

1022



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STATE OF SOUTH CAROLINA  
2020 PARTNERSHIP RETURN

Due by the 15th day of the third month following the close of the taxable year.

SC 1065  
(Rev. 9/23/20)  
3087

For the year January 1 - December 31, 2020, or fiscal tax year beginning and ending

Name: TIME TRAVELERS, Location of business property: ANYTOWN SC, Address: 1234 SECOND ST, City: ANYTOWN, State: SC, ZIP: 29401, FEIN: 77-8888888, SC file #: 72031616-4, County code: 36, Check if: Initial return, Final return, Address change, Amended return, Total number of partners: 2, Number of nonresident partners: 2, Number of nonresident partners with I-309 affidavit: 1, Number of nonresident partners included in the composite return: 1

COMPLETE SCHEDULE SC-K FIRST

Schedule W-H Withholding Tax on Income of Nonresident Partners

STAPLE PAYMENT HERE

Table with 12 rows and 3 columns: Description, Amount, and Cents. Row 1: 25,000.00; Row 2: 25,000.00; Row 3: 25,000.00; Row 4: 0.00; Row 5: 0.00; Row 6: 750.00; Row 7: 0.00; Row 8: 750.00; Row 9: 0.00; Row 10: 40.00; Row 11: 0.00 (BALANCE DUE); Row 12: 40.00

I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

Sign Here: Signature, Date, Email; Mail to: SCDOR, Taxable Partnership, PO Box 125, Columbia, SC 29214-0036; Paid Preparer's Use Only: SC PREPARER, Preparer signature, Firm's name: SC ACCOUNTING FIRM, 1234 STREET, CHARLESTON, SC; Preparer phone number: 555-555-5555; PTIN: P12345678; Date: 12/01/20; FEIN: 88-8888888; ZIP: 29401

30871206 720316164 778888888 1220 0000000000 0000



**SCHEDULE SC-K PARTNERS' SHARES OF INCOME (LOSSES), DEDUCTIONS, AND CREDITS** (See instructions.)

	A	B	C	D	E	F	
	Enter Amounts From Federal Schedule K	Plus or Minus South Carolina Adjustment	Federal Schedule K Amounts After SC Adjustments	Amounts Allocated to SC	Amounts Allocated to States Other Than SC	Amounts Subject to Apportionment	
1	Ordinary business income (loss) 25,000		25,000			25,000	
2	Net rental real estate income (loss)						
3	Other net rental income (loss)						
4	Guaranteed payments						
5	Interest income						
6	Dividends						
7	Royalties						
8	Net short term capital gain (loss)						
9	Net long term capital gain (loss)						
10	Net section 1231 gain (loss)						
11	Other income (loss)						
12	Section 179 Deduction						
	Contributions						
13a	Investment interest expense						
13b	Section 59(e)(2) Expenditures						
13c	Other deductions						
13d	Total		25,000			25,000	
14	25,000		25,000			25,000	
15	Amounts from federal Schedule K (line 14, column A) .....					15	25,000
16	Amount allocated to South Carolina (line 14, column D) .....					16	
17	Net income (loss) subject to apportionment (line 14, column F) .....					17	25,000
<b>APPORTIONMENT</b>							
				TOTAL	SC		
18	Total sales or gross receipts .....					18	
19	Apportionment factor (divide South Carolina sales or gross receipts by total) .....					19	100.0000 %
20	Net business income (loss) apportioned to South Carolina (multiply line 17 by line 19) .....					20	25,000
21	Net business income (loss) taxable to South Carolina (add line 16 and line 20) .....					21	25,000

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 STATE OF SOUTH CAROLINA  
 DEPARTMENT OF REVENUE

**2020 MOTOR FUEL INCOME TAX CREDIT**
**I-385**  
 (Rev. 10/20/20)  
 3722

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Name TIME TRAVELERS	SSN/FEIN 77-8888888
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**PART I - VEHICLE INFORMATION**

Vehicle 1		Vehicle 2	
Registered owner's name	GERALD MORREALE	Registered owner's name	
Make	CADILLAC	Make	
Model	XTS	Model	
Year	2018	Year	
SC license plate #	123 ABC	SC license plate #	
For a truck, is the empty weight 9,000 pounds or less and the gross weight 11,000 pounds or less? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If no, truck does not qualify for the credit</b>		For a truck, is the empty weight 9,000 pounds or less and the gross weight 11,000 pounds or less? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If no, truck does not qualify for the credit</b>	
Is the vehicle registered in the name of a sole proprietorship or disregarded LLC? If yes, check the box. <input type="checkbox"/>		Is the vehicle registered in the name of a sole proprietorship or disregarded LLC? If yes, check the box. <input type="checkbox"/>	
Did this vehicle replace a trade-in or totaled vehicle? If yes, check the box. <input type="checkbox"/>		Did this vehicle replace a trade-in or totaled vehicle? If yes, check the box. <input type="checkbox"/>	

**PART II - PREVENTATIVE MAINTENANCE COSTS INCURRED IN SOUTH CAROLINA**  
 (round to the nearest whole dollar)

	Vehicle 1 - Maintenance costs	Vehicle 2 - Maintenance costs
1. New tires	\$ 800.00	\$ .00
2. Oil changes	\$ .00	\$ .00
3. Regular maintenance	\$ .00	\$ .00
4. Other	\$ .00	\$ .00
<b>5. Total (add line 1 through line 4)</b>	<b>\$ .00</b>	<b>\$ .00</b>

**PART III - INCREASE IN SOUTH CAROLINA MOTOR FUEL USER FEE**

	Vehicle 1 - User fee increase	Vehicle 2 - User fee increase
6. Number of gallons of fuel purchased in SC	800	
7. Average motor fuel user fee increase for 2020	\$0.07	\$0.07
<b>8. Total (multiply line 6 by line 7)</b>	<b>\$ 56.00</b>	<b>\$ .00</b>

**PART IV - MOTOR FUEL INCOME TAX CREDIT COMPUTATION**

Vehicle 1		Vehicle 2	
9. Lesser of line 5 or line 8	\$ 40.00	Lesser of line 5 or line 8	\$ .00
10. Credit Adjustment Factor for 2020	1.000	Credit Adjustment Factor for 2020	1.000
<b>11. Total vehicle credit (multiply line 9 by line 10)</b>	<b>\$ 40.00</b>	<b>Total vehicle credit (multiply line 9 by line 10)</b>	<b>\$ .00</b>
<b>12. Total Motor Fuel Income Tax Credit (add line 11 from Vehicle 1 and Vehicle 2)</b>		<b>\$ 40.00</b>	

Do not mail the I-385 separately. Attach to your Income Tax return.

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PARTNER# 1

STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE

**PARTNER'S SHARE OF SOUTH CAROLINA  
INCOME, DEDUCTIONS, CREDITS, ETC.**

**SC1065 K-1**  
(Rev. 6/15/20)  
3515

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For calendar year 2020 or tax year beginning and ending

Partner's Identification Number ▶ 193-12-0440 Partnership's FEIN ▶ 77-8888888

Partner's name, address, and ZIP GERALD MORREALE 73 MILGROM MEADOWS LOCKE NY 13092-5957	Partnership's name, address, and ZIP TIME TRAVELERS 1234 SECOND ST ANYTOWN SC 29401
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If partner is a disregarded entity, name and FEIN of owner:  
Check if:  Final K-1  Amended K-1  Nonresident

Check if partner is exempt from nonresident withholding because the:  
partner filed an I-309 affidavit with the Partnership.  partner is included in a composite return.

Partner's Share of Current Year Income, Deductions, Credits, etc.	(A) Federal K-1 Amounts		(B) Plus or Minus SC Adjustments		(C) Amounts Not Allocated or Apportioned to SC		(D) Amounts Allocated or Apportioned to SC	
Income (Loss)	1	17,500	1		1		1	17,500
1 Ordinary business income (loss)	1		1		1		1	
2 Net rental real estate income (loss)	2		2		2		2	
3 Other net rental income (loss)	3		3		3		3	
4 Guaranteed payments	4		4		4		4	
5 Interest income	5		5		5		5	
6 Dividends	6		6		6		6	
7 Royalties	7		7		7		7	
8 Net short-term capital gain (loss)	8		8		8		8	
9 Net long-term capital gain (loss)	9		9		9		9	
10 Net Section 1231 gain (loss)	10		10		10		10	
11 Other income (loss)	11		11		11		11	
Deductions	12		12		12		12	
12 Section 179 deduction	12		12		12		12	
Other deductions	13		13		13		13	
13								
14 Net taxable income	14				14		14	17,500
15 Withholding Tax for nonresident partner (see SC1065 K-1 Instructions)	15				15		15	
16 List applicable South Carolina tax credits. (Attach an additional sheet if needed.)	16				16		16	
17	17				17		17	
18	18				18		18	
19	19				19		19	
20 Total South Carolina tax credits	20				20		20	SEE STATEMENT 1

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PARTNER# 2

STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE

**PARTNER'S SHARE OF SOUTH CAROLINA  
INCOME, DEDUCTIONS, CREDITS, ETC.**

**SC1065 K-1**  
(Rev. 6/15/20)  
3515

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For calendar year 2020 or tax year beginning and ending

Partner's Identification Number ▶ 93-9499259 Partnership's FEIN ▶ 77-8888888

Partner's name, address, and ZIP Partnership's name, address, and ZIP

ALWAYS BETTER CAR DETAILING  
58 HOWARD TR  
COLOMA WI 54930-2316

TIME TRAVELERS  
1234 SECOND ST  
ANYTOWN SC 29401

If partner is a disregarded entity, name and FEIN of owner:

Check if:  Final K-1  Amended K-1  Nonresident

Check if partner is exempt from nonresident withholding because the:

partner filed an I-309 affidavit with the Partnership.  partner is included in a composite return.

Partner's Share of Current Year Income, Deductions, Credits, etc.	(A) Federal K-1 Amounts		(B) Plus or Minus SC Adjustments		(C) Amounts Not Allocated or Apportioned to SC		(D) Amounts Allocated or Apportioned to SC	
Income (Loss)								
1 Ordinary business income (loss)	1	7,500	1		1		1	7,500
2 Net rental real estate income (loss)	2		2		2		2	
3 Other net rental income (loss)	3		3		3		3	
4 Guaranteed payments	4		4		4		4	
5 Interest income	5		5		5		5	
6 Dividends	6		6		6		6	
7 Royalties	7		7		7		7	
8 Net short-term capital gain (loss)	8		8		8		8	
9 Net long-term capital gain (loss)	9		9		9		9	
10 Net Section 1231 gain (loss)	10		10		10		10	
11 Other income (loss)	11		11		11		11	
Deductions								
12 Section 179 deduction	12		12		12		12	
Other deductions	13		13		13		13	
13								
14 Net taxable income	14						14	7,500
15 Withholding Tax for nonresident partner (see SC1065 K-1 Instructions)	15						15	
Credits								
16 List applicable South Carolina tax credits. (Attach an additional sheet if needed.)	16						16	
17	17						17	
18	18						18	
19	19						19	
20 Total South Carolina tax credits	20						20	

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SC Financial Transaction Record

Form **SC1065**

**2020**

For calendar year 2020 or tax year beginning , ending

Name

Federal Identification Number

TIME TRAVELERS

77-8888888

**Electronic Funds Withdrawal or Direct Deposit**

This record is included with the South Carolina electronic file for taxpayers who elect to pay their tax balance by electronic funds withdrawal Or who choose to have their refund deposited directly into their bank account

Electronic funds withdrawal (direct debit) .....

Direct deposit of refund .....

Routing Transit Number ..... 072000326

Bank Account Number ..... 12345

Account Holder Name ..... CHASE

Account holder type ..... BUSINESS

Type of account ..... CHECKING

Requested Payment Date .....

Amount of Tax Payment .....

Refund to be deposited ..... 40

DO NOT SUBMIT THIS DOCUMENT TO THE SOUTH CAROLINA DEPARTMENT OF REVENUE