief, true and complete.

Sign Here

Signature of officer		Officer's title		Email	
Print officer's name		Date		Phone number	
I authorize the Director of the SCDOR or delegate to discuss this return, attachments, and related tax matters with the preparer.			Yes <input type="checkbox"/> No <input type="checkbox"/>		Print preparer's name
Preparer's signature		Date	Check if self-employed <input type="checkbox"/>		Preparer's phone number
Firm's name (or yours if self-employed) and address			PTIN or FEIN		
			ZIP		

If this is a corporation's final return, signing here authorizes the SCDOR to disclose that information to the South Carolina Secretary of State (SCSOS). You must close your business with the SCSOS and the SCDOR.

Taxpayer's signature	Date
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ATTACH COMPLETE COPY OF YOUR FEDERAL RETURN

Payments: 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 include your 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



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 SC _____

5. Total number of **authorized shares** of capital stock, itemized by class and series, if any, within each class:

Number of shares	Class	Series

6. Total number of **issued and outstanding shares** of capital stock itemized by class and series, if any, within each class:

Number of shares	Class	Series

7. 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

Name	Title	Business address

- 8. Date incorporated _____ Date commenced business in South Carolina _____
- 9. Date of this report _____ FEIN _____
- 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. If filing consolidated, complete and attach Schedule J for each corporation included in the consolidation.



SCHEDULES F, G, AND H ARE TO BE COMPLETED BY MULTI-STATE ORGANIZATIONS

SCHEDULE E RESERVED

SCHEDULE F INCOME SUBJECT TO DIRECT ALLOCATION

	Gross Amounts 1	Less: Related Expenses 2	Net Amounts Allocated Directly to SC and Other States 3	Net Amounts Allocated Directly to SC 4
1. Interest not connected with business				
2. Dividends received				
3. Rents				
4. Gains/losses on real property				
5. Gains/losses on intangible personal property				
6. Investment income directly allocated				
7. Total income directly allocated				
8. Income directly allocated to SC				

SCHEDULE G COMPUTATION OF TAXABLE INCOME OF MULTI-STATE CORPORATIONS

- Total net income as reconciled from SC1120U, Part 1, line 3 1. _____
- Income subject to direct allocation to SC and other states from Schedule F, line 7 2. _____
- Total net income subject to apportionment (subtract line 2 from line 1) 3. _____
- Multiply amount on line 3 by appropriate ratio from Schedule H-1, H-2, or H-3 4. _____
- Income subject to direct allocation to SC from Schedule F, line 8 5. _____
- Total SC net income (add lines 4 and 5). Also enter on SC1120U, page 1, line 4 6. _____

SCHEDULE H-1 COMPUTATION OF SALES RATIO

	Amount	Ratio
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	3. Ratio
1. South Carolina gross receipts		
2. Amounts allocated to South Carolina on Schedule F	< >	
3. South Carolina adjusted gross receipts (subtract line 2 from line 1)		
4. Total gross receipts		
5. Total amounts allocated on Schedule F	< >	
6. 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)		%



SCHEDULE I INFRASTRUCTURE CREDIT INFORMATION

Unused Infrastructure Credit Carried Forward from Last Year	Infrastructure Credit Earned This Year	Infrastructure Credit Taken This Year	Infrastructure Credit Carried Forward for One Year Only
\$ _____	\$ _____	\$ _____	\$ _____

Describe below the types of infrastructure you provided to eligible projects. Types of infrastructure are listed in SC Code Section 12-20-105(C). Eligible projects are described in SC Code Section 12-20-105(B).

SCHEDULE J CORPORATIONS INCLUDED IN CONSOLIDATED RETURN

AFFILIATED CORPORATION NO. 1

- Name _____
- Incorporated under the laws of the state of _____
- Location of the registered office of the corporation in South Carolina _____
In the city of _____ Registered agent at this address _____
- Location of principal office (street address) _____
Nature of principal business in SC _____
- Total number of **authorized shares** of capital stock, itemized by class and series, if any, within each class:

Number of shares	Class	Series
_____	_____	_____

- Total number of **issued and outstanding shares** of capital stock itemized by class and series, if any, within each class:

Number of shares	Class	Series
_____	_____	_____

- Names and business addresses of the directors (or individuals functioning as directors) and principal officers in the corporation: (If additional space is necessary, attach separate schedule).

Name	Title	Business address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- Date incorporated _____ Date commenced business in South Carolina _____
- Date of this report _____ FEIN _____ SC file # _____
- If foreign corporation, the date qualified to do business in South Carolina _____
- Corporate mailing address _____
- Was the name of the corporation changed during the year? _____ Previous name _____
- The corporation's books are in the care of _____
Located at (street address) _____
- The total amount of stated capital per balance sheet is:
 - Total paid in capital stock (cannot be a negative amount). \$ _____
 - Total paid in capital surplus (cannot be a negative amount) \$ _____
 - Total amount of stated capital (cannot be a negative amount). \$ _____

For additional affiliated corporations duplicate Schedule J as needed.



SCHEDULE K COMPUTATION OF LICENSE FEE - PUBLIC UTILITIES

1. Fair market value of property owned and used to conduct business in SC as determined by the SCDOR for Property Tax purposes for the preceding tax year	1.		\$
2. License Fee: Fair market value component (multiply line 1 by 0.001)	2.		
Operating revenue (list below):		(A) TOTAL SYSTEM	(B) IN SOUTH CAROLINA
_____		\$	

3. Total operating revenues	3.		3.
Other receipts (list below):			

4. Total other receipts	4.		4.
5. Total gross receipts (add lines 3 and 4)	5.		5.
6. License Fee: gross receipts component (multiply line 5, column B by 0.003)	6.		6.
7. Total License Fee (add lines 2 and 6, but not less than \$25)	7.		7.
8. Section 12-20-105 Credit (see instructions)	8.		8.
9. Amount due (subtract line 8 from line 7, but not less than zero)		BALANCE DUE	9.

SC Code Section 12-20-100 imposes a License Fee on every express, street railway, navigation, waterworks, power, light, gas, telegraph, and telephone company. The License Fee equals the sum of:

- 0.1% of the fair market value of property owned and used in South Carolina to conduct business, as determined by the SCDOR for the prior year's Property Tax
- 0.3% of gross receipts from services from regulated business in South Carolina during the prior tax year

The minimum License Fee is \$25.

Gross receipts include all receipts from operations in South Carolina and other profit and loss items located in South Carolina. Income from intangibles used to conduct business in South Carolina is also included in gross receipts. For more information, see SC Regulation 117-1075.1 at dor.sc.gov/policy.



SCHEDULE M CONSOLIDATED RETURN AFFILIATIONS SCHEDULE

Include additional Schedule Ms as needed. Include only corporations doing business in South Carolina.

Part 1 General Information

Is the common parent corporation included in the return?

Yes No

If No, enter name and FEIN of common parent corporation.

Name	FEIN
Name of each corporation included in this consolidated return	FEIN
Corporation 1	
Corporation 2	
Corporation 3	
Corporation 4	
Corporation 5	
Corporation 6	
Corporation 7	
Corporation 8	

Part 2 Income Tax Information

	Federal Taxable Income	Amounts Directly Allocated	Amounts Allocated to SC	SC Adjustments	SC NOL Prior Year Carryovers
Corporation 1	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Corporation 2	_____	_____	_____	_____	_____
Corporation 3	_____	_____	_____	_____	_____
Corporation 4	_____	_____	_____	_____	_____
Corporation 5	_____	_____	_____	_____	_____
Corporation 6	_____	_____	_____	_____	_____
Corporation 7	_____	_____	_____	_____	_____
Corporation 8	_____	_____	_____	_____	_____
Total	_____	_____	_____	_____	_____
	Equals page 1, line 1	Equals Sch. F, line 7	Equals Sch. F, line 8	Equals page 1, line 2	Equals page 1, line 5

Part 3 License Fee, Allocation, and Apportionment Information

	Tax Credited on Return	Total Gross Receipts	Apportionment Percentage	License Fee
Corporation 1	\$ _____	\$ _____	_____ %	\$ _____
Corporation 2	_____	_____	_____	_____
Corporation 3	_____	_____	_____	_____
Corporation 4	_____	_____	_____	_____
Corporation 5	_____	_____	_____	_____
Corporation 6	_____	_____	_____	_____
Corporation 7	_____	_____	_____	_____
Corporation 8	_____	_____	_____	_____
Total	_____	_____	_____	_____
	Equals page 1, line 11	Equals page 6, line 5	From Schedule H	Equals page 1, line 18

GENERAL INFORMATION

- The Federal Employer Identification Number (FEIN) is required.
- To request a filing extension, pay your balance due on our free tax portal, MyDORWAY, at dor.sc.gov/pay. Select Business Income Tax Payment to get started. Your payment on MyDORWAY automatically submits your filing extension request. No additional form or paperwork is required.
- A federal extension will be accepted as a South Carolina extension if the corporate return is received within the time as extended by the IRS.
- Check the extension box on the front of the SC1120U to indicate if a federal or state extension was filed.
- There is no extension of time to pay the Corporate Income Tax or License Fee. Any Income Tax or License Fee due must be paid by the original due date to avoid late penalties and interest.

INSTRUCTIONS

Line 10(e) - Motor Fuel Income Tax Credit

Attach the I-385 if you are claiming the refundable Motor Fuel Income Tax Credit. The credit is the lesser of the increase in the South Carolina Motor Fuel User Fee you paid or the preventative maintenance costs you paid in South Carolina during the tax year. See the instructions at dor.sc.gov/forms and SC Revenue Ruling #17-6 at dor.sc.gov/policy for more information.

Line 17 - If the company paid cash to provide infrastructure for a qualifying project, enter the amount of credit applied on line 17 and complete Schedule I. Attach a schedule to the return that includes the following:

- the name of the person completing the project
- a description of the project
- the sections of the statute the project qualifies under
- the amounts in cash that were paid, including the recipient and date of payment
- a description of the infrastructure provided
- the date the infrastructure was completed or is expected to be completed

If the infrastructure has not been completed when the return is filed, include a waiver of the statute of limitations. The maximum credit for a single tax year may not exceed \$400,000. If the credit is more than the tax liability, the excess may be carried forward and deducted in the following tax year. For more information see SC Code Section 12-20-105 and SC Revenue Ruling #18-8 at dor.sc.gov/policy.

Public Utility C Corporations use the SC1120 instructions. Public Utility S Corporations use the SC1120S instructions. Find instructions at dor.sc.gov/forms.