

STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE

SC1041

	dor.sc.gov	FIDU	ICIAR	Y INCO	ME T	AX F	ETL	IRN			(Rev. 7		
For the c	alendar year 2020 d	or Fiscal Taxable Ye				d ending							020
	estate or trust						FEIN				***************************************		<i>J</i> <u>L</u> U
	С	HIEF OSCEOLA	A				<b>&gt;</b> 2	25-999	9999	9			
Name and	title of fiduciary			Mailing address		City			State			County Co	ode
	AOL.	NATHAN P ROSS		10 FT MOULTIE HWY		CHARL	ESTON		SC	2040	02-1299	Richland(C	
ATTACH		AL FORM 1041 AN						Ext			uested:	Yes	,01
	k all that apply:			- check if:		neck if:							
▶ A	ddress change	Simple trust	Пт	estamentary	X	Resident	estate c	r trust		of asse he yea	ne final dist ets made d	uring	
A	mended return X	Complex trust		ter vivos		1		e or trust		7	es	X No	
▶ Fi	nal return Esta	te Grantor trust			-				'				
EI	ecting small busines	ss trust											
E. Durin	g this taxable year,	was this estate or to	rust notifie	d of any federal of	change for	any prior	/ears?	Yes	X	No	If ves, atta	ach copy.	
		tached for each benefic			If yes, how		1					ttach explan	ation.
If a nonre	sident estate or trus	t with income from b	ooth South	Carolina and non	South Car	rolina sourc	es, comp	lete and at	tach Pa	rt III. p			
		(Residents: Federal 1								1		38,228	00
		ion included in line								2		100	
3. South	Carolina modificati	ons relating to gains	s allocated										
distrib	outable net income	(attach explanation)	)					Ü		3			00
		iduciary adjustment		II, line 1i)	Addition	X Su	btraction			4	1	92,120	-
5. Net (a	add lines 1 through	4)	•						•	5		46,208	
6. South	Carolina fiduciary	exemption (see inst								6 <		100	+
7. South	Carolina taxable incom	ne (subtract line 6 from	line 5)						<b>b</b>	7	2	46,108	
		instructions for tax of		a schodula)					h.	8		16,705	_
9. Tax c	n Lump Sum Distrit	bution (SC4972) and	d/or Active	Trade or Busine	ss Income	e (I-335)				9			00
10. Nonre	efundable credits (a	ttach SC1040TC)							<b>A</b>	10 <		210	-
11. Add li	ne 8 through line 10	and enter the resu	ult but not I	ess than zero						11		16,495	
		ax withheld for nonre			Part IV)					12			00
13. Total	tax (add lines 11 ar	nd 12)								13		16,495	-
		Extension		00 (b) SC withh	oldina 🕨		80	00		14		80	+
15. Estim	ated Tax Payments	and Refundable Ta	ax Credit		, <u> </u>			SEE STM	T 1				
	stimated Tax payme								h	āa			00
15 15		2019 return								_			00
(c) Mo	otor Fuel Income Ta									_		150	00
Total	(add line 15a through	1 11 45 1		· · · · · · · · · · · · · · · · · · ·					· k	15			00
	payments (add line	14 and line 15)								16		80	00
	2 (2)	ne 13 from line 16)		<u> </u>						17			00
18. Late fi	le/pay penalty	(	00 interest		00					18	***************************************		00
19. Penal	ty for underpaymen	t of Estimated Tax	 (Attach SC	2210)						19		502	
20. Balan	ce (subtract line 16	from line 13. Add lin	ne 18 and	line 19, if applica	ble)		BALA	ANCE DUE	. 2	20		16,917	00
21. Amou	nt of line 17 to be o	credited to 2021 Esti	imated Tax	·					<b>&gt;</b> 2	21			00
22. Net re	efund (subtract line 2	21 from line 17)						REFUND	<b>&gt;</b> 2	22			00
		return and all attach							and b	elief.			
Sign						Ju	neBug@e	email.com	ı				
Here	Signature of fidu	uciary or officer repr	resenting fi	duciary Date	9		payer's		,				
	I authorize the Dire	ctor of the SCDOR or	delegate to	discuss this return		[77]		Preparer	's print	ed na	me		
	attachments, and rel	lated tax matters with	the prepare	r.		Yes X	No L	JERI	EMIAH	H GI	ILLETT		
Paid	Preparer's				Date		Check					ne number	
Preparer's	-1	EREMIAH GILLETT	1		11/	24/20	self-en	ployed	X	800	968-	-8900	
Use Only	Firm's name (or	AFIRMFIRM	MFIRMI	FIRMFIRMF	'IRMFI	RMFIR	MFIRN	/FIA	PTIN				
	yours if self-employed)	AADDRESS	ADDRES	SSADDRESS	ADDRE	SSADD	RESSA	ADDA ·	FEIN		P12345	678	
	and address	ACITYCITYC							ZIP			)-1234	



Name and FEIN on page 1 \_\_CHIEF OSCEOLA

25-9999999

	Part I - SOUTH CAROLINA FIDUCIARY ADJUSTMENT									
1. A	dditions to federal taxable income:				Adjustments to amount included in federal distributable net income					
a	. State and local interest	1a								
b.	State or local taxes measured by income deducted on the federal return	1b	80							
C.	Federal net operating loss carryover	1c	1,000							
d.	Out-of state losses	1d								
e.	Other additions to income (attach schedule)	1e								
f.	Total additions to federal income (add line 1a through line 1e)	1f	1,080							
2. S	ubtractions from federal taxable income:									
a.	Interest on US obligations	2a								
b.	State Income Tax refunds reported as income on federal return	2b								
C.	South Carolina net operating loss carryover (attach schedule) SEE STMT 2	2c	400							
d.	Active Trade or Business Income Deduction (I-335, line 5)	2d	2							
e.	Other subtractions from income (attach schedule) SEE STMT 3	2e	192,800							
f.	Total subtractions from federal taxable income (add line 2a through line	e 2e)		2f	193,200					
3. To	otal (subtract line 2f from line 1f)	3	-192,120							
4. Fi	duciary adjustment from other estates or trusts and partnership adjustment (attach so	chedule)	×	4						
5. Sc	South Carolina fiduciary adjustment (add line 3 and line 4) Addition or Subtraction X 5 192, 120									

#### Part II - ALLOCATION OF SOUTH CAROLINA FIDUCIARY ADJUSTMENT

Complete ONLY if Part I indicates a South Carolina fiduciary adjustment. It is allocated among all beneficiaries and the fiduciary in the same ratio as their relative shares of federal distributable net income. Nonresident beneficiaries see Parts III and IV for computation of income.

1.	. Name of each beneficiary. Check box if beneficiary is a nonresident. All beneficiaries receiving federal K-1 must be listed. Use attachment if more than eight beneficiaries.			Shares of F Distributable N	Shares of South Carolina     Fiduciary Adjustment     Addition or Subtraction			
			Social Security Number	2. Amount	3. Percent		$\Box$	X
a.	JUNE BUG	Χ	012-15-1222		%			
b.					%			
C.				i)	%			
d.					%			9
e.					%			
f.					%			
g.					%			
h.					%			
i.	Fiduciary			438,328	100.0000%		1	92,120
	Totals			438,328	100%			92,120

COLUMN 2: Total federal distributable net income must be equal to the federal 1041, Schedule B, line 7.

COLUMN 3: Indicate percentages with two numbers, such as 32%, 3.2% and .32%.

COLUMN 4: Enter South Carolina fiduciary adjustment from Part I, line 5 as the total of Column 4. Multiply each percentage in Column 3 times the total in Column 4. Indicate at the top of Column 4 whether the adjustments are additions or subtractions. If the adjustment is a subtraction, it may not offset more than the amount reportable from the fiduciary for federal tax purposes (except in the final or termination year).

COLUMNS 2, 3, AND 4: Attach a detailed explanation of the allocation method used if there is no federal distributable net income or if the percentages do not agree with the relative shares indicated on the federal 1041, Schedules B and Schedule K-1.

COLUMN 4: The amount after each name is reported as a modification, either an addition to or subtraction from federal taxable income. Each resident beneficiary should add the explanation: Fiduciary adjustment - (name of estate or trust). A copy of this schedule (or its information) must be provided to each resident beneficiary. The fiduciary's share of the adjustment is entered on page 1, line 4.



#### CHIEF OSCEOLA

#### 25-9999999

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## FOR NONRESIDENT ESTATES AND TRUSTS OR RESIDENT ESTATES AND TRUSTS WITH NONRESIDENT BENEFICIARIES

Part III - COMPUTATION OF FEDERAL TAXABLE INCOME OF THE ESTATE OR TRUST FROM

2020

Page 3

		SOUTH	CAROL	INA S	SOURCES				Page
A.	Thes	se items correspond to page 1 of the federal 1041.			Total income as reported on federal 1041	C. Porti Columi from South source	n B Carolina	portio	onresident fiduciary's n of Column C and apital gains not distributed
	1.	Interest income							
	2.	Dividends							
	3.	Business income or (loss)					19.5		
Æ	4.	Capital gain or (loss)							
INCOME	5.	Rents, royalties, partnerships, other estates and trusts, etc.							
ž	6.	Farm income or (loss)							
	7.	Ordinary gain or (loss)	Vietr			¥.			
	8.	Other income			438,40		5,608		
	9.	Total income (add line 1 through line 8)			438,40	8 24	5,608		
	10.	Interest							
	11.	Taxes			8	0			
SNS	12.	Fiduciary fees							
Ë	13.	Charitable deduction							
DEDUCTIONS	14.	Attorney, accountant, and return preparer fees							
	15a.	Other deductions NOT subject to the 2% floor							(3)
	15b.	Net operating loss deduction							
	16.	Total (add line 10 through line 15b)			8	0			
	17.	Subtract line 16 from line 9			438,32		5,608		
	18.	Distributions to beneficiaries							
	19.	Federal Estate Tax (fiduciary)							
		Federal Estate Tax (beneficiary)							
	20.	Exemption			10	0			
	21.	Total (add line 18 through line 20)			10			1754 FAIL 2015 FAIL	
	22.	Taxable income (subtract line 21 from line 17)			438,22	8 24	5,608		
	23.	Total percent of all nonresident beneficiaries							
		(from Part II, page 2)					%		
	24.	Total South Carolina income of nonresident beneficia	ries					1	
		(multiply line 22 by line 23)							
		Part IV - NONRESIDENT BEN	EFICIA	RIES'	SHARES OF	INCOME AND	CREDI	TS	
		A. Name	B. Benefi		C. South Carolina	D. South Carolina	E. Less a		F. Tax to be withheld
			percenta from Pa		capital gain (Part III, line 4, column C x column B)	ordinary income (Part III line 22, column C less capital gains x Column B.)	l, exempt withhold I-41 Aff	ing by	(net amount of column C, column D, and column E x 7%)
a.	June E	Bug 012-15-1222							
b.									
C.									
<u>d.</u>									
е.							ļ		
TC	TAL	S		%					
		Part V - NONRESIDEN	T EXEM	PTIC	N ALLOWAN	CE FOR FIDU	CIARY		
1.	Exen	nption allowance claimed on federal 1041					1 1		
2.		of total South Carolina income (Part III, line 9, column D) to total	al federal inc	come (F	Part III. line 9 column	ı B)	2		O.
		1			, 5 5, 55,411111				

South Carolina nonresident fiduciary exemption (multiply line 1 by line 2) Enter on page 1, line 6



# STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE **2019 TAX CREDITS**

**SC1040TC** 

(Rev. 10/15/19) 3913

dor.sc.gov

Name

Social Security Number

CHIEF OSCEOLA

25-9999999

Most tax credits are computed on separate tax credit schedules. Attach tax credit schedules for all tax credits you claim, along with the SC1040TC Worksheet and the SC1040TC, to your Income Tax return. Tax credits may be disallowed if necessary schedules are not attached to your return.

For line 6 through line 15, enter the credit description, the associated code, and the dollar amount of the credit claimed. You can find credit codes and descriptions, along with the required tax schedule for each credit, beginning on page 4.

	Credit Description		Code		Amount
1.	Total credit for taxes paid to another state (Attach SC1040TC worksheet for each state)	1.	100	\$	.00
2.	Carryover of unused qualified credits	2.	101	\$	.00
3.	Excess Insurance Premium Credit	3.	044	\$_	.00
4.	New Jobs Credit	4.	004	\$	.00
5.	Qualified Conservation Contribution Credit	5.	019	\$_	.00
6.	ALTERNATIVE MOTOR VEHICLE CREDIT	6.	035	\$_	210.00
7.		7.		\$	.00
8.		8.		\$	.00
9.	·	9.		\$_	.00
10.		10.		\$_	.00
11.		11.		\$_	.00
12.		12.		\$	.00
13.		13.	-	\$_	.00
14.		14.		\$	.00
15.		15.		\$	.00
16.	Total nonrefundable tax credits. (add line 1 through line 15)		16	\$	210 <b>.00</b>
17.	Enter the tax from SC1040, line 10		17	\$	16,705. <b>00</b>
	Enter the lesser of line 16 or 17  For an individual, enter this amount on SC1040, line 13. For a Fiduciary, enter this amount on SC1041, line 10		18	\$	210,00

SC 1040 Filers: Include this form and a complete copy of your federal return with your SC1040. If claiming credit for taxes paid to another state, also include a copy of each tax return filed with another state.

SC1041 or SC1065 Filers: Include this form with your SC1041 or SC1065.

7055

## STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE

## ALTERNATIVE MOTOR VEHICLE CREDIT

SC SCH.TC-35

(Rev. 8/12/19) 3427

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dor.sc.gov

Name SSN or FEIN CHIEF OSCEOLA 25-9999999 Year Vehicle make and model Chevy Volt 2012 Date vehicle was placed in service (MM-DD-YYYY) 1. 11-27-2019 2. Federal credit before phaseout 2. \_\_\_\_\_1,000 3. Multiply line 2 by 20% (0.20) 200 4. Amount of unused credit carried forward from previous tax years 10 5. Add lines 3 and 4 210 6. Your current tax year liability 6. <u>16,705</u> 7. Enter the lesser of line 5 or line 6. This is your current year credit. Enter this amount on the appropriate tax credit schedule 7. \_\_\_\_\_210 8. Subtract line 7 from line 5. Unused credits may be carried forward for five years \_\_\_\_\_\_

#### INSTRUCTIONS

For tax years beginning after 2005, a South Carolina resident who meets the requirements for the federal credit allowed under Internal Revenue Code (IRC) section 30B is eligible for a credit against South Carolina Corporate or Individual Income Tax for 20% of the federal credit amount before the phaseout. The credit in section 30B applies to: (1) qualified fuel cell vehicles; (2) advanced lean burn technology vehicles; (3) qualified hybrid vehicles; and (4) qualified alternative fuel vehicles. The credit does not apply to plug-in hybrid vehicles or all-electric vehicles.

Manufacturers or domestic distributors of eligible vehicles are required to provide documents certifying the specific vehicle (make, model, and year) meets the IRC 30B requirements. The federal credit amount without the phaseout must be included.

The South Carolina credit is calculated without using the phaseout in section 30B(f). Your car manufacturer or domestic distributor can provide the federal credit amount before the phaseout. Any unused portion of the South Carolina credit may be carried forward for the next five tax years. The federal provisions are deemed to be permanent law for purposes of the South Carolina credit.

If you file by paper, attach to your Income Tax return. If you file electronically, keep a copy with your tax records.

#### Social Security Privacy Act Disclosure

It is mandatory that you provide your Social Security Number on this tax form if you are an individual taxpayer. 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 SCDOR must provide identifying numbers, as prescribed, for securing proper identification. Your Social Security Number is used for identification purposes.

#### The Family Privacy Protection Act

Under the Family Privacy Protection Act, the collection of personal information from citizens by the SCDOR is limited to the information necessary for the SCDOR to fulfill its statutory duties. In most instances, once this information is collected by the SCDOR, it is protected by law from public disclosure. In those situations where public disclosure is not prohibited, the Family Privacy Protection Act prevents such information from being used by third parties for commercial solicitation purposes.

NO ADJUSTMENTS / TAXABLE INCOME

7055

dor.sc.gov

STATE OF SOUTH CAROLINA

DEPARTMENT OF REVENUE

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

SC1041 K-1 (Rev. 6/10/20) 3516

For calendar year 2020 or tax year beginning and ending Beneficiary's identifying number ▶ 012-15-1222 25-9999999 Estate or trust's FEIN Beneficiary's name, address, and ZIP Estate or trust's name, fiduciary's name, address, and ZIP CHIEF OSCEOLA JUNE BUG JONATHAN P ROSS 10190 IOSCO RD 10 FT MOULTIE HWY MI 48836 FOWLERVIILE CHARLESTON SC 29402-1299 Check if applicable: (1) Final K-1 (2) Amended K-1 (3) X Nonresident Check if the beneficiary is exempt from nonresident withholding because they filed an I-41 affidavit with the trust or estate (A) (B) (D) (C) Beneficiary's Share of Current Year Federal Plus or Amounts Not Amounts Income, Deductions, Credits, etc. K-1 Minus Allocated or Allocated or **Amounts** Apportioned to SC SC Adjustments Apportioned to SC 1 Interest income ..... 1 1 Dividends ..... 2 2 3 Net short-term capital gain ..... 3 3 Net long-term capital gain ..... 4 4 4 Other portfolio and nonbusiness income 5 5 5 Ordinary business income 6 6 6 6 7 7 7 7 Net rental real estate income 8 Other rental income 8 8 8 Directly apportioned deductions .... 9 9 9 Deductions 10 10 Estate Tax deduction 10 10 11 Final year deductions 11 11 11 Withholding Tax for nonresident beneficiary (See SC1041 K-1 Instructions) 12 12 List applicable South Carolina tax credits. (Attach an additional sheet if needed.) 13 13 Credits 14 14 15 15 16 16 Total South Carolina tax credits

#### INSTRUCTIONS FOR SC1041 K-1

**General purpose**: The estate or trust prepares the SC1041 K-1 to show each beneficiary's share of the entity's income. Each item of income is adjusted as required by South Carolina law and allocated or apportioned to South Carolina or to states other than South Carolina.

Column A, line 1 through line 11 - Enter amounts from the federal Schedule K-1.

**Column B, line 1 through line 11 -** Enter the beneficiary's share of South Carolina adjustments to federal taxable income (loss). Show additions as a positive number and subtractions in brackets as a negative number. See the SC1041 instructions at **dor.sc.gov/forms**.

Column C, line 1 through line 11 - Enter the beneficiary's share of income (loss) or deductions allocated or apportioned to states other than South Carolina. See SC1041 instructions at dor.sc.gov/forms.

Column D, line 1 through line 11 - Enter the beneficiary's share of income (loss) or deductions allocated or apportioned to South Carolina.

Line 12 - Estates or trusts are required to withhold 7% of the South Carolina taxable income of nonresident beneficiaries. Prepare an SC41 Fiduciary Report of Nonresident Beneficiary Tax Withheld for each nonresident beneficiary with an amount withheld. The SC41 is located in the SC1041 instructions. Find the SC1041 at dor.sc.gov/forms. Enter the Withholding Tax amount for each nonresident beneficiary on line 12 of their SC1041 K-1. Provide a copy of the SC41 and the SC1041 K-1 to each nonresident beneficiary so they may attach them to their South Carolina Income Tax returns.

Line 13 through 16 - List the beneficiary's share of applicable South Carolina credits.

**Instructions for Estate or Trust** - Include SC1041 K-1 with your SC1041 Fiduciary Income Tax Return. Provide an SC1041 K-1 to each beneficiary.

**Instructions for Beneficiary** - If filing a paper return, attach to your Income Tax Return. If filing electronically, keep with your records.

#### Social Security Privacy Act Disclosure

It is mandatory that you provide your Social Security Number on this tax form if you are an individual taxpayer. 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 SCDOR must provide identifying numbers, as prescribed, for securing proper identification. Your Social Security Number is used for identification purposes.

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25-9999999

## **South Carolina Statements**

### Statement 1 - Form SC1041, Page 1, Line 14 - Extension Payment and Other Credits

		Am	ount			
South	Carolina	Income	Tax	Withheld	\$	80
7	[otal				\$	80

#### Statement 2 - Form SC1041, Page 2, Part I, Line 2c - South Carolina NOL Carryforward

De	An	nount	
SC NOL		\$	400
Total		\$	400

### Statement 3 - Form SC1041, Page 2, Part I, Line 2e - Other Subtractions from Income

Description						Amount
Non-South	Carolina	Other	Portfolio	Income	\$ _	192,800
Total	L				\$_	192,800