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STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE 2018 INDIVIDUAL INCOME TAX RETURN

SC1040 (Rev. 10/23/18) 3075

Your Social Security Number 9830 Spouse's Social Security Number

For the year January 1 - December 31, 2018, or fiscal tax year beginning 2018 and ending 2019. First name and middle initial, Last name, Spouse's first name, Mailing address, City, State SC, Zip, Daytime phone number, County code 46.

- Check this box if you are filing SC Schedule NR (Part-year/Nonresident)
Check this box only if filing a composite return on behalf of a partnership or S corporation.
Check this box if you have filed a federal or state extension.
Check this box if you served in a military combat zone during the filing period.
Check this box if this return is affected by a federally declared disaster area.

CHECK YOUR FEDERAL FILING STATUS (1) [X] Single (2) [] Married filing jointly (3) [] Married filing separately (4) [] Head-of-household (5) [] Widow(er) with dependent child

Number of dependents claimed on your 2018 federal return 0
Number of dependents listed above that were under the age of 6 years on December 31, 2018
Number of taxpayers age 65 or older, as of December 31, 2018

Table with 5 columns: First name, Last name, Social Security Number, Relationship, Date of birth (MM/DD/YYYY)

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INCOME AND ADJUSTMENTS

2018

1 Enter federal taxable income from your federal form. If zero or less, enter zero here. Nonresident filers complete Schedule NR and enter total from line 48 on line 5 below.	1	Dollars	0	00
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ADDITIONS TO FEDERAL TAXABLE INCOME

a State tax addback, if itemizing on federal return (see instructions)	a	00		
b Out-of-state losses. Type: _____	b	00		
c Expenses related to National Guard and Military Reserve Income	c	00		
d Interest income on obligations of states and political subdivisions other than South Carolina	d	00		
e Other additions to income. Attach explanation. (see instructions)	e	00		
2 Add lines a through e and enter the total here. These are your total additions.	2	0	00	
3 Add lines 1 and 2 and enter the total here.	3	0	00	

SUBTRACTIONS FROM FEDERAL TAXABLE INCOME

f State tax refund, if included on your federal return	f	00		
g Total and permanent disability retirement income, if taxed on your federal return	g	00		
h Out-of-state income/gain (do not include personal service income) Check type of income/gain: <input type="checkbox"/> Rental <input type="checkbox"/> Business <input type="checkbox"/> Other _____	h	00		
i 44% of net capital gains held for more than one year	i	00		
j Volunteer deductions (see instructions) Type: _____	j	00		
k Contributions to the SC College Investment Program ("Future Scholar") or the SC Tuition Prepayment Program	k	00		
l Active Trade or Business Income deduction (see instructions)	l	00		
m Interest income from obligations of the US government	m	00		
n Certain nontaxable National Guard or Reserve pay	n	00		
o Social Security and/or railroad retirement, if taxed on your federal return	o	00		
p Retirement Deduction (see instructions) p-1 Taxpayer date of birth: _____	p-1	00		
p-2 Spouse date of birth: _____	p-2	00		
p-3 Surviving spouse date of birth of deceased spouse: _____	p-3	00		
Military Retirement Deduction (see instructions) p-4 Taxpayer date of birth: _____	p-4	00		
p-5 Spouse date of birth: _____	p-5	00		
p-6 Surviving spouse date of birth of deceased spouse: _____	p-6	00		
q Age 65 and older deduction (see instructions) q-1 Taxpayer date of birth: _____	q-1	00		
q-2 Spouse date of birth: _____	q-2	00		
r Negative amount of federal taxable income	r	00		
s Subsistence allowance _____ days @ \$8.00	s	00		
t Dependents under the age of 6 years on December 31 of the tax year	t	00		
u Consumer Protection Services	u	00		
v Other subtractions (see instructions)	v	00		
w South Carolina Dependent Exemption (see instructions)	w	0	00	
4 Add lines f through w and enter the total here. These are your total subtractions.	4	<	0	00 >
5 Residents subtract line 4 from line 3 and enter the difference. Nonresidents enter amount from Schedule NR, line 48. If less than zero, enter zero here. This is your SOUTH CAROLINA INCOME SUBJECT TO TAX	5		0	00
6 TAX on your South Carolina Income Subject to Tax (see SC1040TT)	6		00	
7 TAX on Lump Sum Distribution (attach SC4972)	7		00	
8 TAX on Active Trade or Business Income (attach I-335)	8		00	
9 TAX on excess withdrawals from Catastrophe Savings Accounts	9		00	
10 Add lines 6 through 9 and enter the total here. This is your TOTAL SOUTH CAROLINA TAX	10		0	00



NON-REFUNDABLE CREDITS

2018

Table with 3 columns: Line number, Description, and Amount. Rows include Child and Dependent Care, Two Wage Earner Credit, and Other non-refundable credits.

PAYMENTS AND REFUNDABLE CREDITS

Table with 3 columns: Line number, Description, and Amount. Rows include SC income tax withheld, 2018 estimated tax payments, and various refundable credits like Anhydrous Ammonia and Milk Credit.

Add lines 22a through 22e and enter the total here. These are your total refundable credits. 22 0 00

23 Add lines 16 through 22 and enter the total here. These are your TOTAL PAYMENTS. 23 13 00

24 If line 23 is larger than line 15, subtract line 15 from line 23 and enter the overpayment. 24 13 00

25 If line 15 is larger than line 23, subtract line 23 from line 15 and enter the amount due. 25 00

26 USE TAX due on online, mail-order, or out-of-state purchases. 26 00

Use Tax is based on your county's Sales Tax rate. See instructions for more information.

If you certify that no Use Tax is due, check here. []

27 Amount of line 24 to be credited to your 2019 Estimated Tax. 27 0 00

28 Total Contributions for Check-offs (attach I-330). 28 00

29 Add lines 26 through 28 and enter the total here. 29 0 00

30 If line 29 is larger than line 24, go to line 31. Otherwise, subtract line 29 from line 24 and enter the amount to be refunded to you (line 30a check box entry is required). REFUND 30 13 00

REFUND OPTIONS (subject to program limitations)

30a Mark one refund choice: [] Direct Deposit (30b required) [] Debit Card* [X] Paper Check
*SCDOR Income Tax Refund Prepaid Debit Card issued by Bank of America.

30b Direct Deposit (for US accounts only) Type: [] Checking [] Savings
Routing Number (RTN) [] Must be 9 digits. The first two numbers of the RTN must be 01 through 12 or 21 through 32.
Bank Account Number (BAN) [] 1-17 digits

31 Add lines 25 and 29. If line 29 is larger than line 24, subtract line 24 from line 29 and enter the total. This is your tax due. 31 00

32 Late filing and/or late payment: Penalties Interest Enter total here 32 0 00

33 Penalty for Underpayment of Estimated Tax (attach SC2210)
Enter exception code from instructions here if applicable 33 00

34 Add lines 31 through 33 and enter the amount you owe here BALANCE DUE 34 0 00

Pay online using our free tax portal, MyDORWAY, at dor.sc.gov/pay.

I declare that this return and all attachments are true, correct, and complete to the best of my knowledge. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

Your signature Date April 13, 2019 Spouse's signature (if married filing jointly, BOTH must sign)

I authorize the Director of the SC Department of Revenue or delegate to discuss this return, attachments, and related tax matters with the preparer. Yes [] No [] Preparer's printed name

Paid Preparer's Signature Date Check if self-employed [] PTIN

Use Only Firm name (or yours if self-employed), address, Zip code FEIN Phone No.

MAIL TO: REFUNDS OR ZERO TAX: SC 1040 Processing Center, PO Box 101100, Columbia, SC 29211-0100
BALANCE DUE: Taxable Processing Center, PO Box 101105, Columbia, SC 29211-0105

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**SUBSTITUTE FOR FORM W-2
WAGE AND TAX STATEMENT**File This Form With Your South Carolina Tax Return
(Complete a Separate Form For Each Employer)

Your full name (Type or print) G [REDACTED]		Social Security Number [REDACTED] 9830	
Address [REDACTED]		State SC	Zip Code [REDACTED]
Your telephone number [REDACTED]	Has your present address been furnished to the employer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Period worked for this employer 2018	
Employer's name HARRIS TEETER, LLC			
Employer's address, city, state and zip code [REDACTED] NC 28105			
Employer's identification number (if known) 56 [REDACTED]			
Employer's telephone number 800-432-6111 option 2	Type of business GROCER		
Wages Paid in: N/A <input type="checkbox"/> cash <input type="checkbox"/> check	Amount of wages 0.00	Estimated South Carolina income taxes withheld \$13.06	Tax year 2018
Please mark the form you are referencing:		Check applicable box:	
1. W-2 form <input checked="" type="checkbox"/>	3. W-2C form <input type="checkbox"/>	1. <input type="checkbox"/> Employer has not furnished me with form(s).	
2. W-2P form <input type="checkbox"/>	4. 1099 form <input type="checkbox"/>	2. <input checked="" type="checkbox"/> Form(s) given to me by employer is/are incorrect.	
		3. <input type="checkbox"/> Form(s) is/are lost.	
		4. <input type="checkbox"/> Form(s) given to me by employer is/are illegible.	

Attach copies of pay stubs, military leave and earnings statement, or other documentation to support your claim.**REQUIRED INFORMATION**

Explain how you calculated the amount of wages received and the amount of estimated South Carolina income taxes withheld.

I did not receive any "wages" or "income" from an "employer" as defined in IRC Section 3401(a) and 3121(a). Under SC Code of Laws SECTION 12-6-560 a resident's SC taxable income is determined "under the Internal Revenue Code." Amount withheld for SC income taxes was derived from a W-2 information return sent to me.

Explain the efforts made to obtain an accurate form W-2, W-2P, W-2C, 1099:

None

I declare that this return and all attachments are true, correct and complete to the best of my knowledge and belief. To wilfully furnish a false or fraudulent statement to the Department is a crime.

Signature

April 13, 2019

Date

Social Security Privacy Act

It is mandatory that you provide your social security number on this tax form. 42 U.S.C 405(c)(2)(C)(i) permits a state to use an individual's social security number as means of identification in administration of any tax. SC Regulation 117-201 mandates that any person required to make a return to the SC Department of Revenue shall provide identifying numbers, as prescribed, for securing proper identification. Your social security number is used for identification purposes.