CNF-120 WEST VIRGINIA Rev 8-18 W CORPORATION NET INCOME TAX RETURN 2018

TAX PERIOD BEG	GINNING M/DD/YYYY		ENDING MM/DD/YYYY		DUE DATE MM/DD/YYYY	
CORPORATION NAM	A			FEIN		
CORPORATION NAM	VIE			FEIIN		
MAILING ADDRESS				WV CORPORATION	I INCOME TAX ACCOUNT NUME	ER
CITY		STATE ZIP		CHANGE OF AD	DRESS	
STATE OF DOMICILE	E NAICS	CONT	ACT NAME		CONTACT PHONE	
CHECK ALL	APPLICABLE	BOXES	1) ENTITY TYPE	CORPORATION	NONPROFIT	
2) RETURN TYPE	ANNUAL	INITIAL	FINAL	AMENDED	RAR OTHER	
	52/53 WEEK FILER DAY C	PF WEEK ENDING			FISCAL	
3) IF FINAL/SHORT/ INITIAL RETURN	CEASED OPERATIONS IN W	CHANGE OF OWN	NERSHIP	CHANGE OF FILING	STATUS MERGER	
	SUCCESSOR FEIN OF PREDE	CESSOR		TECHNICAL TERMI	NATIONS OTHER	
4) FILING METHOD	SEPARATE ENTITY	CHECK HERE IF	SEPARATE BUT PAR	T OF FEDERAL CONSOLID	ATED. ENTER FEIN:	
	COMBINED (UB-CR)	SEPARATE COME	BINED			
	,	GROUP COMBINE	ED SURETY FEIN:			
		WORLDWIDE ELE	ECTION			
5) IF SEPARATE, INDICAT	TE ACTIVITY	WHOLLY WV AC	TIVITY (SCHEDULE 1) MULTISTATE ACTIV	/ITY (SCHEDULE 2)	
6) REPORTABLE ENTITIE	ES (SCHEDULE C): ANY PTE YOU ARE A PART	NER, MEMBER, OR SHARI	EHOLDER DOING BU	JSINESS IN WV		
	ANY ENTITY YOU OWN 80%	6 OF VOTING STOCK		ANY DISREGARDE	D ENTITY	
	ANY ENTITY THAT OWNED	MORE THAN 80% OF YOU	JR STOCK	ANY CONTROLLED	FOREIGN CORPORATION	
7) CURRENTLY UNDER A	UDIT BY THE IRS?	YES YEARS UNDER A	AUDIT:			
e) Type of Feberal Be	TURN INCLUDED WITH THE	e DETIIDN	1120	DROEORMA 1120		



	NAME				FEIN					
• '			Г							
9. A	djusted Corporate Net Income Tax from Schedule 1,Schedule 2, or UE	-CR		9						.00
10. F	rior year carryforward credit	10							.00	
11. E	stimated and extension payments	11							.00	
	Vithholding must match the withholding statements unless withholding from NRSR	12							.00	
	CHECK HERE IF WITHHOLDING IS FROM NRSR (NONRESIDENT SALE OF REAL ESTATE)									
13. F	ayments (add lines 10 through 12; must match total on schedule C)			13						.00
14. C	Overpayment previously refunded or credited (amended return only)			14						.00
15. T	OTAL PAYMENTS (subtract line 14 from line 13)			15						.00
16. If	line 15 is larger than line 9 enter overpayment			16						.00
17. A	mount of line 16 to be credited to next year's tax			17						.00
18. A	mount of line 16 to be refunded (subtract line 17 from line 16)			18						.00
19. If	line 15 is <i>smaller</i> than line 9, enter tax due here			19						.00
20. lı	nterest for late payment (see instructions)			20						.00
21. A	dditions to tax for late filing and/or late payment (see instructions)			21						.00
22. F	enalty for underpayment of estimated tax (line 6, Form CNF-120U; attach so	hedule).		22						.00
23. T	OTAL DUE with this return (add lines 19 through 22)			23						.00
	ct Deposit CHECKING SAVINGS									
ot K	efund	RC	DUTING	NUMBI	ER			ACCOUNT	NUMBER	
	PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT A PLEASE SEE PAGE 3 OF INSTRU						A \$15.00 RE	TURNED PAY	MENT CHA	RGE.
	rize the State Tax Department to discuss my return with my preparer YES NO penalty of perjury, I declare that I have examined this return, accompanying schedules, and st						d belief, it is t	rue, correct and	complete.	
Signat	ure of Officer/Partner or Member Print name of Officer/Partner or Member	Title	:		Date	Email		Busir	ness Telepho	one Number
Signat	ure of paid preparer Printed Name Firm's name and address				Date	Email		Prepa	arer's Teleph	none Number
N // A	I TO:									

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



SCHEDULE 1 CNF-120

SEPARATE ENTITY FILER w WEST VIRGINIA CORPORATIONS WHOLLY IN WV 2018

CORPORATION NAME	F	EIN		
Federal taxable income (per attached federal return)		1		.00
Total increasing adjustments (Schedule B line 12)	2		.00	
Total decreasing adjustments (Schedule B line 25)	3		.00	
4. West Virginia adjusted taxable income – Line 1 plus line 2 minus line 3		4		.00
Net operating loss carryforward (Schedule NOL, column 6 total)		5		.00
6. Subtotal (line 4 less line 5)		6		.00
7. REIT Inclusion and other Taxable income		7		.00
WV Net Taxable Income (Add lines 6 and 7)		8		.00
Corporate Net Income Tax Rate		9	.065	
10. Corporate Net Income Tax (line 8 multiplied by line 9)		10		.00
11. Corporate Net Income Tax Credits (Column 2, line 15, Form CNF-120TC	S)	11		.00
12. Adjusted Corporate Net Income Tax (subtract line 11 from line 10)		12		.00
			Enter on CNF 120, page 2, line 9	

SCHEDULE

Adjustments to Federal Taxable Income 2018

	CNF-120 W		$\check{=}$
	Adjustments <i>Increasing</i> Federal Taxable Income (§11-24	-6 and 6a)	
1.	Interest or dividends on obligations or securities from any state or a political subdivision	1	.00
2.	US Government obligation interest or dividends not exempt from state tax, less related expenses not deducted on federal return	2	.00
3.	Income taxes or taxes based upon net income, imposed by this state or any other jurisdiction, deducted on your federal return	3	.00
4.	Federal depreciation/amortization for West Virginia water/air pollution control facilities – wholly West Virginia corporations only. Multistate corporations must use CNF-120APT, Schedule A-2, line 11	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
7.	Federal deduction for charitable contributions to Neighborhood Investment Programs, if claiming the West Virginia Neighborhood Investment Programs Tax Credit	7	.00
8.	Net operating loss from sources outside the United States (WV Code §11-24-6(b)(6))	8	.00
9.	Foreign taxes deducted on your federal return	9	.00
10.	Add back expenses related to certain REIT's and Regulated Investment Companies and certain interest and intangible expenses (WV Code §11-24-4b)	10	.00
11.	Other increasing adjustments	11	.00
12.	TOTAL INCREASING ADJUSTMENTS (Add lines 1 through 11; enter here and on Schedule 1, line 2 or Schedule 2, line 2)	12	.00
	Adjustments Decreasing Federal Taxable Income (§1	1-24-6)	
13.	Refund or credit of overpayment of income taxes or taxes based upon net income, imposed by this state 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.	US Government obligation interest or dividends subject to federal but exempt from state tax, less related expenses deducted on your federal return	15	.00
16.	Salary expense not allowed on federal return due to claiming the federal jobs credit	16	.00
17.	Foreign dividend gross-up (IRC Section 78)	17	.00
18.	Subpart F income (IRC Section 951)	18	.00
19.	Taxable income from sources outside the United States	19	.00
20.	Cost of West Virginia water/air pollution control facilities – wholly WV corporations only. Multistate corporations must use CNF-120 APT, Schedule A-2, line 10	20	.00
21.	Employer contributions to medical savings accounts (WV Code §33-16-15) included in federal taxable income less amounts withdrawn for non-medical purposes.	21	.00
22.	Other decreasing adjustments	22	.00
23.	SUBTOTAL of decreasing adjustments (Add lines 13 through 22)	23	.00
24.	Schedule B-1 allowance (Schedule B-1, Line 9)	24	.00
25.	TOTAL DECREASING ADJUSTMENTS (Add lines 23 and 24; enter here and on Schedule 1, line 3 or Schedule 2, line 3)	25	.00



B-1 CNF-120

ALLOWANCE FOR GOVERNMENTAL OBLIGATIONS/ $_{w}$ obligations secured by residential property (§11-24-6(F)) 2018

		AVERAGE MONTHLY BALANCE
Federal obligations and securities	1	.0
Obligations of West Virginia and any political subdivision of West Virginia	2	.0
Investments or loans primarily secured by mortgages or deeds of trusts on residential property located in West Virginia	3	.0
Loans primarily secured by a lien or security agreement on a mobile home or doublewide located in West Virginia	4	.0
5. TOTAL (Add lines 1 through 4)	5	.0
6. Total assets as shown on Schedule L, Federal Form 1120 or 1120A	6	.0
7. Divide line 5 by line 6 (round to six (6) decimal places)	7	
8. Adjusted income (Schedule 1, line 1 or Schedule 2, line 1 plus Schedule B line 12, minus line 23, plus Form CNF-120APT, Schedule A-2, lines 10, 11, & 12)	8	.0
9. ALLOWANCE (line 7 multiplied by line 8 (disregard sign)) Enter here and on Schedule B, line 24	9	.0



C CNF-120

REPORTABLE ENTITIES & SCHEDULE OF TAX PAYMENTS

2018

NAME OF			DATE (TYPE: WITHHOLDING, ESTIMATED, EXTEN-		
BUSINESS	FEIN	MM	DD	YYYY	SION, OTHER PMTS OR PRIOR YEAR CREDIT	AMOUNT OF PAYMENT	
							Ī
							Ī
							Ī
							Ī
							Ī
							Ī
							+
							+
							+
							+
							-
							-
							-
							_

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.



NOL CNF-120

WEST VIRGINIA NET OPERATING LOSS CARRYFORWARD CALCULATION (§11-24-6 (D))

2018

	JMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5	COLUMN 6	COLUMN 7
Lo	h and ir of oss YYYY	FEIN of the Consolidated Parent or FEIN of Each Entity Incurring WV NOL	Amount of West Virginia Net Operating Loss	Amount carried back to years prior to loss year	Amount carried forward to years prior to this year	Amount being used this year	Remaining unused net operating loss
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
			.00	.00	.00	.00	.00
		rginia net operating loss carr column 6 – Enter on Schedul			lumn 3	.00	

*PLEASE NOTE - WV Net Operating Loss incurred in tax years beginning on and after January 1, 2009 can only be claimed by the entity that incurred the loss. To claim loss incurred on a consolidated return that the entity was a part of prior to 2009, provide the name and FEIN of the Consolidated Parent that reported the loss. To Claim loss in tax years 2009 and later (including each unitary group member), provide the name and FEIN of the entity that incurred the loss.

FEIN				
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CNF-120APT

ALLOCATION AND APPORTIONMENT FOR MULTISTATE BUSINESSES 2018

This form is used by corporations 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 CNF-120. See instructions for information on APT Schedules A1, A2, and B, Part 1, 2, & 3.

ALLOCATION OF	APT SCHEDULE A1 F NONBUSINESS INCOME FO	EVERYWHERE R MULTISTATE BUSINESSES	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
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
Income from nonunitary sources reported on the schedule K-1C			.00
9. Nonbusiness income/loss – Sum of lin	es 1 through 8, of column 3. Enter to	tal of Column on Schedule 2, line 5	.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
8. Income from nonunitary sources reported on the schedule K-1C			.00
9. Nonbusiness income/loss – Sum of lin	nes 1 through 8, of column 3		.00
10. Less cost of West Virginia water/air po	ollution control facilities this year		.00
11. Federal depreciation/amortization on	those facilities this year		.00
12. Federal depreciation/amortization on	such facilities expensed in prior year.		.00
13. Net nonbusiness income/loss allocate	d to West Virginia (sum of lines 9 through	12, column 3. Enter on Schedule 2, Line 9	.00



(CNF-120APT)	W	
FEIN		FAILURE TO COMPLETE CNF-120APT, SCHEDULE
		B WILL RESULT IN 100% APPORTIONMENT
		TO MECT MIDCINIA

APT SCHEDULE B APPORTIONMENT FACTORS FOR MULTISTATE BUSINESS (§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		
8. APPORTIONMENT FACTOR – Line 7 d zero in column 2, lines 1, 2, 5, and 6. Ente			·

PART 2 - MOTOR CARRIER FACTOR (§11-24-7A)							
Divide Column 1 by Column 2 and enter six (6) digit decimal in Column 3 Enter Column 3 on Form CNF-120, Schedule 2, line 7							
VEHICLE MILEAGE	Column 1 West Virginia	Column 2 Everywhere	Column 3 Decimal Fraction (6 digits)				
VEHICLE MILEAGE							

PART 3 - FINANCIAL ORGANIZATION FACTOR (§11-24-7B)								
Divide Column 1 by Column 2 and enter six (6) digit decimal in column 3 Enter Column 3 on CNF-120, Schedule 2, line 7.								
GROSS RECEIPTS	Column 1 West Virginia	Column 2 Everywhere	Column 3 Decimal Fraction (6 digits)					
GROSS RECEIPTS	00	00						





SUMMARY OF CORPORATION NET INCOME TAX CREDITS

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CORPORATION NAME	FEIN

This form is used by corporations to summarize the tax credits that they claim against their Corporation Net Income 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 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. 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		COLUMN 1 CREDIT CALCULATED ON APPROPRIATE SCHEDULE		COLUMN 2 CREDIT USED	
1.	Economic Opportunity Tax Credit (§11-130) Schedule WV/EOTC-1	1		.00		.00
2.	Manufacturing Investment Tax Credit (§11-13S) Schedule WV/MITC-1	2		.00		.00
3.	Historic Rehabilitated Buildings Investment Credit (§11-24-23a) Schedule RBIC	3		.00		.00
4.	West Virginia Neighborhood Investment Program Credit (§11-13J) Form WV/NIPA-2	4		.00		.00
5.	Environmental Agricultural Equipment Tax Credit (§11-13k) Form WV/AG-1	5		.00		.00
6.	Electric, Gas, and Water Utilities Rate Reduction Credit (§11-24-11) Schedule L	6		.00		.00
7.	Telephone Utilities Rate Reduction Credit (§11-24-11a) Schedule K	7		.00		.00
8.	West Virginia Military Incentive Credit (§11-24-12) Schedule J	8		.00		.00
9.	Apprentice Training Tax Credit (§11-13w) Schedule WV/ATTC-1	9		.00		.00
10.	Film Industry Tax Credit (§11-13x) Schedule WVFIIA-TCS.	10		.00		.00
11.	Manufacturing Property Tax Adjustment Credit (§11-13Y) Schedule WV/MPTAC-1	11		.00		.00
12.	Alternative Fuel Tax Credit (§11-6d) Schedule AFTC-1	12		.00		.00
13.	Innovative Mine Safety Technology Tax Credit (§11-13BB) Schedule IMSTTC-1	13		.00		.00
14.	Farm to Food Bank Tax Credit (§11-13DD)	14		.00		.00
15.	TOTAL CREDITS Add lines 1 through 14	15		.00		.00
					Enter on Line 11, Schedule	∍ 1

Enter on Line 11, Schedule 1 or Line 17, Schedule 2

Attach this form and the appropriate computation schedules/forms and documentation to your return to support the credit claimed.



CNF-120U REV 8-18

W

Underpayment of Estimated Tax Penalty (WV Code §11-10-18a)

2018

CC	RPORATION NAME				FEIN						
PART I: All filers must complete this part											
1.	1. Corporate Net Income Tax after credits (line 9 of Form CNF-120)										
	IF LINE 1 IS LESS THAN \$650, DO NOT COMPLETE LINES 2 OR 3. ENTER ZERO ON LINE 5										
2.	Multiply line 1 by ninety perce	nt (.90)			2			.00			
3.	Enter the income tax after cre	dits from your 2017 return	n (see	e instructions)	3			.00			
4.	Enter the smaller of line 2 or I	ine 3				4			.00		
5.	Income Tax required to be pa	id. Enter line 4 amount he	re			5			.00		
		ZERO, DO NOT COMP EUCTIONS TO DETERM									
6.	Determine your penalty by of from line 42 here and on line	ompleting Part II, Part III	, and	Part IV. Enter your	penalty	/	22,0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.00		
	If you	are requesting a waive	r of t	he penalty calcula	ited, ch	neck here					
	If you are using the	ANNUALIZED INCOME	wo	RKSHEET to comp	oute yo	ur underpayment pe	enalty,	complete Part II			
	PART II: ANNUALIZED INCOME INSTALLMENT (Multistate taxpayers use apportioned figures for lines 1 and 4)										
		Column B: 3 months Column C: 6 months Column D: 9 months							hs		
1.	Enter WV taxable income fo	r 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	3	Column B: 5 mo	nths	Column C: 8 mon	ths	Column D: 11 mon	ths		
	Enter the WV taxable income for each period		.00		.00		.00		.00		
5. /	Annualization amounts	4		2.4		1.5		1.09091			
6.	Multiply line 4 by line 5		.00		.00		.00		.00		
For line 7 of column A, enter the amount from line 6 of column A. In columns B, C, & D, enter the smaller of the amounts in each column from line 3 or line 6.											
7.	Annualized taxable income		.00		.00		.00		.00		
	Tax rate	0.065		0.065		0.065		0.065			
	Annualized tax (multiply line 7 by line 8)		.00		.00		.00		.00		
	Tax credits. Enter credits from CNF-120TC line 15 in each column		.00		.00		.00		.00		
	Subtract line 10 from line 9. If zero or less, enter 0		.00		.00		.00		.00		
12.	Applicable percentage	0.225		.45		.675		0.9			
13.	Multiply line 11 by line 12		.00		.00		.00		.00		



Underpayment of Estimated Tax Penalty (Continued)

2018

	_	
NAME		FEIN

COMPLETE LINES 14 THRO	DUGH 20 FC	OR ONE	COLUMI	N BEFORE	GOIN	G TO THE NE.	XT (COLUMN
		Colu	mn A	Column	В	Column C		Column D
14. Add the amounts in all previous columns of line 20.					.00		00	.00
15. Subtract line 14 from line 13. If zero or less, enter 0			.00		.00		00	.00
16. Enter 1/4 of Part I, line 4 in each column			.00		.00		00	.00
17. Enter the amount from line 19 of the previous column			.00					
worksheet					.00		00	.00
18. Add lines 16 and 17			.00		.00		00	.00
19. Subtract line 15 from line 18. If zero or less, enter 0.			.00		.00		00	
20. Required Installment. Enter the smaller of line 15 or	line 18		.00		.00		00	.00
	PART III:	Calcula	te the Un	derpaymer	nt			
	Colum	n A	Col	umn B		Column C		Column D
21. Installment Due Dates: Enter in columns A – D the 15th day of the 4th, 6th, 9th, and 12th months of your tax year								
22. If you are using the annualized method, enter the amounts from line 20; otherwise 1/4 of Part I, line 5 of each column		.00		.00		.00		.00
23. Estimated payments (see instructions). If line 23 is greater than or equal to line 22 for all columns, stop here, you are not subject to the penalty		.00		.00		.00		.00
COMPLETE LINES 24 T	THROUGH 30	FOR ONE	COLUMN	BEFORE GOI	NG TO	THE NEXT COL	JMN	
24. Enter the amount, if any, from line 30 of the previous column				.00		.00		.00
25. Add lines 23 and 24				.00		.00		.00
26. Add lines 28 and 29 of the previous column				.00		.00		.00
27. In column A enter the value from line 23. In columns B – D, subtract line 26 from line 25. If zero or less, enter 0		.00		.00		.00		.00
28. If line 27 is zero, subtract line 25 from line 26; otherwise enter 0				.00		.00		
29. UNDERPAYMENT: If line 22 is equal to or more than line 27, subtract line 27 from line 22. Enter the result here and go to line 24 of the next column. Otherwise, go to line 30		.00		.00		.00		.00
30. OVERPAYMENT: If line 27 is more than line 22, subtract line 22 from line 27. Enter the result here and go to line 24 of the next column		.00		.00		.00		.00

Underpayment of Estimated Tax Penalty (Continued)

2018

NAME		FEIN			
31. Enter the date of the installment payment or the unextended due date of your annual return, whichever is earlier					
32. Enter the number of days from the due date of the installment on Part III, line 21 to the date shown on Part IV, line 31					
33. Enter the number of days on line 32 before 7/1/1	18.				
34. Enter the number of days on line 32 after 6/30/1 and before 1/1/19					
35. Enter the number of days on line 32 after 12/31/ and before 7/1/19					
36. Enter the number of days on line 32 after 6/30/1 and before 1/1/20					
37. Underpayment on Part III, Line 29 x (number of days on line 33/365) x .0875		.00	.00	.00	
38. Underpayment on Part III, Line 29 x (number of days on line 34/365) x .0875	.00	.00	.00	.00	
39. Underpayment on Part III, Line 29 x (number of days on line 35/365) x .0875	.00	.00	.00	.00	
40. Underpayment on Part III, Line 29 x (number of days on line 36/365) x * %		.00	.00	.00	
41. TOTAL: Add lines 37 through 40		.00	.00	.00	
42. PENALTY DUE – Add Columns A – D, line 41. E	.00				

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

K-1C FROM SP

Schedule of WV Partner/Shareholder/Member/Beneficiary Information for Corporations Subject to Corporate Income Tax 2018

			TAX	ABLE YEAR OF	ORGANIZ.	ATIO	N						
BEGINNING MM/DD/YYY					ENDING MM/DD/YYY								
ORGANIZATION NAME (please type or print) NAME						PAR	TNER/SHARE	HOLE	ER/MEN	/IBEF	R/BENEFI	CIARY	
STREET or POST OF	FFICE BOX				STREET or Po	OST OF	FICE BOX						
CITY		STATE	ZIP		CITY				STATE	ZIP			
WEST VIRGINIA IDEI	NTIFICATION NUMBER	FEDERAL II	DENTIF	ICATION NUMBER	FEIN				WV IDEN	TIFICA	TION NUMBE	:R	
CHECK ONE: S	Corporation			subject to withholdir ation's S Corporation					\$				
Li	mited Liability Company	2. Am	ount o	of West Virginia inco	ome tax with	held ((see instruction	ns)	\$				
Pa	artnership				PERCENTA	GE C	F OWNERSH	IIP				Ç	%
INCOME													
						1							00
Distributive p ADDITIO	ro rata share of income al	locable to \	West \	/irginia		'						.,	
2. Interest or di	vidend income on federa											.(00
3. Interest or di	vidend income on state a	ind local bo	onds e	earning income from	West Virgini	a 3						.(00
	money borrowed to pure											.0	00
	not included in federal od Investment Program Ta											.(00
6. Other Income	e deducted from federal a	adjusted gr	ross ir	ncome but subject to	state tax	6							00
7. Federal depr	reciation/amortization for	WV water/a	air pol	lution conrol facilities	S	7						.(00
8. Unrelated bu	siness taxable income of	a corporat	tion ex	kempt from federal ta	X	. 8						.(00
9. Add back ex	penses for certain REIT's	and RIC's	3			9						.(00
SUBTRA													
	ividends received on Uni sted gross income but ex												00
11. Refunds of state and local income taxes received and reported as income to the IRS												.0	00
	Other income included into federal adjusted gross income but excluded from state income tax											.0	00
13. Salary expense not allowed on federal return due to claiming the federal jobs credit													00
14. Cost of WV v	vater/air pollution control	facilities				14						.(00
				15. Allowance for obligations/	itions secure perty	d 15							00
 		5 W		(See CNF 120, S	chedule B-1)						_	

NAME	FEIN	
CREDITS ALLOCABLE TO PARTNER/MEMBER/SHA	AREHOLDER	
16. Economic Opportunity Tax Credit	16	.00
17. Environmental Agricultural Equipment Tax Credit	17	.00
18. WV Neighborhood Investment Program Credit	18	.00
19. Apprentice Training Tax Credit	19	.00
20. Film Industry Investment Tax Credit	20	.00
21. Alternative Fuel Tax Credit	21	.00
22. Innovative Mine Safety Tax Credit	22	.00
23. Historic Rehabilitated Buildings Tax Credit	23	.00
24. West Virginia Military IncentiveTax Credit	24	.00
25. Farm to Food Bank Tax Credit	25	.00
ADDITIONAL INFORMATION		



PROFORMA 1120

SCHEDULE WV/EOTC-1

SCHEDULE WV/ MITC-1

SCHEDULE RBIC

FORM WV/NIPA-2

FORM WV/AG-1

SCHEDULE L

SCHEDULE K

SCHEDULE J

SCHEDULE WV/ATTC-1

SCHEDULE WVFIIA-TCS

SCHEDULE WV/ MPTAC-1

SCHEDULE AFTC-1

SCHEDULE IMSTTC-1