SPF-100W REV 8-15

W

West Virginia Withholding-Credit Schedule **Pass-Through Entity**



Enter WV withholding-credit information below.

Do NOT send NRW-2's, K-1's, and/or 1099's with your return.

If FEIN entered in the Taxpayer Information Box B is different from the FEIN of Pass-Through Entity, you MUST attach a statement of explanation.

	USINESS NAME HOWN ON FORM SPF-100	FE	IN
	A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
			.00
	Payer ID from 1099, K-1, and/or NRW-2	Name	WV WITHHOLDING
1	Payer Name	FEIN	Check the appropriate box
			1099 K-1 NRW-2
	Address	.00	Date tax year ending (MMYY)
	City, State, ZIP	Income Subject to WV WITHHOLDING	Enter WV withholding Only
	A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
2			.00
	Payer ID from 1099, K-1, and/or NRW-2	Name	WV WITHHOLDING
	Payer Name	FEIN	Check the appropriate box
			1099 K-1 NRW-2
	Address	.00	Date tax year ending (MMYY)
	City, State, ZIP	Income Subject to WV WITHHOLDING	Enter M/V with helding Only
	City, State, ZIF		Enter WV withholding Only
	A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
			C – WV Tax Withheld .00
3	A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
3	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name	B – Taxpayer Information	C – WV Tax Withheld .00
3	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2	B – Taxpayer Information	C – WV Tax Withheld .00 WV WITHHOLDING Check the appropriate box
3	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name	B – Taxpayer Information	C – WV Tax Withheld C – WV Tax Withheld WV WITHHOLDING Check the appropriate box 1099 K-1 NRW-2
3	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address	B – Taxpayer Information Name FEIN .00	C – WV Tax Withheld C – WV Tax Withheld WV WITHHOLDING Check the appropriate box 1099 K-1 NRW-2 Date tax year ending (MMYY)
3	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP	B – Taxpayer Information Name FEIN .00 Income Subject to WV WITHHOLDING	C – WV Tax Withheld C – WV Tax Withheld WV WITHHOLDING Check the appropriate box 1099 K-1 NRW-2 Date tax year ending (MMYY) Enter WV withholding Only
3	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP	B – Taxpayer Information Name FEIN .00 Income Subject to WV WITHHOLDING	C – WV Tax Withheld .00 WV WITHHOLDING Check the appropriate box 1099 K-1 NRW-2 Date tax year ending (MMYY) Enter WV withholding Only C – WV Tax Withheld .00 WV WITHHOLDING
3	A – Payer Information A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP A – Payer Information	B – Taxpayer Information Name FEIN .00 Income Subject to WV WITHHOLDING B – Taxpayer Information	C – WV Tax Withheld C – WV Tax Withheld WV WITHHOLDING Check the appropriate box 1099 K-1 NRW-2 Date tax year ending (MMYY) Enter WV withholding Only C – WV Tax Withheld .00
	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name	B – Taxpayer Information Name FEIN .00 Income Subject to WV WITHHOLDING B – Taxpayer Information Name	C – WV Tax Withheld .00 WV WITHHOLDING Check the appropriate box 1099 K-1 NRW-2 Date tax year ending (MMYY) Enter WV withholding Only C – WV Tax Withheld .00 WV WITHHOLDING
	A – Payer Information Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP A – Payer Information Payer ID from 1099, K-1, and/or NRW-2	B – Taxpayer Information Name FEIN .00 Income Subject to WV WITHHOLDING B – Taxpayer Information Name	C – WV Tax Withheld C – WV Tax Withheld WV WITHHOLDING Check the appropriate box 1099 K-1 NRW-2 Date tax year ending (MMYY) Enter WV withholding Only C – WV Tax Withheld C – WV Tax Withheld O WV WITHHOLDING Check the appropriate box

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

If you have WV withholding on multiple pages, add the totals and enter the GRAND total on line 11, Form SPF-100.

.00