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STATE OF SOUTH CAROLINA
C CORPORATION INCOME TAX RETURN

SC 1120
(Rev. 8/15/19)
3091

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

SC file # 20255800-8

Income Tax period ending 12/31/19

Licence Fee period ending 12/31/20

FEIN 57-9999999

Name TIME TRAVELERS

Mailing address PO BOX 12345

City CHAPIN State SC

ZIP 29036

Change of ☒ Address ☐ Accounting Period
☐ Officers

Attach complete copy of federal return

☒ Check if you filed a federal or state extension

Check if ☐ Initial return ☐ Consolidated return (Complete Schedule M)
☐ Amended Return ☐ Includes Disregarded LLC(s) (Complete Schedule L)

Check if:

☐ Merged ☐ Reorganized ☐ Final

Total gross receipts

2,261,013

Total cost of depreciable personal property in SC

1,093,719

County or counties in SC where property is located:

LEXINGTON

Audit location: Street address, city, state, ZIP

PO BOX 12345

CHAPIN

SC

Audit contact

Phone number

978-443-5388

WHITE, BOB

PART I
COMPUTATION OF INCOME TAX LIABILITY

1. Federal taxable income per federal tax return	1.	1,898	00
2. Net adjustment from Schedule A and B, line 12	2.	129,560	00
3. Total net income as reconciled (add line 1 and line 2)	3.	131,458	00
4. If multi-state corporation, enter amount from Schedule G, line 6; otherwise, enter amount from line 3.	4.	131,458	00
5. South Carolina net operating loss carryover, if applicable	5.	<	00 >
6. South Carolina net income subject to tax (subtract line 5 from line 4)	6.	131,458	00
7. Tax: Multiply line 6 by .05 (5%)	7.	6,573	00
8. Tax deferred on income from foreign trade receipts (see instructions)	8.	<	00 >
9. Balance (subtract line 8 from line 7)	9.	6,573	00
10. Credit carryover (Schedule C, line 7) 7,402 00 Nonrefundable credits (Schedule C, line 5).	10.	<	6,573 00 >
11. Balance of tax (subtract line 10 from line 9 and enter the difference, but not less than zero)	11.	0	00
12. Interest on DISC-deferred tax liability 00 or foreign trade deferred tax liability 00	12.		00
13. Total tax and/or interest (add lines 11 and line 12)	13.	0	00
14. Payments:			
(a) Tax withheld (attach 1099s, I-290s, and/or W-2s)	14a.		00
(b) Paid by declaration	14b.	5,000	00
(c) Paid with extension	14c.		00
(d) Credit from line 29b	14d.	89	00
Refundable Credits:			
(e) Ammonia Additive	14e.		00
(f) Milk Credit	14f.		00
(g) Motor Fuel Income Tax Credit	14g.		00
15. Total payments and refundable credits (add line 14a through line 14g)	15.	5,089	00
16. Balance of tax and/or interest (subtract line 15 from line 13)	16.	0	00
17. (a) Interest 00 (b) Late file/pay penalty 00			
(c) Declaration penalty (attach SC2220) 00			
Total (add line 17a through line 17c) See penalty and interest in SC1120 instructions	17.		00
18. Total Income Tax, interest, and penalty (add line 16 and line 17)	18.		00
19. Overpayment (subtract line 13 from line 15) 5,089 00 To be applied as follows:			
(a) Estimated Tax 2,040 00			
(b) License Fee 00			
(c) REFUND 3,049 00			

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

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TIME TRAVELERS

20255800-8 57-9999999

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SC1120

PART II COMPUTATION OF LICENSE FEE	
20. Total capital and paid in surplus (Multi-state corporations see Schedule E)	20. 395,575 00
21. License Fee: multiply line 20 x .001 then add \$15 (Fee cannot be less than \$25 per taxpayer)	21. 411 00
22. Credit carryover <input type="text"/> 00 Credit taken this year from SC1120TC, Part II, Column C	22. < 00 >
23. Balance (subtract line 22 from line 21)	23. 411 00
24. Payments: (a) Paid with extension	24a. 500 00
(b) Credit from line 19b	24b. 00
25. Total Payments (add line 24a and line 24b)	25. 500 00
26. Balance of License Fee (subtract line 25 from line 23)	26. 0 00
27. (a) Interest <input type="text"/> 00 (b) Late file/pay penalty <input type="text"/> 00	27. 00
Total (add line 27a and line 27b) See penalty and interest in SC1120 Instructions	27. 00
28. Total License Fee, interest, and penalty (add line 26 and line 27)	28. 0 00
29. OVERPAYMENT (subtract line 23 from line 28) 89 00 To be applied as follows:	
(a) Estimated Tax <input type="text"/> 00 (b) Income Tax <input type="text"/> 89 00 (c) REFUND	00
30. GRAND TOTAL: INCOME TAX and LICENSE FEE DUE (add line 18 and line 28)	30. 0 00

SCHEDULE A AND B ADDITIONS TO FEDERAL TAXABLE INCOME

1. Taxes on or measured by income	1. 129,560
2. Federal net operating loss	2.
3.	3.
4.	4.
5. Other additions (attach schedule)	5.
6. Total additions (add line 1 through line 5)	6. 129,560

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 line 7 through line 10)	11.
12. Net adjustment (subtract line 11 from line 6) Also enter on SC1120, Part I, line 2	12. 129,560

SCHEDULE C SUMMARY OF INCOME TAX CREDITS (FROM SC1120TC)

1. Credit carryover from previous year's SC1120, Schedule C (should match SC1120TC Column A, line 13)	1. 13,775
2. Enter total credits from SC1120TC, Column B, line 13. (attach SC1120TC and schedule for each tax credit claimed)	2. 500
3. Total credits (add line 1 and line 2)	3. 14,275
4. Tax from SC1120, Part I, line 9	4. 6,573
5. Lesser of line 3 or 4 (enter on SC1120, Part 1, line 10; should match SC1120TC, Column C, line 13)	5. 6,573
6. Enter credits lost due to statute (should match SC1120TC, Column D, line 13)	6. 300
7. Credit carryover (subtract line 5 and 6 from lines 3; should match SC1120TC, Column E, line 13)	7. 7,402

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	PRESIDENT	
	Signature of officer	Officer's title
	JAMES WILLIS	MARTY@TIMETRAVELERS.COM
Print officer's name	Date	Phone number
		989-654-7894
I authorize the Director of the SCDOR 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 signature		Print preparer's name
ELECTRONIC TAX FILERS, INC.		ELECTRONIC TAX FILERS, INC.
Date		Check if self-employed <input type="checkbox"/>
Preparer's Phone number		800-968-8900
Firm's name (or yours if self-employed)		PTIN or FEIN
AFIRMFIRMFIRMFIRMFIRMFIRMFIRMFIRMFIRMFIA		P00045080
Address		ZIP
ACITYCITYCITYCITYCIA, MI		48130-1234

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

Taxpayer's signature

Date

30912059

**SCHEDULE D ANNUAL REPORT TO BE COMPLETED BY ALL CORPORATIONS**

1. Name TIME TRAVELERS
2. Incorporated under the laws of the state of SOUTH CAROLINA
3. Location of the registered office of the corporation in South Carolina PO BOX 12345
In the city of CHAPIN Registered agent at this address WHITE, BOB
4. Location of principal office (street address) 12345 CLARK ST CHAPIN SC 29036
Nature of principal business in SC WRECKER SERVICE
5. Total number of **authorized shares** of capital stock, itemized by class and series, if any, within each class:
- | Number of shares | Class | Series |
|------------------|---------------|-----------|
| <u>1,000</u> | <u>COMMON</u> | <u>EE</u> |
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 |
|------------------|---------------|-----------|
| <u>1,000</u> | <u>COMMON</u> | <u>EE</u> |
7. Names and business addresses of the directors (or individuals functioning as directors) and principal officers in the corporation:
Attach separate schedule if you need more space.
- | Name | Title | Business address |
|---------------------|---------------|------------------|
| <u>JAMES</u> | <u>WILLIS</u> | <u>PRESIDENT</u> |
| <u>PO BOX 12345</u> | <u>CHAPIN</u> | <u>SC 29036</u> |
| | | |
| | | |
| | | |
8. Date incorporated 05/01/1992 Date commenced business in South Carolina 05/01/1992
9. Date of this report 03/15/2018 FEIN 57-9999999
10. If foreign corporation, the date qualified to do business in South Carolina _____
11. Was the name of the corporation changed during the year? NO Previous name _____
12. The corporation's books are in the care of WHITE, BOB
Located at (street address) PO BOX 12345 CHAPIN SC 29036
13. If filing consolidated, complete and attach Schedule J for each corporation included in the consolidation.
14. Total amount of stated capital per balance sheet is:
- | | |
|---|-------------------|
| A. Total paid in capital stock (cannot be a negative amount) | \$ <u>1,000</u> |
| B. Total paid in capital surplus (cannot be a negative amount) | \$ <u>394,575</u> |
| C. Total amount of stated capital (cannot be a negative amount) | \$ <u>395,575</u> |

ATTACH COMPLETE COPY OF YOUR FEDERAL RETURN**File electronically using Modernized Electronic Filing (MeF).**

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 check payable to SCDOR and include 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

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STATE OF SOUTH CAROLINA
CORPORATE TAX CREDITS

SC 1120-TC
(Rev. 9/17/19)
3370

Name of corporation
TIME TRAVELERS
FEIN
▶ 57-9999999
SC file #
▶ 20255800-8

All credits are computed on separate tax credit schedules. Attach appropriate schedules to this SC1120TC and your tax return.

Part I Corporate Income Tax Credits

Part 1 Credit Description	Code	Column A Previously Accrued	Column B Earned This Year	Column C Taken This Year	Column D Lost Due to Statute	Column E Carried Forward
1. New Jobs	004 ▶	13,775	500	6,573	300	7,402
2. Capital Investment	011 ▶					
3. Family Independence Payments ..	012 ▶					
4. Research Expenses	018 ▶					

Enter only Corporate Income Tax credits below in Part 1. You can find credit codes and descriptions, along with the required tax schedule for each credit, beginning on page 3.

Part I Credit Description	Code	Column A Previously Accrued	Column B Earned This Year	Column C Taken This Year	Column D Lost Due to Statute	Column E Carried Forward
5. _____ ▶	_____	_____	_____	_____	_____	_____
6. _____ ▶	_____	_____	_____	_____	_____	_____
7. _____ ▶	_____	_____	_____	_____	_____	_____
8. _____ ▶	_____	_____	_____	_____	_____	_____
9. _____ ▶	_____	_____	_____	_____	_____	_____
10. _____ ▶	_____	_____	_____	_____	_____	_____
11. _____ ▶	_____	_____	_____	_____	_____	_____
12. _____ ▶	_____	_____	_____	_____	_____	_____
13. Total Income Tax credits (add line 1 through line 12)		13,775	500	6,573	300	7,402

Continued on page 2

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**Part II Corporate License Fee Credits**

Enter only Corporate Income Tax credits in Part II. You can find credit codes and descriptions, along with the required tax schedule for each credit, on page 4

Part II Credit Description	Code	Column A Previously Accrued	Column B Earned This Year	Column C Taken This Year	Column D Lost Due to Statute	Column E Carried Forward
1. _____ ▶	_____	_____	_____	_____	_____	_____
2. _____ ▶	_____	_____	_____	_____	_____	_____
3. _____ ▶	_____	_____	_____	_____	_____	_____
4. _____ ▶	_____	_____	_____	_____	_____	_____
5. _____ ▶	_____	_____	_____	_____	_____	_____
6. _____ ▶	_____	_____	_____	_____	_____	_____
7. Total License Fee Credits (add line 1 through line 6)	_____	_____	_____	_____	_____	_____