

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.

BUSINESS NAME SHOWN ON FORM SPF-100	FEIN
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A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
<b>1</b> Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP	Name FEIN Income Subject to WV WITHHOLDING <b>.00</b>	WV WITHHOLDING <b>.00</b> Check the appropriate box <input type="checkbox"/> 1099 <input type="checkbox"/> K-1 <input type="checkbox"/> NRW-2 Date tax year ending (MMYY) <b>Enter WV withholding Only</b>

A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
<b>2</b> Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP	Name FEIN Income Subject to WV WITHHOLDING <b>.00</b>	WV WITHHOLDING <b>.00</b> Check the appropriate box <input type="checkbox"/> 1099 <input type="checkbox"/> K-1 <input type="checkbox"/> NRW-2 Date tax year ending (MMYY) <b>Enter WV withholding Only</b>

A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
<b>3</b> Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP	Name FEIN Income Subject to WV WITHHOLDING <b>.00</b>	WV WITHHOLDING <b>.00</b> Check the appropriate box <input type="checkbox"/> 1099 <input type="checkbox"/> K-1 <input type="checkbox"/> NRW-2 Date tax year ending (MMYY) <b>Enter WV withholding Only</b>

A – Payer Information	B – Taxpayer Information	C – WV Tax Withheld
<b>4</b> Payer ID from 1099, K-1, and/or NRW-2 Payer Name Address City, State, ZIP	Name FEIN Income Subject to WV WITHHOLDING <b>.00</b>	WV WITHHOLDING <b>.00</b> Check the appropriate box <input type="checkbox"/> 1099 <input type="checkbox"/> K-1 <input type="checkbox"/> NRW-2 Date tax year ending (MMYY) <b>Enter WV withholding Only</b>

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 11, Form SPF-100.

