SPF-100 Rev 8-18

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

2018

| TAX PERIOD BEGINNING MM/DD/YYYY | | | ENDING MM/DD/YYYY | | | EXTENDED DUE DATE MM/DD/YYYY | | |
|--|-----------------------------------|---------------|----------------------|-------------------------------|---------|------------------------------|--------------|-----|
| ENTITY NAME | | | | FEIN | | | | |
| MAILING ADDRESS | | | | WV PASS THROUGH | I ENTI | TY ACCOUNT N | IUMBER | |
| CITY | STAT | TE ZIP | | CHANGE OF ADDR | RESS | | | |
| STATE OF DOMICILE | NAICS | CONTAC | CT NAME | | | CONTACT PHO | DNE | |
| CHECK ALL APPLI | ICABLE BOXE | ES | 1) ENTITY TYPE | S-CORPORATION (INCLUDE 1120S) | | NERSHIP JDE 1065) | | |
| 2) RETURN TYPE ANNUAL | INITIAL | | FINAL | AMENDED | OTHER | ₹ | | |
| 52/53 WEEK | FILER DAY OF WEE | EK ENDING | | | FISCA | L | | |
| 3) IF FINAL/SHORT/ INITIAL RETURN CEASED OPE | ERATIONS IN WV CHA | ANGE OF OWNE | ERSHIP | CHANGE OF FILING STAT | us | MERGER | | |
| SUCCESSOR | R FEIN OF PREDECESSOR: | | | TECHNICAL TERMINATION | ONS | OTHER | | |
| 4) REPORTABLE ENTITIES (SCHEDUL ANY PTE YO | .E C): DU ARE A PARTNER, MEMBE | ER, OR SHAREH | HOLDER DOING BI | JSINESS IN WV | | | | |
| ANY ENTITY | YOU OWN 80% OF VOTING | STOCK | | ANY DISREGARDED ENT | ΓΙΤΥ | | | |
| ANY ENTITY | THAT OWNED MORE THAN | 80% OF YOUR | STOCK | ANY CONTROLLED FOR | EIGN CC | DRPORATION | | |
| | | | | A INCOME | | WITH | B HOLDING | |
| 5) WV DISTRIBUTIVE INCOME OF RESID | | | | | .00 | | | |
| 6) WV DISTRIBUTIVE INCOME OF NON COMPOSITE TAX RETURN AND WIT (SCHEDULE SP, COLUMN F) | THHOLDING DUE | | | | .00 | | | .00 |
| 7) WV DISTRIBUTIVE INCOME OF NON ING TAX THAT ARE NOT FILING A N AND WITHHOLDING DUE (SCHEDU | NONRESIDENT COMPOSITE | TAX RETURN | | | .00 | | | .00 |
| 8) WV DISTRIBUTIVE INCOME OF NON NRW-4 THAT THEY WILL FILE AND F | | | | | .00 | | | |
| 9) TOTAL WV INCOME (SUM OF LINE 5 THROUGH 8, MUST | MATCH SCHEDULE A, LINE | 13) | | | .00 | | | |
| 10) TOTAL WV WITHHOLDING DUE | E (LINE 6 PLUS LINE 7) | | | | | | | .00 |



| | NAME | | | | FEIN | | | | | |
|-------|---|----------|------------|----------|-------------|----------|------------------|-----------------|-------------------|-------------|
| - | | | [| | | | | | | |
| 10. | Total WV-withholding due (from previous page) | | | 10 | | | | | | .00 |
| 11. I | Prior year carryforward credit | 11 | | | | | | | .00 | |
| | Estimated and extension payments | 12 | | | | | | | .00 | |
| 13. | Total Withholding credits (see instructions) | 13 | | | | | | | .00 | |
| 14. I | Payments (add lines 11 through 13; must match total on Schedule C) | | | 14 | | | | | | .00 |
| 15. (| Overpayment previously refunded or credited (amended return only) | | | 15 | | | | | | .00 |
| 16. | TOTAL PAYMENTS (subtract line 15 from line 14) | | | 16 | | | | | | .00 |
| | Fax Due – If line 16 is smaller than line 10, enter amount owed. If line 16 han line 10 skip to Line 21 | • | ′ 1 | 17 | | | | | | .00 |
| 18. I | nterest for late payment | | | 18 | | | | | | .00 |
| 19. / | Additions to tax for late filing and/or late payment | | | 19 | | | | | | .00 |
| | Total Due with this return (add lines 17 through 19) Make check payable to West Virginia State Tax Department | | | 20 | | | | | | .00 |
| 21. (| Overpayment (Line 16 less line 10) | 21 | | | | | | | .00 | |
| 22. / | Amount of line 21 to be credited to next year's tax | 22 | | | | | | | .00 | |
| 23. / | Amount to be refunded (line 21 minus line 22) | 23 | | | | | | | .00 | |
| | ect Deposit CHECKING SAVINGS | | | | | | | | | |
| OI F | Ceruna | RC | UTING | NUMBI | ER | | | ACCOU | NT NUMBER | |
| | PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT AGE PLEASE SEE PAGE 3 OF INSTRUC | | | | | | I A \$15.00 F | RETURNED | PAYMENT CHA | RGE. |
| | orize the State Tax Department to discuss my return with my preparer YES NO r penalty of perjury, I declare that I have examined this return, accompanying schedules, and sta | atements | , and to | the best | t of my kno | wledge a | nd belief, it is | s true, correct | and complete. | |
| Signa | ture of Officer/Partner or Member Print name of Officer/Partner or Member | Title | | | Date | Email | | E | Business Telepho | one Number |
| Signa | ture of paid preparer Printed Name Firm's name and address | | | | Date | Email | | F | Preparer's Telepl | hone Number |

MAIL TO: WEST VIRGINIA STATE TAX DEPARTMENT TAX ACCOUNT ADMINISTRATION DIVISION PO BOX 1202 CHARLESTON WV 25324-1202





Income/Loss Modifications to Federal Pass-Through Income

2018

| 1. | Income/Loss: S Corporation use Federal Form 1120S; Partnership use Federal Form 1065 | 1 | .00 |
|-----|--|----|-----|
| 2. | Other income: S Corporation use Federal Form 1120S, Schedule K,; Partnership use Federal Form 1065, Schedule K | 2 | .00 |
| 3. | Other expenses/deductions: S Corporation use Federal Form 1120S, Schedule K; Partnership use Federal Form 1065, Schedule K | 3 | .00 |
| 4. | TOTAL FEDERAL INCOME: Add lines 1 and 2 minus line 3 – Attach federal return | 4 | .00 |
| 5. | Modifications Increasing Federal Income (Schedule B, Line 6) | 5 | .00 |
| 6. | Modifications decreasing Federal Income (Schedule B, Line 10) | 6 | .00 |
| 7. | Modified Federal S Corporation/Partnership income (sum of lines 4 plus line 5 minus line 6) | 7 | .00 |
| 8. | Total nonbusiness income allocated everywhere from Form SPF-100APT, Schedule A-1, Column 3, Line 9 | 8 | .00 |
| 9. | Income subject to apportionment (line 7 less line 8) | 9 | .00 |
| 10. | West Virginia apportionment factor (Round to 6 decimal places) from SPF-100APT Schedule B, Part 1, line 8; or, if applicable, from SPF-100APT Schedule B, Part 2, Column 3; or SPF-100APT Schedule B, Part 3, Column 3 | | |
| 11. | Multistate S Corporation/Partnership's apportioned income (line 9 multiplied by line 10) | 11 | .00 |
| 12. | Nonbusiness income allocated to West Virginia. From Form SPF-100APT, Schedule A-2, line 9 | 12 | .00 |
| 13. | West Virginia income (wholly WV entities enter amount from line 7; multistate entities add lines 11 and line 12). You must complete Schedule SP | 13 | .00 |



SCHEDULE **B** SPF-100

MODIFICATIONS TO FEDERAL S CORPORATION AND PARTNERSHIP INCOME 2018

| | 011100 | | |
|-----|---|----|-----|
| | Adjustments Increasing | | |
| 1. | Interest or dividend income on federal obligations which is exempt from federal tax but subject to state tax | 1 | .00 |
| 2. | Interest or dividend income on state and local bonds other than bonds from West Virginia sources | 2 | .00 |
| 3. | Interest on money borrowed to purchase bonds earning income exempt from West Virginia tax | 3 | .00 |
| 4. | Qualifying 402(e) lump-sum income NOT included in federal adjusted gross income but subject to state tax | 4 | .00 |
| 5. | Other: | 5 | .00 |
| 6. | TOTAL INCREASING ADJUSTMENTS (Add lines 1 through 5; enter here and on Schedule A, line 5) | 6 | .00 |
| | Adjustments Decreasing | | |
| 7. | Interest or dividends received on Unitied States or West Virginia obligations included in federal adjusted gross income but exempt from state tax | 7 | .00 |
| 8. | Refunds of state and local income taxes received and reported as income to the IRS | 8 | .00 |
| 9. | Other: | 9 | .00 |
| 10. | TOTAL DECREASING ADJUSTMENTS (Add lines 7 through 9; enter here and on Schedule A, line 6) | 10 | .00 |

SPE-100

REPORTABLE ENTITIES & SCHEDULE OF TAX PAYMENTS

2018

| NAME OF | | | DATE O | NT | TYPE: WITHHOLDING, ESTIMATED, EXTENSION, OTHER PMTS OR PRIOR YEAR | | |
|------------------|------|----|--------|------|---|-------------------|-----|
| BUSINESS | FEIN | MM | DD | YYYY | CREDIT | AMOUNT OF PAYMENT | |
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| TOTAL (AMOUNT MU | | | | | 0, LINE 14) | | .00 |

Include all disregarded entities whether they have made a payment or not. **Note-**The disregarded entities will be filing under the parent's WV Account number.



SPF-100TC

SUMMARY OF TAX CREDITS 2018

| CORPORATION NAME | FEIN |
|------------------|------|
| | |

This form is to be used by S Corporations and Partnerships to summarize the tax credits that are allocable to their shareholders/partners. 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 S Corporation or Partnership must complete an allocation schedule for each tax credit claimed. These allocations will be reported on their K-1 or K-1C. 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 CREDITS THE TOTAL AMOUNT OF CREDIT CANNOT EXCEED THE TAX LIABILITY FOR THAT TAX | | TAX CREDIT CARRIED FORWARD FROM PRIOR YEARS | D | TAX CREDIT EARNE IN CURRENT YEAF | - 1 | TAX CREDIT USED II CURRENT YEAR | V | TAX CREDIT CARRIED FORWARD TO FUTURE YEARS | |
|---|--|---|----|-------------------------------------|-----|------------------------------------|---|--|-----|
| 1. | Economic Opportunity Tax Credit (§11-13Q) Schedule WV/EOTC-1and EOTC-A | 1 | .0 | 00 | | .00 | | .00 | .00 |
| 2. | Environmental Agricultural Equipment Tax Credit (§11-13k) Form WV/AG-1 | 2 | .0 | 00 | | .00 | | .00 | .00 |
| 3. | West Virginia Neighborhood Investment Program Credit (§11-13J) Form WV/NIPA-2 | 3 | .0 | 00 | | .00 | | .00 | .00 |
| 4. | Apprentice Training Tax Credit (§11-13w) Schedule WV/ATTC-1 | 4 | | | | .00 | | .00 | |
| 5. | Film Industry Tax Credit (§11-13x) Schedule WVFIIA-TCS | 5 | .0 | 00 | | .00 | | .00 | .00 |
| 6. | Alternative Fuel Tax Credit (§11-6d) Schedule AFTC-1 | 6 | .0 | 00 | | .00 | | .00 | .00 |
| 7. | Innovative Mine Safety Technology Tax Credit (§11-13BB) Schedule IMSTTC-1 | 7 | .0 | 00 | | .00 | | .00 | .00 |
| 8. | Historic Rehabilitated Buildings Investment Credit (§11-24-23a) Schedule RBIC | 8 | .0 | 00 | | .00 | | .00 | .00 |
| 9. | West Virginia Military Incentive Credit (§11-24-12) Schedule J | 9 | .0 | 00 | | .00 | | .00 | .00 |
| 10. | Farm to Food Bank Tax Credit (§11-13DD) | 10 | | | | .00 | | .00 | .00 |
| 11. | TOTAL CREDITS add lines 1 through 10 | 11 | .0 | 00 | | .00 | | .00 | .00 |



SPF-100APT

ALLOCATION AND APPORTIONMENT FOR MULTISTATE BUSINESSES 2018 W

FEIN

This form is used by entities that are subject to tax in more than one state to allocate and apportion their income to the State of West Virginia. Complete and attach to Form SPF-100. See instructions for information on APT Schedules A1, A2, and B, Part 1, 2, & 3.

| ALLOCATION OF | APT SCHEDULE A1 EVERYWHERE ALLOCATION OF NONBUSINESS INCOME FOR MULTISTATE BUSINESSES (§11-24-7) | | | | | | | |
|--|--|------------------------------|------------------------|--|--|--|--|--|
| 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 | | | | | |
| 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 | | | | | |
| Income from nonunitary sources reported on the schedule K-1 | | | .00 | | | | | |
| 9. Nonbusiness income/loss Sum of lines 1 through 8, of column 3. | Enter total of Column on SPF-100 S | chedule A, Line 8 | .00 | | | | | |

| ALLOCATION O | APT SCHEDULE A2 V F NONBUSINESS INCOME FO | | S (§11-24-7) |
|---|---|------------------------------|------------------------|
| 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 |
| 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 |
| Income from nonunitary sources reported on the schedule K-1 | | | .00 |
| Net nonbusiness income/loss allocate Sum of lines 1 through 8, column 3. E | d to West Virginia nter on SPF-100 Schedule A, Line 12 | | .00 |



| (SPF-100APT) | \ | N | |
|--------------|---|---|--|
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FAILURE TO COMPLETE SPF-100APT, SCHEDULE B WILL RESULT IN 100% APPORTIONMENT TO WV

APT SCHEDULE B APPORTIONMENT FACTORS FOR MULTISTATE S CORPORATIONS/PARTNERSHIPS (§11-24-7)

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, 5, and | 6 | | |
| APPORTIONMENT FACTOR – Line 7 of zero in column 2, lines 1, 2, 5, and 6. Enter | divided by the number 4, reduced by t six (6) digits after the decimal. Enter or | the number of factors showing a SPF-100, Schedule A, line 10 | • |

| PART 2 - MOTOR CARRIER FACTOR (§11-24-7A) | | | | | | | |
|---|---------------------------|------------------------|--------------------------------------|--|--|--|--|
| Divide Column 1 by Column 2 and enter six (6) digit decimal in Column 3 Enter on SPF-100, Schedule A, line 10 | | | | | | | |
| VEHICLE MILEAGE | Column 1 West Virginia | Column 2 Everywhere | Column 3 Decimal Fraction (6 digits) | | | | |

| PARIS | - FINANCIAL ORGANIZ | ATION FACTOR (911-24 | 4-7Б) |
|---|-----------------------------------|------------------------|--------------------------------------|
| Divide Column 1 by Column 2 and enters Enter on SPF-100, Schedule A, line 10 | six (6) digit decimal in column 3 | | |
| GROSS RECEIPTS | Column 1 West Virginia | Column 2 Everywhere | Column 3 Decimal Fraction (6 digits) |
| GROSS RECEIPTS | .00 | .00 | |



3 SCHEDULE SPE 400

SUMMARY OF K-1 SHAREHOLDERS/PARTNERS OWNERSHIP AND COMPUTATION OF WITHHOLDING TAX

2018

| 1 PARTMER NAME SSN/FEN NO. PARTMER NAME PARTMER NAME PARTMER NAME PARTMER D FOR NO. | | (A) | (B) | (C) | CHECK | ONLY | ONE | (D) | (E) | (F) | (9) | |
|---|----|---------------------------|-------------|---------------|--------------------------|-------------|----------------------|--|---------------------------|--|------------------|----|
| 10 | | SHAREHOLDER/ PARTNER NAME | SSN/FEIN | ► WV RESIDENT | NONRESIDENT COMPOSITE | nonresident | NONRESIDENT NRW-4 | PERCENTAGE OF OWNERSHIP to the sixth decimal place | WV DISTRIBUTIVE INCOME | TAX WITHHELD FOR NONRESIDENT COMPOSITE | TAX WITHHELD FOR | F |
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Total WV Income

Transfer Total of Column F to line 6 (Withholding column) of SPF-100
 Transfer Total of Column G to line 7 (Withholding column) of SPF-100

SPF-100EXT

FEIN

w Extension of Time to File Information Returns 2018

| | | | TAX | YEAR | | | | | | |
|-------------------|-----------------|-----------------|-------|-------|---|--------------------|--------|--------------------------------|---------|-----|
| BEGINNING | | | | ENDIN | 3 | | | | | |
| | ММ | DD | YYYY | | | MM | | DD | YYYY | |
| BUSINESS | NAME AND A | DRESS | | | | ٦ | | E OF BUSI ECK ONLY (| | |
| | | | | | | Partners | ship F | iling Form SF | PF-100 | |
| | | | | | | S Corpo | ratior | n Filing Form | SPF-100 | |
| | | | | | | | | | | |
| Contact Person | | | | | | Contact Phone # | | | | |
| | | | | | | | | | | |
| 1. Nonreside | nt Withholding | Тах | | 1 | | | | | | .00 |
| 2. Nonreside | nt Composite V | Vithholding Tax | | 2 | | | | | | .00 |
| 3. Less Prior | Year Credit and | d Estimated Pa | yment | 3 | | | | | | .00 |
| 4. Balance D | ue | | | 4 | | | | | | .00 |

EXTENDED DUE DATE

NOTE: This form is to be used for requesting an extension of time to file the S Corporation or Partnership Income Tax Return and for making an extension payment for the pass-through entity's nonresident withholding tax or their Nonresident Composite account. 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 Tax Return (Form SPF-100) and expecting to owe tax must file Form SPF-100EXT. 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 an extension 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 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 Tax return is due on or before the fifteenth day of the third month following the close of the taxable year.

CLAIMING OF EXTENSION PAYMENT: A tentative payment made by filing Form SPF-100EXT must be claimed on line 12 of your West Virginia Income 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



K-1
REV 9-18 FROM SP Schedule of WV Partner/Shareholder/Member/Beneficiary 2018

| | | | TAX | ABLE YEAR OF | ORGANIZA | TIO | N | | | | | |
|--|--|--|--------------------|--|----------------------------------|--------------|-------------------------------|------|----------|-----------|----------|-----|
| BEGINNING | | | | | ENDING | | | | | | | |
| | MM | DD | | YYYY | | | ММ | | DD | | YYYY | |
| ORGANIZATIO | N NAME (please type o | r print) | | | NAME OF P | ART | NER/SHARE | HOLD | ER/MEN | IBER/B | ENEFICIA | RY |
| | | , , | | | | | | | | | | |
| STREET or POST OF | FICE BOX | | | | STREET or POS | T OF | FICE BOX | | | | | |
| | | | | | | | | | | | | |
| CITY | | STATE | ZIP | | CITY | | | | STATE | ZIP | | |
| | | | | | | | | | | | | |
| WEST VIRGINIA IDEN | ITIFICATION NUMBER | NUMBER FEDERAL IDENTIFICATION NUMBER FEI | | | | | | | WV IDENT | IFICATION | N NUMBER | |
| | | | | | | | | | | | | |
| CHECK ONE: | | 1. Inc | come s rganizat | ubject to withholding tion's S Corporation | ng for nonresi n, Partnership | dent or I | as reported Fiduciary Retu | on | \$ | | | .00 |
| S Corporat | tion | 2. An | nount o | f West Virginia inco | ome tax withhe | eld (| see instruction | ns) | \$ | | | .00 |
| Limited Lia | ibility Company | | | | PERCENTAG | ΕO | F OWNERSH | IIP | | | | % |
| Partnershi | p | | | | | | | | | | | |
| INCOME | | | | | | | | | | | | |
| | o rata share of income a | llocable to | West V | /irginia | | 1 | | | | | | .00 |
| ADDITION | NS | | | | | | | | | | | |
| Interest or dividend income on federal obligations which is exempt from federal tax but subject to state tax | | | | | | 2 | | | | | | .00 |
| Interest or dividend income on state and local bonds earning income from West Virg sources | | | | | | 3 | | | | | | .00 |
| | noney borrowed to pur | | | | | 4 | | | | | | .00 |
| 5. Any amount Neighborhoo | not included in federal | income t | hat wa | s an eligible contri | bution for the | 5 | | | | | | .00 |
| 6. Other Income | e deducted from federal | adjusted g | gross in | come but subject to | state tax | 6 | | | | | | .00 |
| SUBTRAC | CTIONS | | | | | | | | | | | |
| | vidends received on Ur usted gross income but | | | 0 0 | | 7 | | | | | | .00 |
| 8. Refunds of st | ate and local income ta | xes receiv | ed and | reported as income | to the IRS | 8 | | | | | | .00 |
| 9. Other income | e included into federal | adjusted | gross i | income but exclude | ed from state | 9 | | | | | | .00 |



| NAME | | FEIN | |
|---|---|------|-----|
| CREDITS ALLOCABLE TO PARTNER/SHAREHOLDER/MEMBER | ? | | |
| 10. Economic Opportunity Tax Credit | 0 | | .00 |
| 11. Environmental Agricultural Equipment Tax Credit | 1 | | .00 |
| 12. WV Neighborhood Investment Program Credit | 2 | | .00 |
| 13. Apprentice Training Tax Credit | 3 | | .00 |
| 14. Film Industry Investment Tax Credit | 4 | | .00 |
| 15. Alternative Fuel Tax Credit | 5 | | .00 |
| 16. Innovative Mine Safety Tax Credit | 6 | | .00 |
| 17. Historic Rehabilitated Buildings Tax Credit | 7 | | .00 |
| 18. West Virginia Military IncentiveTax Credit | 8 | | .00 |
| 19. Farm to Food Bank Tax Credit | 9 | | .00 |
| ADDITIONAL INFORMATION | | | |
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