SPF-100 REV 9-12

West Virginia Income/Business Franchise Tax Return S Corporation & Partnership (Pass-Through Entity)

2012

FEIN			EXTEND DUE DA						Day of we		
				ΤΔΧΥ	YEAR						
				177]						
BEGINNING	мм	DD	YY	ΥΥ	ENDI	IG		MM	DD		YYYY
BUSINESS NAMI	E AND ADDRESS	<u>'</u>			PRINCIPA	I PI	ACF OF B	USINESS	IN WEST VIR	GINIA	
20011120011711111	271110710011200				1 14.110.117			001200	, ,	J., (,), (
					TYPE OF	ACTI	IVITY IN W	EST VIR	GINIA		
			CHECI		CABLE BO)XE	S				
	TYPE OF ENTITY:	_	_	TYPE OF	RETURN:				FEDERAL RETU	RN ATTACHED:	:
S CORPORA	ATION PAR	RTNERSHIP	INITIAL	L FII	NAL	AME	ENDED		1120S	1065	5
N	ONRESIDENT W	ITHHOLDING	- COMPLE	TE SCH	EDULE S	P BE	FORE CO	OMPLET	ING THIS SE	CTION	
Percent of noni	residents filing com	posite personal i	ncome tax re	eturns (fro	om	Т					
Schedule SP, C	Column C, line 11)				1		•				
	residents filing non: Column D, line 11)						•				
	to withholding (from							3			.00
	ncome tax withheld										.00
	SP, Column H, line							4			.00
		BUSIN	IESS FRAN	NCHISE	TAX/WITH	HOI	LDING TA	AX			
5. West Virginia T	axable capital (Sch	edule B, Line 16)		5				.00		
Ü	ness franchise tax (line		o o	,					.00		
7. Tax credits (Sch	hedule SPF-100TC	C, Line 21)			7				.00		
•	ess franchise tax (li	,						-			.00
	nolding/business fra	,		,		$\overline{}$		9			.00
	ryforward credit					_			.00	-	
						_			.00	-	
	ayments (Complete					+			.00	-	
	with original return (d lines 10 through							14	.00		.00
	previously refunde										.00
	ts (line 14 minus lin	,		• ,				-			.00
. ,	16 is smaller than line s	,									.00
	e payment			-							.00
	x for late filing and										.00
	derpayment of bus										
	esting waiver/annua							20			.00
-	is return (add lines 17 t			West Virgin	nia State Tax D	epartr	ment	21			.00
22. Overpayment	(line 16 less line 9))			22				.00		
23. Amount of line	e 22 to be credited	to next year's tax			23				.00		
24 Amount of Lin	e 22 to be refunded	4			24				00		



Income/Loss Modifications to Federal Partnership Income

2012

SCHEDULE A	A - INCOME/LOSS		
1. Income/Loss: S corporation use Federal Form 1120S; Partnership us	se Federal Form 1065	1	.00
2. Other income: S corporation use Federal Form 1120S, Schedule K-1 Partnership use federal form 1065, Schedule K and K-1 supplementa		2	.00
Other expenses/deductions: S corporation use Federal Form 1120S, Federal Form 1065, Schedule K	3	.00	
4. TOTAL FEDERAL INCOME: Add lines 1 and 2 minus line 3 – Attach	4	.00	
5. Net modifications to federal income (from Schedule A-1, line 23 or Schedule A-1).	chedule A-2, line 24)	5	.00
6. Modified federal income (sum of lines 4 and 5). Wholly WV business corporation go to line 7. Modified federal partnership income (sum of		6	.00
7. Total nonbusiness income allocated everywhere: S CORPORATION Schedule A1, Column 3, Line 8		7	.00
8. Income subject to apportionment (line 6 less line 7)		8	.00
9. West Virginia apportionment factor (Round to 6 decimal places) from SPF-100APT, S corporation use Schedule B, Line 8; or Part 2, Column 3; or Part 3, Column 3; Partnership use Schedule B, Line 8	9 •		
 West Virginia apportioned income (line 8 multiplied by line 9) If line 10 through 4. However, you must complete Schedule SP. S corporations 		10	.00
11. Nonbusiness income allocated to West Virginia; S CORPORATION	ONLY. Use Form SPF-100APT,		
Schedule A2, Line 12		11	.00
11). If line 12 shows a loss, omit page 1, lines 1 through 4. Howeve	·	12	.00
SCHEDULE A-1 - MODIFICATIONS		RSF	IIP INCOME
	CREASING		
13. Interest income from obligations or securities of any state, or politic	al subdivision other than WV	13	.00
14. US Government obligation interest or dividends exempt from federal less related expenses not deducted on federal return		14	.00.
15. Interest expenses deducted on your federal return on indebtedness exempt from West Virginia income tax		15	.00
16. Total increasing modifications – Add lines 13 through 15		16	.00
DE	CREASING		
Interest or dividends from US government obligations, included on your federal return Sovernment obligation interest or dividends subject to federal but exempt from state tax, less			.00
related expenses deducted on your federal return		18	.00
Refund or credit of income taxes or taxes based upon income, important jurisdiction, included on your federal return		19	.00.
20. Subtotal of decreasing adjustments (Add lines 17 through 19)		20	.00
21. Allowance for governmental obligations/obligations secured by residential property	(from schedule A-3, line 9)	21	.00
22. Total decreasing adjustments (add lines 20 and 21)		22	.00
	NET		
23. Net modifications to federal partnership income – line 16 less line 22. Enter here and	l on Schedule. A Line 5	23	.00
	DUTING NUMBER		ACCOUNT NUMBER
Under penalties of perjury, I declare that I have examined this return, acc belief, it is true, correct and complete. I authorize the State Tax Department			
Signature of Officer/Partner or Member Print name of Officer/Partner or member	Title Date		Business Telephone Number
Paid preparer's signature Firm's name and address	Date		Preparer's Telephone Number

MAIL TO: WEST VIRGINIA STATE TAX DEPARTMENT TAX ACCOUNT ADMINISTRATION DIVISION PO BOX 11751 CHARLESTON, WV 25339-1751



FEIN

S CORPORATION INCOME TAX - CALCULATION OF WV TAXAB	LE	INCOME (§ 11-24-6 and 6a)
Interest or dividends from any state of local bonds or securities	1	.00
U.S. Government obligation interest or dividends not exempt from state tax, less related expenses not deducted on federal return	2	.00
Income taxes or taxes based upon net income, imposed by West Virginia or any other jurisdiction, deducted on your federal return	3	.00
Federal depreciation/amortization for WV water/air pollution control facilities – WHOLLY WV CORPORATIONS ONLY	4	.00
5. Unrelated business taxable income of a corporation exempt from federal tax (IRC 512)	5	.00
6. Federal net operating loss deduction	6	.00
Federal deduction for charitable contributions to Neighborhood Investment Programs if claiming the WV Neighborhood Investment Programs Tax Credit	7	.00
Net operating loss from sources outside the United States	8	.00
9. Foreign taxes deducted on your federal return	9	.00
10. Deduction taken under IRC 199 (WV Code §11-24-6a)	10	.00
11. Add back for expenses related to certain REIT's and regulated Investment Companies (WV Code §11-24-4b)	11	.00
12. TOTAL INCREASING ADJUSTMENTS (add lines 1 through 11)	12	.00
13. Refund or credit of income taxes based upon net income, imposed by WV or any other jurisdiction, included in federal taxable income	13	.00
14. Interest expense on obligations or securities of any state or its political subdivisions disallowed in determining federal taxable income	14	.00
15. Salary expense not allowed on federal return due to claiming the federal jobs credit	15	.00
16. Foreign dividend gross-up (IRC Section 78)	16	.00
17. Subpart F income (IRC Section 951)	17	.00
18. Taxable income from sources outside the United States	18	.00
19. Cost of WV water/air pollution control facilities – wholly WV only	19	.00
20. Employer contr butions to medical savings accounts (WV Code §33-16-15) included in federal taxable income less amounts withdrawn for non-medical purposes	20	.00
21. SUBTOTAL of decreasing adjustments – (add lines 13 through 20)	21	.00
22. Allowance for governmental obligations/obligations secured by residential property (from Schedule A-3, line 9)	22	.00
23. TOTAL DECREASING ADJUSTMENTS (add lines 21 and 22)	23	.00
24. Net modifications to Federal S corporation Income (line 12 less line 23). ENTER HERE AND ON SCHEDULE A, LINE 5	24	.00



SPF-100

Schedule A-3 and Schedule of Tax Payments

2012

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SCHEDULE A-3 - ALLOWANCE FOR GOVERNMENTAL OBLIGAT RESIDENTIAL PROPERTY (§11-24		
Federal obligations and securities	1	.00
Obligations of WV and political subdivisions of WV	2	.00
3. Investments or loans primarily secured by mortgages or deeds of trust on residential property located in WV	3	.00
Loans primarily secured by a lien or security agreement on a mobile home or double-wide located in WV	4	.00
5. TOTAL (add lines 1 through 4)	5	.00
6. Total assets as shown on Schedule L, Federal Form 1120S or Federal Form 1065	6	.00
7. Line 5 divided by line 6 (round to six [6] decimal places) 7		COMPLETED SCHEDULE B MUST BE ATTACHED
8. ADJUSTED INCOME . For S corps, add Schedule A, line 4 and Schedule A-2 line 12 minus Schedule A-2 line 21 plus total from Form SPF-100APT, Schedule A-2, lines 9, 10, and 11. For partnerships, add Schedule A line 4 and Schedule A-1, line 16 minus Schedule A-1 line 20	8	.00
9. ALLOWANCE (line 7 x line 8, disregard sign) Enter here and on Schedule A-2 Line 22 for S corporations or on Schedule A-1, line 21 for partnerships	9	.00
SCHEDULE OF TAX PAYMENTS	S	

	SCH	EDUL	E OF	TAX PA	YME	NTS		
Name of business	West Virginia Account	Date of Payment		ate	Type: withholding, estimated, extension,	Amount of payment		
Name of pusiness	Identification Number	MM	DD	YYYY	Indicate EFT	other pmts or prior year credit	other pmts or prior year credit	Amount or payment
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
							.00	
TOTAL (This amount must agree	ee with the amount on li	ne 14 or	front o	f return)			.00	



Schedule for Business Franchise Tax

2012

FEIN			Schedule B of Form SPF-100APT TIONMENT TO WEST VIRGINIA.
CALCULATION O	F WEST VIRGINIA TA	XABLE CAPITAL (§	§11-23-3(b)(2))
	Column 1 Beginning Balance	Column 2 Ending Balance	Column 3 – Average (Col. 1 + Col. 2) divided by 2
Dollar amount of common stock & preferred stock	.00	.00	.00
2. Paid-in or capital surplus	.00	.00	.00
Retained earnings appropriated & unappropriated	.00	.00	.00
4. Adjustments to shareholders equity	.00	.00	.00
Shareholders undistributed taxable income	.00	.00	.00
6. Accumulated adjustments account	.00	.00	.00
7. Other adjustments account	.00	.00	.00
8. Add lines 1 through 7 of column 3			.00
9. Less cost of treasury stock	.00	.00	.00
10. Dollar amount of partner's capital accounts	.00	.00	.00
11. Capital (column 3, line 8 less column 3, line	9)		.00
12. Multiplier for allowance for certain obligations line 7) S corporations and partnerships		•	
13. Allowance (line 10 or 11 multiplied by line 1	2		.00
14. Adjusted capital (subtract line 13 from line 1 enter this amount on line 16	10 or 11). If taxable only in West	Virginia check here and	.00
15. Apportionment factor (Form SPF-100APT, Scolumn 3)		•	COMPLETED FORM MUST BE ATTACHED
16. TAXABLE CAPITAL (line 14 multiplied by I	ine 15). Enter here and on front	of return, line 5	.00
	SUBSIDIARY CREDI	T (§11-23-17(c))	
Column 1 Account number and name of Subsidiary or Partnership	Column 2 Recomputed Business Franchise Tax Liability	Column 3 Percentage of Ownership	Column 4 Allowable Credit (Column 2 x Column 3)
FEIN			
NAME	.0	•	.00
FIEN	_		
NAME	.0	•	.00
FEIN		00	00
NAME 17. TOTAL (Enter here an on Schedule TC, line	.0		.00
·			.00
TAX CREDIT FOR PUBLIC			
18. Gross income in West Virginia subject to S			.00
19. Total gross income of taxpayer from all active			.00
20. Line 18 divided by line 19 (round to six [6] of	decimal places)		
21. Business franchise liability (from front of ret	turn, line 6, reduced by subsidiar	ry credit)	.00



.00

22. Allowable credit (line 21 x line 20). Enter here and on SPF-100TC, line 2.....

SPF-100TC

W

REV 9-12

Summary of Business Franchise Tax Credits

2012

NAME		FEIN	

This form is used by businesses to summarize the tax credits that they claim against their business franchise tax liability. In addition to completing this summary form, each tax credit has a schedule or form that is used to determine the amount of the credit that can be claimed. Both this summary form and the appropriate credit calculation schedule(s) or form(s) must be attached to your return in order to claim a tax credit. THE TOTAL AMOUNT OF CREDIT CANNOT EXCEED THE TAX LIABILITY. If you are claiming the Neighborhood Investment Program Credit you are no longer required to enclose the WV/NIPA-2 credit schedule with your return. You must maintain the schedule in your files.

TAX CREDIT	SCHEDULE OR FORM		APPLICABLE CREDIT
1. Subsidiary Credit (§11-23-17(c))	SCHEDULE B	1	.00
2. Business and Occupation Tax Credit (§11-23-17(b))	SCHEDULE B	2	.00
Research and Development Projects Credit (§11-13D-3(f))	SCHEDULE R & D*	3	.00
4. High-Growth Business Investment Tax Credit (§11-13U-4)	WV/HGBITC-1	4	.00
5. Business Investment & Job Expansion Credit (§11-13C)	WV/BCS-A & WV/BCS-1 OR WV/BCS-Small*,**	5	.00
6. Economic Opportunity Tax Credit (§11-13Q)	EOTC-A & EOTC-1	6	.00
7. Industrial Expansion/Revitalization Credit (§11-13D)	SCHEDULE I*	7	.00
8. Manufacturing Investment Tax Credit (§11-13S)	WV/MITC-1	8	.00
Residential Housing Development Projects Credit (§11-13D)	SCHEDULE O	9	.00
10. Coal Loading Facilities Credit (§11-13E)	SCHEDULE C	10	.00
11. West Virginia Neighborhood Investment Program Credit (§11-13J)	WV/NIPA-2	11	.00
12. Aerospace Industrial Facility Investment Credit (§11-13D-3f)	WV/AIF-1*	12	.00
13. Strategic Research and Development tax Credit (§11-13R)	WV/SRDTC-1	13	.00
14. Apprentice Training Tax Credit (§11-13W)	WV/ATTC-1	14	.00
15. Film Industry Investment Tax Credit (§11-13X)	WV/FIIA-TCS	15	.00
16. Goodwill Tax Credit (§11-23-5a(g))	WV/FOGW-1	16	.00
17. Manufacturing Property Tax Adjustment Credit (§11-13Y)	WV/MPTAC-1	17	.00
18. Alternative Fuel Tax Credit (§11-6D)	WV/AFTC-1	18	.00
19. Commercial Patent Incentives Tax Credit (§11-13AA)	WV/CPITC-1	19	.00
20. Innovative Mine Safety Technology Tax Credit (§11-13BB)	WV/IMSTTC-1	20	.00
21. TOTAL CREDITS (Add lines 1 through 20). Enter on front of ret	urn, line 7	21	.00

^{*} No credit is available to any taxpayer for investment placed in service or use after December 31, 2002. Taxpayers who gained entitlement to tax credit prior to January 1, 2003, retain that entitlement and may apply the credit in due course pursuant to the requirements and limitations of the original credit entitlement period.



^{**} Transition rules may apply.

SPF-100APT **REV 9-12**

Allocation and Apportionment for Multistate Businesses

	This form is used by corporations that are subject to tax in more than one state
FEIN	to allocate and apportion their income and/or capital to the State of West Virginia.
	Complete and attach to Form SPF-100. (See instructions and information for Schedule

	A1 and A2	2 and Schedule B, Part 1, 2, & 3)	
ALLOCATION OF NO	SCHEDULE A1 E	EVERYWHERE OR MULTISTATE BUSINE	SSFS (811.24.7)
Types of allocable income	Column 1 GROSS INCOME	Column 2 RELATED EXPENSES	Column 3 NET INCOME
1. Rents	.00	.00	.00
2. Royalties	.00	.00	.00
3. Capital gains/losses	.00	.00	.00
4. Interest	.00	.00	.00
5. Dividends	.00	.00	.00
6. Patent/copyright royalties	.00	.00	.00
7. Gain – sale of natural resources (IRC Sec. 631 (a)(b))	.00	.00	.00
8. Nonbusiness income/loss – Sum of line	es 1 through 7, column 3. Enter colu	umn 3 on SPF-100 Sch. A Line 7	.00
ALLOCATION OF NO	SCHEDULE A2 W	/EST VIRGINIA OR MULTISTATE BUSINE	SSFS (811-24-7)
Types of allocable income	Column 1 GROSS INCOME	Column 2 RELATED EXPENSES	Column 3 NET INCOME
1. Rents	.00	.00	.00
2. Royalties	.00	.00	.00
3. Capital gains/losses	.00	.00	.00
4. Interest	.00	.00	.00
5. Dividends	.00	.00	.00
6. Patent/copyright royalties	.00	.00	.00
7. Gain – sale of natural resources (IRC Sec. 631 (a)(b))	.00	.00	.00
8. Nonbusiness income/loss (sum of lines	s 1 through 7 of column 3)		.00
9. Less cost of West Virginia water/air pol	llution control facilities this year		.00
10. Federal depreciation/amortization on	those facilities this year		.00
11. Federal depreciation/amortization on	such facilities expensed in prior yea	r	.00
12. Net nonbusiness income/loss alloca SPF-100, Schedule A, line 11)	5 \	9 /	.00



FEIN

W

FAILURE TO COMPLETE SCHEDULE B **WILL RESULT IN 100% APPORTIONMENT TO WEST VIRGINIA**

SCHEDULE B

APPORTIONMENT FACTORS FOR MULTISTATE BUSINESS/PARTNERSHIPS (§11-24-7, & 11-23-5)

PART 1 - REGULAR FACTOR

LINES 1 & 2: Divide Column 1 by Column 2 and enter six (6) digit decimal in column 3.

LINE 5: Column 1 – Enter line 3. Column 2 – line 3 less line 4. Divide column 1 by column 2 and enter six (6) digit decimal in column 3.

	Column 1 West Virginia	Column 2 Everywhere	Column 3 Decimal Fraction (6 digits)
1. Total Property	.00	.00	
2. Total Payroll	.00	.00	
3. Total Sales	.00	.00	
Sales to purchasers in a state where you are not taxable		.00	
5. Adjusted Sales	.00	.00	
6. Adjusted Sales (enter line 5 again)	.00	.00	
7. TOTAL: Add Column 3, Lines 1, 2,			
8. APPORTIONMENT FACTOR – Linzero in Column 2, lines 1, 2, 5, and line 9 and on SPF-100, Schedule E	•		

PART 2 - MOTOR CARRIER FACTOR (§11-24-7a) VEHICLE MILEAGE – Use for Corporate Income Tax ONLY. Use Part 1 for Franchise Tax. Enter column 3 on Form SPF-100, Schedule A, line 9.					
Column 1 West Virginia	Column 2 Everywhere	Column 3 Decimal Fraction (6 digits)			
		•			
	NCIAL ORGANIZATION FACTOR (§11-24-7) Column 3 on SPF-100, Schedule A, Line 9 and on S	•			
Column 1 West Virginia	Column 2 Everywhere	Column 3 Decimal Fraction (6 digits)			
.00	.00	•			

SPF-100W REV 9-12

W

West Virginia Withholding Tax Schedule Pass-Through Entity

2012

Do NOT send NRW-2's, K-1's, and/or 1099's with your return. Enter WV withholding information below.

	JS NESS NAME IOWN ON FORM SPF-100			FEI	IN
	A – Payer Information	B – Taxpayer Information	n		C – WV Tax Withheld
					.00
	Payer ID from 1099, K-1, and/or NRW-2	Name		_	WV WITHHOLDING
1				_	Check the appropriate box
	Payer Name	FEIN			1099 K-1 NRW-2
	Address		_		Date tax year ending (MMYY)
	City, State, ZIP	Income Subject to WV WITHHOLDING	.0 G	U	Enter WV withholding Only
	A – Payer Information	B – Taxpayer Information		_	C – WV Tax Withheld
	A Tayor information	B Taxpayer information			
	Payer ID from 1099, K-1, and/or NRW-2	Nama		_	.00 WV WITHHOLDING
	rayer ib from 1099, K-1, and/or NKW-2	Name			Check the appropriate box
2	Payer Name	FEIN			
	Address			-	1099 K-1 NRW-2
			.0	0	Date tax year ending (MMYY)
	City, State, ZIP	Income Subject to WV WITHHOLDING	G		Enter WV withholding Only
	A – Payer Information	B – Taxpayer Information	n	_	C – WV Tax Withheld
					.00
	Payer ID from 1099, K-1, and/or NRW-2	Name			WV WITHHOLDING
3	Payer Name	FEIN		-	Check the appropriate box
	Address		.0	00	Date tax year ending (MMYY)
	City, State, ZIP	Income Subject to WV WITHHOLDING			Enter WV withholding Only
	A – Payer Information	B – Taxpayer Information	n		C – WV Tax Withheld
					.00
	Payer ID from 1099, K-1, and/or NRW-2	Name		-	WV WITHHOLDING
4				_	Check the appropriate box
	Payer Name	FEIN			1099 K-1 NRW-2
	Address		^		Date tax year ending (MMYY)
	City, State, ZIP	Income Subject to WV WITHHOLDING	.0 G	U	Enter WV withholding Only

Total WV tax withheld from column C above.....

.00

If you have WV withholding on multiple pages, add the totals and enter the GRAND total on line 12, Form SPF-100.



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SP (FORM SPF-100)

Shareholder/Partner Information and Nonresident Withholding

2012

1	l_					FEIN								
SOCIAL SECURITY NUMBER PERCENT OF CONVERSAHIPY PARTICIES PARTICIPATE PARTICIES PARTICIPATE	X WITHHOI DING TAX	NAME	MAILING ADDRESS INCLUDING CITY, STATE, AND ZIP CODE											
SOCIAL DERSIPARTINERS OWNNERSHIP AND COMPUTATION OF WEST VIRGINIA NONRESIDENT SHAREH SOCIAL DERSIPARTINESSIPERTY NUMBER PERCENT OF OWNERSHIP NON-WILLIAN SECURITY NUMBER PERCENT OWNERSHIP NON-WILLIAN SECURITY NUMBER PERCENT OWNERSHIP NON-WILLIAN SECURITY NUMBER PERCENT OWNERSHIP NON-WILLIAN SECURITY NUMBER NO	OI DEPS/PARTNER	(H)	TAX WITHHELD COL. G X 6.5%	00.	00.	00.	00.	00.	00.	00.	00.	00.	00.	00.
SOCIAL SECURITY NUMBER	SIDENT SHABEH	(9)	COLÙMN D TIMES COLUMN F	00.	00.	00.	00.	00.	00.	00.	00.	00.	00.	00.
SOCIAL SECURITY NUMBER COMPOSITE RESIDENT	T VIBGINIA NONDE	(F)	S CORPORATION/ PARTNERSHIP WV INCOME	00.	00.	00.	00.	00.	00.	00.	00.	00.	00.	
SOCIAL SECURITY NUMBER RESIDENT COMPOSITE RESIDENT Composite Com	WEST		(E)*											
SOCIAL SECURITY NUMBER 1 2 3 4 4 6 6 6 10 11 TOTALS SHAREHOLDERS/PARTINERS OWNNERSHIP AND COMNERSHIP AND COMPOSITE 10 11 12 13 14 15 16 17 18 19 10 10 10 11 11 11 12 13 14 15 16 17 18 19 19 19 19 19 19 19 19 19	PI ITATION OF	SHIP/	(D) NON- RESIDENT	•	•	•	•	•	•	•	•	•	•	•
SOCIAL SECURITY NUMBER SOCIAL SECURITY NUMBER OR FEIN TOTALS SHAREHOLDERS/PARTNERS OWNNERS WW WESIDENT TOTALS TOTALS SHAREHOLDERS/PARTNERS OWNNERS WESIDENT TOTALS TOTA	HIP AND COM	ENT OF OWNERS V FILING METHOI	(C)	•	•	•	•	•	•	•	•	•	•	•
SOCIAL SECURITY NUMBER OR FEIN OR FEIN 10 TOTALS	NEDS OWNED	PERC	(B) RESIDENT	•	•	•	•	•	•	•	•	•	•	•
SO	CHAREHOI DEBS/PART	(A)	CIAL SECÙRITY NUMBER OR FEIN											TOTALS
			SOC	-	7	ო	4	5	9	7	œ	6	10	7

FEIN

- Transfer total of column C to line 1 of Form SPF-100
- Transfer total of column D to line 2 of Form SPF-100

- Transfer total of column G to line 3 of Form SPF-100
- Transfer total of column H to line 4 of Form SPF-100

^{*} Column E - Check if WV/NRW-4 is attached or filed

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SPF-100U REV 9-12 W

Underpayment of Estimated Business Franchise Tax 2012
WV Code §11-10-18a

NAME						FE	IN				
	PART	I: All filers mu	st com	plete thi	is part						
Tax after credits								1			.00
IF LINE 1 IS L	ESS THAN \$12,000, DO NO	T COMPLETE	THIS F	ORM! YO	OU ARE	NOT S	UBJE	CT TO T	HE PEN	ALTY	
2. Multiply line 1 by ninety per	rcent (.90)		2				.00				
3. Enter the franchise tax after of	credits from your 2011 return (se	e instructions)	nstructions) 3 .00			.00					
4. Enter the smaller of line 2 of	or line 3							4			.00
	E 4 IS ZERO, DO NOT COMP NSTRUCTIONS TO DETERM									PENALTY	
	5. Determine your penalty by completing Part II, Part III, and on line 20 of Form SPF-100							5			.00
6. If you are requesting a wai	ver of the penalty calculated, c	check here					_				
,	the ANNUALIZED INCOME LIZED INCOME INSTALLMEN								•		1.
	Column B: 3 r	months		Colum	n C: 6 r	months			Column	D: 9 months	
1. Enter WV taxable capital for each	period	.00					.00				.00
2. Annualization amounts	4				2				•	1.3333	
3. Multiply line 1 by line 2		.00					.00				.00
	Column A: 3 months	Column B	Column B: 5 months		Column C: 8 mc		8 mor	onths Colu		ımn D: 11 mor	iths
4. Enter the WV taxable capital for each period	.00			.00				.00			.00
5. Annualization amounts	4	2	2.4			1.	5			1.09091	
6. Multiply line 4 by line 5	.00			.00				.00	.00		.00
In c	For line 7 of colun							3 or line	e 6.		
7. Annualized taxable capital	.00			.00				.00			.00
8. Tax rate	.0027	.00	027			.00	27			.0027	
9. Annualized tax (multiply line 7 by line 8)	.00			.00			.00				.00
10. Tax credits. Enter credits from											
line 7 of form SPF-100 in each column	.00			.00				.00			.00
11. Subtract line 10 from line 9. If	.00			.00				.00			.00
zero or less, enter 0	.00			.00				.00			.00
12. Applicable percentage	0.225	0.	45			0.6	75			0.9	
13. Multiply line 11 by line 12	.00			.00				.00			.00
COMF	PLETE LINES 14 THROUGH 2	20 FOR ONE C	OLUMI	N BEFOR	RE GOI	NG TO	THE N	EXT CO	LUMN		
		Colum	nn A		Columi	n B		Column	С	Column	D
14. Add the amounts in all previous	columns of line 20					.00	.00		.00		.00
15. Subtract line 14 from line 13. If z	ero or less, enter 0		.00			.00			.00		.00
16. Enter 1/4 of line 4 of Part I in each	ch column		.00			.00	.00		.00		.00
17. Enter the amount from line 19 of	the previous column of this workshe	et				.00			.00		.00
18. Add lines 16 and 17			.0	00		.00			.00		.00
19. Subtract line 15 from line 18. If z	ero or less, enter 0		.0	00		.00			.00		
20. Required Installment. Enter the	smaller of line 15 or line 18		.0	00		.00			.00		.00



NAME			
NAIVIE			

F	PART III: Compute your	underpayment		
	Column A	Column B	Column C	Column D
Installment due dates. Enter in columns A through D the 15th day of the 4th, 6th, 9th and 12th months of your tax year				
2. If you are using the annualized method, enter the amounts from Part II, Line 20; otherwise enter 1/4 of line 4 of Part I in each column	.00	.00	.00	.00
Estimated payments (see instructions). If line 3 is greater than or equal to line 2 for all columns, stop here. You are not subject to the penalty	.00	.00	.00	.00
COMPLETE LINES 4 THROUGH	GH 10 FOR ONE COLUM	IN BEFORE GOING TO	THE NEXT COLUMN	
4. Enter the amount, if any, from line 10 of the previous column		.00	.00	.00
5. Add lines 3 and 4		.00	.00	.00.
6. Add lines 8 and 9 of the previous column		.00	.00	.00
7. In column A, enter the value from line 3. In columns B through D, subtract line 6 from line 5. If zero or less, enter 0	.00	.00	.00	.00
8. If line 7 is zero, subtract line 5 from line 6, otherwise enter 0		.00	.00	
9. UNDERPAYMENT: If line 2 is equal to or more than line 7, subtract line 7 from line 2. Enter the result here and go to line 4 of the next column. Otherwise, go to line 10	.00	.00	.00	.00
10. OVERPAYMENT: If line 7 is more than line 2, subtract line 2 from line 7. Enter the result here and go to line 4 of the next	00	00	00	00
column	.00	.00	.00	.00
11 Futuration data of the installment naturally of the important of	PART IV: Figure the	e penalty	Т	
11. Enter the date of the installment payment or the unextended due date of your annual return, whichever is earlier				
12. Enter the number of days from the due date of the installment on Part III, line 1 to the date shown on Part IV, line 11				
13. Enter the number of days on line 12 before 7/1/2012				
14. Enter the number of days on line 12 after 6/30/2012 and before 1/1/2013				
15. Enter the number of days on line 12 after 12/31/2012 and before 7/1/2013				
16. Enter the number of days on line 12 after 6/30/2013 and before 1/1/2014				
17. Underpayment on Part III, Line 9 x (number of days on line 13/365) x 9.5%	.00	.00	.00	.00
18. Underpayment on Part III, Line 9 x (number of days on line 14/365) x 9.5%	.00	.00	.00	.00
19. Underpayment on Part III, Line 9 x (number of days on line 15/365) x *%	.00	.00	.00	.00
20. Underpayment on Part III, Line 9 x (number of days on line 16/365) x *%	.00	.00	.00	.00
21. TOTAL: Add lines 17 through 20	.00	.00	.00	.00
22. PENALTY DUE (add Columns A – D of line 21. Er	nter here and on line 5 c	of Part I and on line 20	of Form SPF-100	.00

^{*}See instructions to determine rates in effect for these periods

SPF-100T

Extension of Time to File Information Returns 2012

FEIN	EIN EXTENDED DUE DATE						ГЕ			
			TAX	YEAR						
BEGINNING				ENDING						
520	ММ	DD	YYYY		ММ		DD	YYYY		
BUSINESS NAME AND ADDRESS						TYPE OF ORGANIZATION: (CHECK ONLY ONE)				
						Partnership Filing Form SPF-100				
							Corporation Filing For	m SPF-100		
Nonresident withholding tax due (do not include nonresident composite payments)					1			.0	0	
2. Business franchise tax due					2			.0	0	
3. Total tax due (add lines 1 and 2)								.0	0	

NOTE: This form is to be used for requesting an extension of time to file the S Corporation, Partnership and/or Business Franchise Tax Return and for making tentative payments for the pass through entities and the nonresident withholding tax. This form is not a substitute for filing annual tax returns.

WHO MAY FILE: Any S corporation or partnership needing an extension of time to file the West Virginia Income/Business Franchise Tax Return (Form SPF-100) and expecting to owe tax must file Form SPF-100T. Any taxpayer granted an extension of time to file a federal return is granted the same extension of time to file their West Virginia return. An extension of time for filing does not extend the time for payment. To avoid interest and additions to tax for late payment, use this return to make a tentative payment pending the filing of your annual return.

PAYMENT OF NONRESIDENT WITHHOLDING TAX: West Virginia tax law (Code §11-21-71a) requires S corporations and partnerships to withhold income tax on distributions of West Virginia source income (whether actual or deemed distributions) to nonresident shareholders and partners. The withholding tax rate is 6.5%.

The nonresident withholding tax is due and payable with this request. You must remit by the unextended due date 90% of the nonresident withholding tax due for the taxable year or 100% of the tax paid for the prior taxable year, if the prior tax year was a full 12 months and tax was paid. If the balance due on your annual return is paid by the last day of your extension and the amount due is 10% or less of the tax due for the taxable year, no additions to tax will be imposed on the balance remitted. Overpayments may be refunded or credited to next year's withholding.

WHEN TO FILE: An S corporation's annual West Virginia Income/Business Franchise Tax return is due on or before the fifteenth day of the third month following the close of the taxable year. A partnership's annual West Virginia Income/Business Franchise Tax return is due on or before the fifteenth day of the fourth month following the close of the taxable year.

CLAIMING OF TENTATIVE PAYMENT: A tentative payment made by filing form SPF-100T must be claimed on line 11 of your West Virginia Income/Business Franchise Tax return (Form SPF-100).

Make check payable and remit to: **West Virginia State Tax Department Tax Account Administration Division** PO Box 11751 Charleston, WV 25339-1751

