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

	ENDING MM/DD/YYYY	EXTENDED DUE DATE MM/DD/YYYY
CORPORATION NAME		FEIN
MAILING ADDRESS		WV CORPORATION INCOME TAX ACCOUNT NUMBER
CITY	STATE ZIP	CHANGE OF ADDRESS
STATE OF DOMICILE NAICS	CONTACT NAME	CONTACT PHONE
CHECK ALL APPLICABLE B	OXES <sup>1) ENTITY</sup> TYPE	
2) RETURN TYPE ANNUAL	INITIAL FINAL	AMENDED RAR OTHER
52/53 WEEK FILER DAY OF WE	EK ENDING	FISCAL
3) IF FINAL/SHORT/ INITIAL RETURN CEASED OPERATIONS IN WV	CHANGE OF OWNERSHIP	CHANGE OF FILING STATUS
	DR	TECHNICAL TERMINATIONS OTHER
4) FILING METHOD SEPARATE ENTITY	CHECK HERE IF SEPARATE BUT PART	OF FEDERAL CONSOLIDATED. ENTER FEIN:
COMBINED (UB-CR)	SEPARATE COMBINED	
	GROUP COMBINED SURETY FEIN:	
	WORLDWIDE ELECTION	
5) IF SEPARATE, INDICATE ACTIVITY	WHOLLY WV ACTIVITY (SCHEDULE 1)	MULTISTATE ACTIVITY (SCHEDULE 2)
6) REPORTABLE ENTITIES (SCHEDULE C):		
	MEMBER, OR SHAREHOLDER DOING BUS	SINESS IN WV
ANY ENTITY YOU OWN 80% OF	VOTING STOCK	ANY DISREGARDED ENTITY
ANY ENTITY THAT OWNED MOR	E THAN 80% OF YOUR STOCK	ANY CONTROLLED FOREIGN CORPORATION
7) CURRENTLY UNDER AUDIT BY THE IRS?	YES YEARS UNDER AUDIT:	
8) TYPE OF FEDERAL RETURN INCLUDED WITH THIS RE	TURN 1120	PROFORMA 1120 990 990T



	NAME	FEIN						
•			Г	(				
9. /	Adjusted Corporate Net Income Tax from Schedule 1, Schedule 2, c	or UB-CR		9				.00
10.	Prior year carryforward credit	10					.00	
11.	Estimated and extension payments	11					.00	
	Withholding must match the withholding statements unless withhold is from NRSR	ding     12					.00	
	CHECK HERE IF WITHHOLDING IS FROM NRSR (NONRESIDENT SALE OF REAL ES	STATE)						
13.	Payments (add lines 10 through 12; must match total on schedule 0	C)		13				.00
14. (	Overpayment previously refunded or credited (amended return only	/)		14				.00
15.	TOTAL PAYMENTS (subtract line 14 from line 13)			15				.00
16.	If line 15 is larger than line 9 enter <b>overpayment</b>			16				.00
17. /	Amount of line 16 to be <b>credited</b> to next year's tax			17				.00
18. /	Amount of line 16 to be <b>refunded</b> (subtract line 17 from line 16)			18				.00
19.	If line 15 is <b>smaller</b> than line 9, enter <b>tax due</b> here			19				.00
20.	Interest for late payment (see instructions)			20				.00
	Additions to tax for late filing and/or late payment (see instructions).		-	21				.00
	Penalty for underpayment of estimated tax (line 6, Form CNF-120U; atta		-	22				.00
	TOTAL DUE with this return (add lines 19 through 22)			23				.00
				20				.00
	ect Deposit CHECKING SAVINGS							
	PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRE		ROUTING I				OUNT NUMBER	GE.
		TRUCTION						
	norize the State Tax Department to discuss my return with my preparer U YES U r penalty of perjury, I declare that I have examined this return, accompanying schedules,	NO and statemen	its, and to t	he best	of my knowledge ar	nd belief, it is true, corr	rect and complete.	
Signa	ature of Officer/Partner or Member Print name of Officer/Partner or Me	mber T <mark>i</mark>	le		Date Email		Business Telephor	ne Number
Signe	ature of paid preparer Printed Name Firm's name and address				Date Email		Preparer's Teleph	ano Numbor
÷								
WE	AIL TO: EST VIRGINIA STATE TAX DEPARTMENT							
	X ACCOUNT ADMINISTRATION DIVISION BOX 1202							
	ARLESTON WV 25324-1202							





#### REPORTABLE ENTITIES & SCHEDULE OF TAX PAYMENTS

DATE OF TYPE: PAYMENT WITHHOLDING, ESTIMATED, EXTEN-NAME OF SION, OTHER PMTS OR PRIOR YEAR DD YYYY BUSINESS FEIN MM AMOUNT OF PAYMENT CREDIT .00 TOTAL (AMOUNT MUST AGREE WITH AMOUNT ON CNF-120, LINE 13)...... .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.



2018

SCHEDULE NOL CNF-120 W

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

<u>2018</u>

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5	COLUMN 6	COLUMN 7	
Month and Year of Loss MM 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			Remaining unused net operating loss	
		.0	0.00	.00	.00	.00	
		.0	0.00	.00	.00	.00	
		.0	0.00	.00	.00	.00	
		.0	0.00	.00	.00	.00	
		.0	0.00	.00	.00	.00	
		.0	0.00	.00	.00	.00	
		.0	0.00	.00	.00	.00	
		.0			.00	.00	
		.0			.00	.00	
		.0			.00	.00	
		.0			.00	.00	
		.0			.00	.00	
		.0					
					.00	.00	
West Vir	ginia net operating loss carr	.0. yforward being used		.00	.00	.00	
	column 6 – Enter on Schedul			olumn 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

REGULAR ENTITY



SCHEDULE NOL CNF-120 W

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

<u>2018</u>

	DLUMN 1 COLUMN 2 COLUMN 3		COLUMN 4	COLUMN 5	COLUMN 6	COLUMN 7		
Month and Year of Loss MM YYYY	FEIN of the Consolidated Parent or FEIN of Each Entity Incurring WV NOL	or FEIN of Each Entity Amount of West Virginia		Amount carried forward to years prior to this year	Amount being used this year	Remaining unused net operating loss		
		.0	.00	.00	.00	.00		
		.0	.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		
		.0	00. 00	.00	.00	.00		
			00. 00		.00	.00		
	rginia net operating loss carr column 6 – Enter on Schedul	yforward being used	in current tax year		.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

FINANCIAL ORGANIZATION



SCHEDULE NOL CNF-120 W

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



COL	UMN 1	COLUMN 2	COLUMN 3		COLUMN 4	COLUMN 5		COLUMN 6		COLUMN 7	
Yea			Amount of West Virg Net Operating Los		Amount carried back to years prior to loss year	Amount carried forw to years prior to this y		Amount being used this year	Remaining unused net operating loss		
02	2008	54-1996968	1000	.00	.00	500	.00	500	.00	0	.0
02	2016	54-1996968	10000	.00	.00		.00	714	.00	9286	.0
				.00	.00		.00		.00		.0
02	2008	54-6456789	2000	.00	.00	1500	.00	248	.00	252	.00
02	2017	54-6456789	20000	.00	.00		.00	0	.00	20000	.00
				.00	.00		.00		.00		.00
02	2008	54-2029102	3000	.00	.00	2500	.00	500	.00	0	.00
02	2017	54-2029102	300	.00	.00		.00	300	.00	0	.00
				.00	.00		.00		.00		.00
02	2008	54-7897897	4000	.00	.00	3500	.00	500	.00	0	.00
02	2017	54-7897897	40000	.00	.00		.00	4000	.00	0	.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		42762	.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 11-111111

MOTOR CARRIER



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<b>REV 8-1</b>	8		

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#### SUMMARY OF CORPORATION NET INCOME 2018

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 (§11-13Q) 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
	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	e 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.





CORPORATION NAME

FEIN

Common year ending for the unitary business group:

List all members (See specific Instructions)  Total Payments & Prior Year									
					.00	.00			
					.00	.00			
					.00	.00			
					.00	.00			
					.00	.00			
					.00	.00			
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					.00	.00			
					.00	.00			

NOTE: After completing this schedule, see Schedule UB Instructions for Completing Form CNF-120





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#### Schedule of WV Partner/Shareholder/Member/Beneficiary Information 2018

				TAX	ABLE YEAR OF	ORGANIZ	ATIO	N						
	NNING D/YYY					ENDING MM/DD/YYY								
ORGANIZATION NAME (please type or print)							PART	NER/SHARE	HOLD	ER/MEN	1BEF	R/BENE	FICIAR	RY
STREET or POST OFFICE BOX						STREET or PC								
SINELI	0170310					SINCLET OF PC	51 011	ICE BOX						
CITY			STATE	ZIP		CITY				STATE	ZIP			
WEST V	IRGINIA IDE	ENTIFICATION NUMBER	FEDERAL	IDENTIF	FICATION NUMBER	FEIN				WV IDENT	IFICA	TION NUM	1BER	
CHEC ONE		6 Corporation			subject to withholdir ation's S Corporation					\$				
	ΓL	imited Liability Compan	2. Am	iount d	of West Virginia inco	ome tax with	held (	see instructior	ıs)	\$				
	F	Partnership				PERCENTA	GE O	F OWNERSH	IIP					%
	COME													
							1							.00
	tributive	pro rata share of income	allocable to	West	Virginia		·   '				_		-	
2. Inte	erest or c	lividend income on fede							_			_		.00
3. Inte	erest or d	lividend income on state	and local b	onds	earning income from	West Virginia	3 3							.00
4. Inte	erest on	money borrowed to pu	irchase bor	nds ea	arning income exem	pt from Wes	t A							.00
5. An	/ amoun	t not included in feder	al income tl	hat wa	as an eligible contrit	oution for the	. 5						-	.00
Ne	ghborho	od Investment Program	Tax Credit										-	
6. Oth	ner Incom	ne deducted from federa	l adjusted g	ross ir	ncome but subject to	state tax							_	.00
7. Fe	deral dep	reciation/amortization fo	r WV water/	air po	llution conrol facilities	s	. 7						_	.00
8. Un	related b	usiness taxable income	of a corpora	tion e	xempt from federal ta	IX	8						_	.00
		openses for certain REI	's and RIC	s			. 9							.00
		CTIONS												
		dividends received on L sted gross income but e											_	.00
11. Re	funds of	state and local income t	axes receive	ed and	l reported as income	to the IRS	11							.00
		ne included into federa		0										.00
13. Sal	ary expe	nse not allowed on fede	ral return du	ie to c	laiming the federal jo	bs credit	. 13							.00
14. Co	st of WV	water/air pollution contro	ol facilities				14							.00
					15.Allowance for g obligations/obliga by residential pro	itions secured	1 15							.00
	В 3		1 5 W		(See CNF 120, S		)	1						

NAME	IN
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CREDITS ALLOCABLE TO PARTNER/MEMBER/SHAREHOLD	ER	
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		



## ATTCHEMENT 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