

TAX PERIOD BEGINNING  
MM/DD/YYYY

ENDING  
MM/DD/YYYY

EXTENDED  
DUE DATE  
MM/DD/YYYY

CORPORATION NAME

FEIN

WV CORPORATION INCOME TAX ACCOUNT NUMBER

MAILING ADDRESS

CITY STATE ZIP

CHANGE OF ADDRESS

STATE OF DOMICILE NAICS CONTACT 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 OF WEEK ENDING \_\_\_\_\_

FISCAL

3) IF FINAL/SHORT/INITIAL RETURN

CEASED OPERATIONS IN WV

CHANGE OF OWNERSHIP

CHANGE OF FILING STATUS

MERGER

SUCCESSOR FEIN OF PREDECESSOR

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 (ALL ENTITIES MUST BE INCLUDED ON SCHEDULE D)

A. ANY PTE YOU ARE A PARTNER, MEMBER, OR SHAREHOLDER DOING BUSINESS IN WV

B. ANY ENTITY YOU OWN 80% OF VOTING STOCK

D. ANY DISREGARDED ENTITY

C. ANY ENTITY THAT OWNED MORE THAN 80% OF YOUR STOCK

E. ANY CONTROLLED FOREIGN CORPORATION

7) CURRENTLY UNDER AUDIT BY THE IRS?

NO

YES

YEARS UNDER AUDIT:

8) TYPE OF FEDERAL RETURN INCLUDED WITH THIS RETURN

1120

PROFORMA 1120

990

990T



B 3 0 2 0 2 2 0 1 W

