



STATE OF SOUTH CAROLINA 'S' CORPORATION INCOME TAX RETURN

SC 1120S (Rev. 9/5/18) 3095

dor.sc.gov

Return is due on or before the 15th day of the 3rd month following the close of the taxable year.

SC FILE # 20612858-1
INCOME TAX PERIOD ENDING 12/31/18
LICENSE FEE PERIOD ENDING 12/31/19
FEIN 30-1335440
NAME GEER COMPANY INC
MAILING ADDR. 1029 DUTCH FORK RD
CITY IRMO STATE SC
ZIP CODE 29063
Change of [X] Address [] Accounting Period [] Officers []



Attach complete copy of Federal Return
[] Check here if you filed a federal or state extension
Check if [] Initial Return [] Amended Return
[X] Includes QSSS(s) and/or Disregarded LLC(s) (See Schedule L)
If Filing a Final Return, see General Instructions, page 3. You MUST close your account with the SECRETARY OF STATE and complete I-349.
[X] Merged [] Reorganized [] Final
Total Gross Receipts 480,985 Total cost of depreciable personal property in SC 296,595

County or Counties in SC Where Property is Located: RICHLAND
City IRMO Audit Location SC
Audit Contact Telephone Number 848-567-9078 JONES, TOM

Does the Corporation have any Shareholders who are nonresidents of South Carolina? [] Yes [X] No

Table with 3 columns: Description, Line Number, Amount. Includes rows for Total of line 1 through 10, Net Adjustment, Total Net Income, LESS: Income on line 4 taxed to shareholders, South Carolina Net Income subject to tax, TAX, Payments (Tax Withheld, Paid by Declaration, etc.), Refundable Credits, Total Payments and Refundable Credits, Balance of Tax Due, Interest Due, Declaration Penalty Due, TOTAL INCOME TAX, OVERPAYMENT, and To be applied as follows (Estimated Tax, License Fee, REFUND).

PART II COMPUTATION OF LICENSE FEE AND SCHEDULES A AND B PAGE 2



PART II COMPUTATION OF LICENSE FEE	14. Total Capital And Paid in Surplus (Multi-State Corporations See Schedule E)	14.	48,133	00
	15. FEE DUE - Line 14 x .001, plus \$15.00 (Fee cannot be less than \$25.00)	15.	63	00
	16. LESS: Credits taken this year against license fee from SC1120TC, Part II, Column C (attach SC1120-TC)	16.	<	00
	17. Balance (line 15 less line 16)	17.	63	00
	18. Payments: (a) Paid with Extension	18a.		00
	(b) Credit from line 13b	18b.		00
	19. Total Payments (add line 18a and 18b)	19.		00
	20. Balance of Fee Due (line 17 less line 19)	20.	63	00
	21. (a) Interest Due <input type="text"/> 00 (b) Late File/Pay Penalty Due <input type="text"/> 00	21.		00
	(See penalty and interest instructions.) Enter Total			
	22. TOTAL LICENSE FEE, Interest and Penalty Due (add lines 20 and 21) BALANCE DUE	22.	63	00
	23. OVERPAYMENT (line 19 less line 17) <input type="text"/> 00 To be applied as follows:			
	(a) Est. Tax <input type="text"/> 00 (b) Inc. Tax <input type="text"/> 00 (c) REFUND <input type="text"/>			00
	24. GRAND TOTAL: INCOME TAX and LICENSE FEE DUE (add lines 12 and 22) EFT <input type="checkbox"/>	24.	63	00

SCHEDULE A AND B ADDITIONS TO FEDERAL TAXABLE INCOME

1. Taxes on or Measured By Income	1.	79,667
2. Excess net passive income subject to federal tax	2.	
3. Taxable portion of certain built-in gains subject to federal tax	3.	
4.	4.	
5.	5.	
6. Other Additions (attach schedule)	6.	
7. Total Additions (add lines 1 through 6)	7.	79,667

DEDUCTIONS FROM FEDERAL TAXABLE INCOME

8.	8.	
9.	9.	
10.	10.	
11.	11.	
12.	12.	
13. Other Deductions (attach schedule)	13.	
14. Total Deductions (add lines 8 through 13)	14.	
15. Net Adjustment (line 7 less line 14) Also enter on line 2, Part 1, SC1120S	15.	79,667

SCHEDULE C RESERVED

I, the undersigned, a principal officer of the corporation for which this return is made 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, a true and complete return.

Sign Here	Signature of officer	Officer's title	RONNIE@GEERCOMPANYINC.COM	Email
	Officer's printed name	Date	Telephone Number	
I authorize the Director of the Department of Revenue or delegate to discuss this return, attachments and related tax matters with the preparer. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Preparer's Printed Name JAMES BROWN		
Paid	Preparer's signature JAMES BROWN	Date 11/26/18	Check if self-employed <input type="checkbox"/>	Preparer's Telephone Number 989-652-2798
Preparer's	Firm's name (or yours if self-employed) and address AFIRMFIRMFIRMFIRMFIRMFIRMFIRMFIRMFIRMFIRMFIA ADDRESSADDRESSADDRESSADDRESSADDRESSADDA ACITYCITYCITYCITYCIA, MI	PTIN or FEIN P05051984	ZIP Code 48130-1234	

If this is a corporation's final return, signing here authorizes the Department of Revenue to disclose that information with the Secretary of State. You must close with the Secretary of State as well as the Department of Revenue and complete I-349.

Taxpayer's Signature	Date
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SCHEDULE D ANNUAL REPORT TO BE COMPLETED BY ALL CORPORATIONS

1. Name GEER COMPANY INC

2. Incorporated under the laws of the State of SOUTH CAROLINA

3. Location of the Registered Office of the Corporation in the State of South Carolina is 123 JONES AVE, COLUMBIA SC 29202
 In the City of COLUMBIA Registered Agent at such address is JONES, TOM BROWN

4. Location of principal office (street address) 1029 DUTCH FORK RD, IRMO, SC 29063
 Nature of principal business in SC SALES

5. The total number of **authorized shares** of capital stock, itemized by class and series, if any, within each class is as follows:
 NUMBER OF SHARES: 100,000 CLASS: COMMON SERIES: _____

6. The total number of **issued and outstanding shares** of capital stock itemized by class and series, if any, within each class is as follows:
 NUMBER OF SHARES: 500 CLASS: COMMON SERIES: _____

7. The names and business addresses of the directors (or individuals functioning as directors) and principal officers in the Corporation are:
 (If additional space is necessary, attach separate schedule).

NAME	TITLE	BUSINESS ADDRESS
<u>TOM</u>	<u>JONES</u>	<u>TREASURER</u>
<u>458 WICKSON DRIVE</u>	<u>FRANKENMUTH</u>	<u>MI 48734</u>

8. Date Incorporated 12/01/1997 Date commenced business in the State of South Carolina was 01/01/1999

9. Date of this report 03/15/2018 FEIN 30-1335440

10. If Foreign Corporation, the date qualified to do business in the State of South Carolina is _____

11. Was the name of the Corporation changed during the year? NO Give old name _____

12. The Corporation's books are in the care of JONES, TOM
 Located at (street address) 123 JONES AVE, COLUMBIA SC 29202

13. The total amount of stated capital per balance sheet is:

A. Total paid in Capital Stock (cannot be a negative amount)	\$ <u>48,133</u>
B. Total paid in Capital Surplus (cannot be a negative amount)	\$ _____
C. Total amount of stated Capital (cannot be a negative amount)	\$ <u>48,133</u>

ATTACH COMPLETE COPY OF FEDERAL RETURN

File electronically using Modernized Electronic Filing (MeF).

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.

MAIL RETURN TO THE PROPER ADDRESS

BALANCE DUE:
 SC DEPARTMENT OF REVENUE
 CORPORATE TAXABLE
 PO BOX 100151
 COLUMBIA, SC 29202

REFUNDS OR ZERO TAX:
 SC DEPARTMENT OF REVENUE
 CORPORATE REFUND
 PO BOX 125
 COLUMBIA, SC 29214-0032

Note: If submitting payment by check, make check payable to SC Department of Revenue. Include Business Name and FEIN on check.



SCHEDULE SC-K WORKSHEET

* Enter amounts from corresponding lines on your federal Schedule K in Column B.

	(A) Description	(B) * Amounts From Federal Schedule K	(C) Plus or Minus South Carolina Adjustments	(D) Federal Schedule K Amounts After SC Adjustments	(E) Col. (D) Amounts Not Apportioned or Allocated to SC	(F) Col. (D) Amounts Apportioned or Allocated to SC
1	Ordinary business income (loss)	-164,536	75,609			-88,927
2	Net rental real estate inc. (loss)					
3	Other net rental income (loss)					
4	Interest income					
5	Dividends					
6	Royalties					
7	Net short-term capital gain (loss)					
8	Net long-term capital gain (loss)					
9	Net section 1231 gain (loss)					
10	Other income (loss)					
11	Section 179 deduction					
12a	Contributions					
12b	Investment interest expense					
12c	Section 59(e)(2) expenditures					
12d	Other deductions					

Non-Refundable Tax Credits: Enter Total Credits from SC1120-TC
SC1120-TC must be attached to return.

