

# File by Mail Instructions for your 2018 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.



Mary Whurr  
6236 Kilchurn Drive  
Fort Mill, SC 29707

<b>Balance Due/Refund</b>	Your federal tax return (Form 1040) shows no balance due or refund amount.		
<b>What You Need to Mail</b>	<p>Your tax return - The official return for mailing is included in this printout. Remember to sign and date the return.</p> <p>Mail your return to:</p> <p>Department of the Treasury Internal Revenue Service Kansas City, MO 64999-0002</p> <p>Deadline: Postmarked by Monday, April 15, 2019</p> <p>Note: Your state return may be due on a different date. Please review your state filing instructions.</p> <p>Don't forget correct postage on the envelope.</p>		
<b>What You Need to Keep</b>	Keep these instructions and a copy of your return for your records. If you did not print one before closing TurboTax, go back to the program and select File tab, then select the Print for Your Records category.		
<b>2018 Federal Tax Return Summary</b>	Adjusted Gross Income	\$	0.00
	Taxable Income	\$	0.00
	Total Tax	\$	0.00
	No Refund or Amount Due	\$	0.00
	Effective Tax Rate		0.00%



Hi Mary,

We just want to thank you for using TurboTax this year! It's our goal to make your taxes easy and accurate, year after year.

With TurboTax Federal Free Edition:

- Your filed return has 100% guaranteed accurate calculations\*
- You received a printed copy of your return with supporting documents for your records

Many happy returns from TurboTax.

Filing status: ☒ Single ☐ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying widow(er)

Your first name and initial: **Mary** Last name: **Whurr** Your social security number: **508-29-7592**

Your standard deduction: ☐ Someone can claim you as a dependent ☒ You were born before January 2, 1954 ☐ You are blind

If joint return, spouse's first name and initial: Last name: Spouse's social security number:

Spouse standard deduction: ☐ Someone can claim your spouse as a dependent ☐ Spouse was born before January 2, 1954 ☒ Full-year health care coverage or exempt (see inst.)

☐ Spouse is blind ☐ Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street). If you have a P.O. box, see instructions. **6236 Kilchurn Drive** Apt. no. Presidential Election Campaign (see inst.) ☐ You ☐ Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. **Fort Mill SC 29707** If more than four dependents, see inst. and ✓ here ☐

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

**Sign Here** Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

**Preparer's name** Preparer's signature PTIN Firm's EIN Check if: ☐ 3rd Party Designee ☐ Self-employed

**Firm's name** ▶ **Self-Prepared** Phone no.

**Firm's address** ▶

<b>1</b> Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . .	<b>1</b>
<b>2a</b> Tax-exempt interest . . . . .	<b>2b</b>
<b>3a</b> Qualified dividends . . . . .	<b>3b</b>
<b>4a</b> IRAs, pensions, and annuities . . . . .	<b>4b</b>
<b>5a</b> Social security benefits . . . . . <b>10,870.</b>	<b>5b</b> Taxable amount . . . . . <b>0.</b>
<b>6</b> Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22 . . . . .	<b>6</b> Taxable amount . . . . . <b>0.</b>
<b>7</b> Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6 . . . . .	<b>7</b> Taxable amount . . . . . <b>0.</b>
<b>8</b> <b>Standard deduction or itemized deductions</b> (from Schedule A) . . . . .	<b>8</b> Taxable amount . . . . . <b>13,600.</b>
<b>9</b> Qualified business income deduction (see instructions) . . . . .	<b>9</b> Taxable amount . . . . .
<b>10</b> Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0- . . . . .	<b>10</b> Taxable amount . . . . . <b>0.</b>
<b>11</b> <b>a</b> Tax (see inst.) <b>0.</b> (check if any from: <b>1</b> <input type="checkbox"/> Form(s) 8814 <b>2</b> <input type="checkbox"/> Form 4972 <b>3</b> <input type="checkbox"/> )	<b>11</b> Taxable amount . . . . . <b>0.</b>
<b>b</b> Add any amount from Schedule 2 and check here . . . . . <input type="checkbox"/>	<b>12</b> Taxable amount . . . . . <b>0.</b>
<b>12</b> <b>a</b> Child tax credit/credit for other dependents <b>b</b> Add any amount from Schedule 3 and check here ▶ <input type="checkbox"/>	<b>13</b> Taxable amount . . . . . <b>0.</b>
<b>13</b> Subtract line 12 from line 11. If zero or less, enter -0- . . . . .	<b>14</b> Taxable amount . . . . . <b>0.</b>
<b>14</b> Other taxes. Attach Schedule 4 . . . . .	<b>15</b> Taxable amount . . . . . <b>0.</b>
<b>15</b> Total tax. Add lines 13 and 14 . . . . .	<b>16</b> Taxable amount . . . . .
<b>16</b> Federal income tax withheld from Forms W-2 and 1099 . . . . .	<b>17</b> Taxable amount . . . . .
<b>17</b> Refundable credits: <b>a</b> EIC (see inst.) <b>b</b> Sch. 8812 <b>c</b> Form 8863	<b>18</b> Taxable amount . . . . .
<b>Add</b> any amount from Schedule 5 . . . . .	<b>19</b> Taxable amount . . . . .
<b>18</b> Add lines 16 and 17. These are your total payments . . . . .	<b>20a</b> Taxable amount . . . . .
<b>19</b> If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you <b>overpaid</b> . . . . .	<b>21</b> Taxable amount . . . . .
<b>20a</b> Amount of line 19 you want <b>refunded to you</b> . If Form 8888 is attached, check here . . . . . <input type="checkbox"/>	<b>22</b> Taxable amount . . . . . <b>0.</b>
<b>▶ b</b> Routing number <b>X X X X X X X X X X</b> <b>▶ c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	<b>23</b> Taxable amount . . . . .
<b>▶ d</b> Account number <b>X X X X X X X X X X X X X X X X X X</b>	
<b>21</b> Amount of line 19 you want <b>applied to your 2019 estimated tax</b> . . . . . <b>21</b>	
<b>Amount You Owe</b> <b>22</b> <b>Amount you owe</b> . Subtract line 18 from line 15. For details on how to pay, see instructions . . . . . <b>22</b>	
<b>23</b> Estimated tax penalty (see instructions) . . . . . <b>23</b>	

# File by Mail Instructions for your 2018 South Carolina Tax Return

Important: Your taxes are not finished until all required steps are completed.



(If you prefer, you can still e-file. Go to the end of these instructions for more information.)

Mary Whurr  
6236 Kilchurn Drive  
Fort Mill, SC 29707

<b>Balance Due/Refund</b>	Your South Carolina state tax return (SC1040) shows no balance due or refund amount.		
<b>What You Need to Mail</b>	<p>Your tax return - The official return for mailing is included in this printout. Remember to sign and date the return.</p> <p>Be sure to attach readable copies of your W-2s and 1099s to the front of your return.</p> <p>Mail your return and attachments to:</p> <p>SC1040 Processing Center P.O. Box 101100 Columbia, SC 29211-0100</p> <p>Deadline: Postmarked by April 15, 2019</p> <p>Don't forget correct postage on the envelope.</p>		
<b>What You Need to Keep</b>	Keep these instructions and a copy of your return for your records. If you did not print one before closing TurboTax, go back to the program and select File tab, then select the Print for Your Records category.		
<b>2018 South Carolina Tax Return Summary</b>	Taxable Income	\$	0.00
	Total Tax	\$	0.00
	No Refund or Amount Due	\$	0.00
<b>Special Formatting</b>	Your printed state tax forms may have special formatting on them, such as bar codes or other symbols. This is to enable fast processing. Don't worry, these forms have been approved by your taxing authority and are acceptable for printing and mailing.		
<b>Changed Your Mind About e-filing?</b>	You can still file electronically. Just go back to TurboTax, select the File tab, then select the E-file category. We'll walk you through the process. Once you file, we will let you know if your return is accepted (or rejected) by the state taxing agency.		

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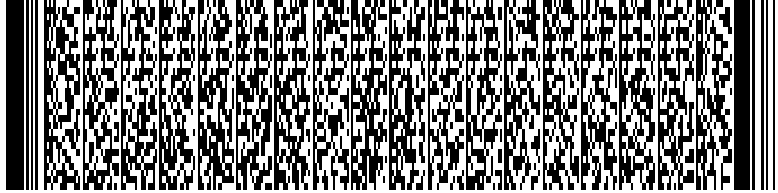
dor.sc.gov

STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE**2018 INDIVIDUAL INCOME TAX RETURN****SC1040**

(Rev. 10/23/18)

3075

Your Social Security Number			Check if deceased <input type="checkbox"/>
508	29	7592	
Spouse's Social Security Number			Check if deceased <input type="checkbox"/>



For the year January 1 - December 31, 2018, or fiscal tax year beginning 2018 and ending 2019

First name and middle initial <b>Mary</b>		Last name <b>Whurr</b>		Suffix
Spouse's first name, if married filing jointly		Last name		Suffix
Check if new address <input type="checkbox"/>	Mailing address (number and street, PO Box) <b>6236 Kilchurn Drive</b>			County code <b>29</b>
City <b>Fort Mill</b>		State <b>SC</b>	Zip <b>29707</b>	Daytime phone number with area code <b>(704) 458-2766</b>
Check if address is outside US <input type="checkbox"/>	Foreign country address including postal code			

- 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. Do not check this box if you are an individual..... ☐
- 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..... ☐  
Name of the combat zone: \_\_\_\_\_
- Check this box if this return is affected by a federally declared disaster area..... ☐  
Name of the disaster area: \_\_\_\_\_

**CHECK YOUR**(1) ☒ Single(3) ☐ Married filing separately - enter spouse's SSN: \_\_\_\_\_**FEDERAL FILING STATUS**(2) ☐ Married filing jointly(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 ..... 1

Number of taxpayers age 65 or older, as of December 31, 2018 ..... 1

**DEPENDENTS**

First name	Last name	Social Security Number	Relationship	Date of birth (MM/DD/YYYY)

30751184

REV 11/26/18 Intuit.cfp.sp

**INCOME AND ADJUSTMENTS****2018**

<b>1</b> Enter <b>federal taxable income</b> 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.	<b>1</b>	<b>Dollars</b>	<b>0</b>	<b>00</b>
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**ADDITIONS TO FEDERAL TAXABLE INCOME**

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

**SUBTRACTIONS FROM FEDERAL TAXABLE INCOME**

<b>f</b> State tax refund, if included on your federal return	<b>f</b>	<b>00</b>			
<b>g</b> Total and permanent disability retirement income, if taxed on your federal return	<b>g</b>	<b>00</b>			
<b>h</b> 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 _____	<b>h</b>	<b>00</b>			
<b>i</b> 44% of net capital gains held for more than one year	<b>i</b>	<b>00</b>			
<b>j</b> Volunteer deductions (see instructions) Type: _____	<b>j</b>	<b>00</b>			
<b>k</b> Contributions to the SC College Investment Program ("Future Scholar") or the SC Tuition Prepayment Program	<b>k</b>	<b>00</b>			
<b>l</b> Active Trade or Business Income deduction (see instructions)	<b>l</b>	<b>00</b>			
<b>m</b> Interest income from obligations of the US government	<b>m</b>	<b>00</b>			
<b>n</b> Certain nontaxable National Guard or Reserve pay	<b>n</b>	<b>00</b>			
<b>o</b> Social Security and/or railroad retirement, if taxed on your federal return	<b>o</b>	<b>0</b>	<b>00</b>		
<b>p</b> Retirement Deduction (see instructions)					
<b>p-1</b> Taxpayer date of birth: _____	<b>p-1</b>	<b>00</b>			
<b>p-2</b> Spouse date of birth: _____	<b>p-2</b>	<b>00</b>			
<b>p-3</b> Surviving spouse date of birth of deceased spouse: _____ Military Retirement Deduction (see instructions)	<b>p-3</b>	<b>00</b>			
<b>p-4</b> Taxpayer date of birth: _____	<b>p-4</b>	<b>00</b>			
<b>p-5</b> Spouse date of birth: _____	<b>p-5</b>	<b>00</b>			
<b>p-6</b> Surviving spouse date of birth of deceased spouse: _____	<b>p-6</b>	<b>00</b>			
<b>q</b> Age 65 and older deduction (see instructions)					
<b>q-1</b> Taxpayer date of birth: <u>05-26-1950</u>	<b>q-1</b>	<b>15,000</b>	<b>00</b>		
<b>q-2</b> Spouse date of birth: _____	<b>q-2</b>		<b>00</b>		
<b>r</b> Negative amount of federal taxable income	<b>r</b>	<b>13,600</b>	<b>00</b>		
<b>s</b> Subsistence allowance _____ days @ \$8.00	<b>s</b>	<b>00</b>			
<b>t</b> Dependents under the age of 6 years on December 31 of the tax year	<b>t</b>	<b>00</b>			
<b>u</b> Consumer Protection Services	<b>u</b>	<b>00</b>			
<b>v</b> Other subtractions (see instructions)	<b>v</b>	<b>00</b>			
<b>w</b> South Carolina Dependent Exemption (see instructions)	<b>w</b>	<b>0</b>	<b>00</b>		
<b>4</b> Add lines f through w and enter the total here. These are your <b>total subtractions</b> .	<b>4</b>	<b>&lt;</b>	<b>28,600</b>	<b>00</b>	<b>&gt;</b>
<b>5</b> 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 <b>SOUTH CAROLINA INCOME SUBJECT TO TAX</b>	<b>5</b>		<b>0</b>	<b>00</b>	
<b>6</b> TAX on your South Carolina Income Subject to Tax (see SC1040TT)	<b>6</b>	<b>0</b>	<b>00</b>		
<b>7</b> TAX on Lump Sum Distribution (attach SC4972)	<b>7</b>	<b>00</b>			
<b>8</b> TAX on Active Trade or Business Income (attach I-335)	<b>8</b>	<b>00</b>			
<b>9</b> TAX on excess withdrawals from Catastrophe Savings Accounts	<b>9</b>	<b>00</b>			
<b>10</b> Add lines 6 through 9 and enter the total here. This is your <b>TOTAL SOUTH CAROLINA TAX</b>	<b>10</b>		<b>0</b>	<b>00</b>	

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**NON-REFUNDABLE CREDITS**

2018

11 Child and Dependent Care (see instructions) . . . . .	▶	11		00	
12 Two Wage Earner Credit (see instructions) . . . . .	▶	12		00	
13 Other non-refundable credits. Attach SC1040TC and other state return(s) . . . . .	▶	13		00	
14 Add lines 11 through 13 and enter the total here. These are your <b>total nonrefundable credits</b> . . . . .		14			00
15 Subtract line 14 from line 10 and enter the difference. If less than zero, enter zero here . . . . .		15		0	00

**PAYMENTS AND REFUNDABLE CREDITS**

16 SC income tax withheld (attach W-2 or SC41) . . . . .	▶	16		00	
17 2018 estimated tax payments . . . . .	▶	17		00	
18 Amount paid with extension . . . . .	▶	18		00	
19 Nonresident sale of real estate . . . . .	▶	19		00	
20 Other SC withholding (attach form 1099) . . . . .	▶	20		00	
21 Tuition tax credit (attach I-319) . . . . .	▶	21		00	
22 Other refundable credit(s):					
22a Anhydrous Ammonia (attach I-333) . . . . .	▶	22a		00	
22b Milk Credit (attach I-334) . . . . .	▶	22b		00	
22c Classroom Teacher Expenses (attach I-360) . . . . .	▶	22c		00	
22d Parental Refundable Credit (attach I-361) . . . . .	▶	22d		00	
22e Motor Fuel Income Tax Credit (attach I-385) . . . . .	▶	22e		00	
Add lines 22a through 22e and enter the total here. These are your <b>total refundable credits</b> . . . . .	▶	22			00
23 Add lines 16 through 22 and enter the total here. These are your <b>TOTAL PAYMENTS</b> . . . . .		23			00
24 If line 23 is larger than line 15, subtract line 15 from line 23 and enter the overpayment . . . . .		24			00
25 If line 15 is larger than line 23, subtract line 23 from line 15 and enter the amount due . . . . .		25		0	00
26 USE TAX due on online, mail-order, or out-of-state purchases . . . . .	▶	26		0	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		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) <b>REFUND</b> ▶		30			00

**REFUND OPTIONS** (subject to program limitations)30a Mark one refund choice: ▶ ☐ Direct Deposit (30b required) ▶ ☐ Debit Card\* ▶ ☐ Paper Check

\*SCDOR Income Tax Refund Prepaid Debit Card issued by Bank of America.

30b Direct Deposit (for US accounts only) Type: ▶ ☐ Checking ▶ ☐ SavingsRouting 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		0	00
32 Late filing and/or late payment: Penalties _____ Interest _____ Enter total here ▶		32			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 <b>BALANCE DUE</b> ▶		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	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 <input type="checkbox"/> No <input type="checkbox"/>		Preparer's printed name		
Preparer's	Preparer Signature <b>Self prepared</b>	Date	Check if self-employed <input type="checkbox"/>	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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