EXEMPTIONS SCHEDULE

	Regular	65 & over	Blind
You	☐	☐	☐
Spouse	☐	☐	☐

Box A. Number of boxes checked: Box A

Dependents

First name	Last name	Social security number	Relationship	Date of birth

Box B. Number of dependents you claimed on your federal return (list to the left): Box B

Box C. Total number of Exemptions (add the numbers in Box A and Box B): Box C

The following information needs to be printed in an attached statement where applicable.

ADDRESSES WHERE TAXPAYER RESIDED IN 2006	FROM		TO	
	MONTH	DAY	MONTH	DAY

LINE 1 DETAIL
SCHEDULE OF WAGES, SALARIES, TIPS, ETC.

(Print a separate section for the tapayer and spouse)
(For each employer provide the information requested the following is only an example)
(For a nonresident taxpayer using the wage allocation schedule, provide the address of work location outside the City or an expaanation)

TAXPAYER'S EMPLOYERS			Tax withheld	Total wages (W-2, box 1)	Excludible wages	Taxable wages
EMPLOYER 1	Employers Federal ID #					
Employer's name						
Address of actual work station						
Dates of employment	From	To				
Reason excludible wages not taxable						
EMPLOYER 2	Employers Federal ID #					
Employer's name						
Address of actual work station						
Dates of employment	From	To				
Reason excludible wages not taxable						
EMPLOYER 3	Employers Federal ID #					
Employer's name						
Address of actual work station						
Dates of employment	From	To				
Reason excludible wages not taxable						

SPOUSE'S EMPLOYERS

EMPLOYER 4	Employers Federal ID #					
Employer's name						
Address of actual work station						
Dates of employment	From	To				
Reason excludible wages not taxable						
EMPLOYER 5	Employers Federal ID #					
Employer's name						
Address of actual work station						
Dates of employment	From	To				
Reason excludible wages not taxable						
EMPLOYER 6	Employers Federal ID #					
Employer's name						
Address of actual work station						
Dates of employment	From	To				
Reason excludible wages not taxable						
		Totals				

NONRESIDENT AND PART-YEAR RESIDENT WAGE ALLOCATION

(Part-year residents use wage allocation to determine wages earned in City while a nonresident)

Wages earned partially outside of (City name)	Employer #
Actual number of days or hours on job (do not include week-ends you did not work)	
Vacation, holiday and sick days or hours	
Actual number of days or hours worked	
Actual number of days or hours worked in City	
Percentage of days or hours worked in City	%
Total allocable wages from employer	
Wages earned in City	
Excludible wages from employer	

LINE 2 DETAIL
INTEREST INCOME EXCLUSIONS AND ADJUSTMENTS

For use by residents to report excludible interest income

Interest income is not taxable to a nonresident

Interest income from federal return		
Excludible interest income		
Interest from federal obligations		
Interest from Subchapter S corporations (Attach Schedule K-1)		
Other excludible interest income (attach detailed explanation)		
Total excludible interest income		
Taxable interest income		

LINE 3 DETAIL
EXCLUDIBLE DIVIDEND INCOME

For use by residents to report excludible dividend income

Dividend income is not taxable to a nonresident

Dividend income from federal return		
Excludible dividend income		
Dividend from federal obligations		
Dividends from Subchapter S corporations (Attach Schedule K-1)		
Other excludible dividend income (attach detailed explanation)		
Total excludible dividend income		
Taxable dividend income		

LINE 6 DETAIL
EXCLUSIONS AND ADJUSTMENTS TO BUSINESS INCOME
For use by nonresidents to compute excludible business income

BUSINESS INCOME	Business 1	Business 2	Business 3	Business 4
Net profit (or loss) from business or profession				
Allocation percentage				
Allocated net profit (loss)				
Excludible net profit (loss)				
Total excludible net profit (loss)				

BUSINESS #

BUSINESS ALLOCATION FORMULA	COLUMN 1 EVERYWHERE	COLUMN 2 IN CITY	COLUMN 3 PERCENTAGE (Column 2 divided by column 1)
Average net book value of real and tangible personal property.			
Gross rents paid on real property multiplied by 8.			
Total property.			%
Total wages, salaries and other compensation of all employees.			%
Gross receipts from sales made or services rendered.			%
Total percentages. Add the percentages computed in column 3			%
Business Allocation Percentage.			%

Note: In determining the average percentage, if a factor does not exist, you must divide the total of the percentages by the number of factors used.

Note: If you are authorized to use a special formula, attach a copy of the administrator's approval letter and attach a schedule detailing calculation.

Note: Net operating loss from prior year reported on Line 16. Other income.

LINE 7 DETAIL
EXCLUSIONS AND ADJUSTMENTS TO CAPITAL GAINS AND LOSSES

(Print entire schedule for resident or nonresident)

RESIDENT RETURN

Total capital gains and losses from federal return	
Excludible capital gains and losses	
Gains and losses on securities issued by U.S. Government.	
Portion of gains and losses occuring prior to effective date of tax for city (Attach a schedule that identifies and shows the calculation for each)	
Gains and losses from Sub. S Corporations (Attach schedule)	
Adjustment for unallowed capital loss carryover from period prior to residency	
Total excludible capital gains and losses	
Taxable capital gains and losses	

Attach copy of federal Schedule D and all supporting schedules to return to explain.

EXCLUSIONS AND ADJUSTMENTS TO CAPITAL GAINS AND LOSSES

NONRESIDENT RETURN

Total capital gains and losses from federal return	
Excludible capital gains and losses	
Gains and losses on property located outside of City	
Portion of gains and losses occuring prior to effective date of tax for city (Attach a schedule that identifies and shows the calculation for each)	
Adjustment for capital loss carryover from City	
Total excludible capital gains and losses	
Taxable capital gains and losses	

Remember, deferred gains from property located in City or property sold while a resident are taxable.
Attach copy of federal Schedule D and all supporting schedules to return to explain.

LINE 8 DETAIL
EXCLUSIONS AND ADJUSTMENTS TO OTHER GAINS AND LOSSES

(Print entire schedule for resident or nonresident)

RESIDENT RETURN

Total other gains and losses from federal return	

Excludible other gains and losses		
Portion of gains and losses occuring prior to effective date of tax for city (Attach a schedule that identifies and shows the calculation for each)		
Gains and losses from Sub. S Corporations		

Total excludible other gains and losses	

Taxable other gains and losses	

Attach a copy of federal Form 4797 and all supporting schedules to return to explain.

EXCLUSIONS AND ADJUSTMENTS TO OTHER GAINS AND LOSSES

NONRESIDENT RETURN

Total other gains and losses from federal return	

Excludible other gains and losses		
Gains and losses on property located outside of City		
Portion of gains and losses occuring prior to effective date of tax for city (Attach a schedule that identifies and shows the calculation for each)		
Gains and losses from Sub. S Corporations		
Total excludible other gains and losses		

Taxable other gains and losses	

Remember, deferred gains from property located in City or property sold while a resident are taxable.
Attach a copy of federal Form 4797 and all supporting schedules to return to explain.

LINE 9 DETAIL
EXCLUSIONS AND ADJUSTMENTS TO
INDIVIDUAL RETIREMENT ACCOUNT (IRA) DISTRIBUTIONS

(Print entire schedule for resident or nonresident)

RESIDENTS

Excludible IRA distributions	
Normal IRA distributions (1099-R, Box 7, Code 7)	
Early IRA distributions, exception applies (1099-R, Box 7, Code 2)	
Rollover of traditional IRA to Roth IRA	
Other exclusions (1099-R, Box &, Code __)	
Total excludible IRA distributions	

Attach a copy of each Form 1099-R to your return

NONRESIDENTS

Excludible IRA distributions	
Normal IRA distributions (1099-R, Box 7, Code 7)	
Early IRA distributions, exception applies (1099-R, Box 7, Code 2)	
IRA distributions unrelated to City income	
Rollover of traditional IRA to Roth IRA	
Other exclusions (1099-R, Box &, Code __)	
Total excludible IRA distributions	

Attach a copy of each Form 1099-R to your return

LINE 10 DETAIL
EXCLUSIONS AND ADJUSTMENTS TO PENSION PLAN DISTRIBUTIONS

RESIDENTS

Excludible pension plan distributions	
Normal pension plan distributions (1099-R, Box 7, Code 7)	
Early pension plan distributions, exception applies (1099-R, Box 7, Code 2)	
Other exclusions (Explain)	
Total excludible pension plan distributions	

Attach a copy of each Form 1099-R to your return

NONRESIDENTS

Excludible pension plan distributions	
Normal pension plan distributions (1099-R, Box 7, Code 7)	
Early pension plan distributions, exception applies (1099-R, Box 7, Code 2)	
Pension plan distributions unrelated to City income	
Other exclusions (Explain)	
Total excludible pension plan distributions	

Attach a copy of each Form 1099-R to your return

LINE 11 DETAIL
EXCLUSIONS AND ADJUSTMENTS TO INCOME FROM RENTAL REAL ESTATE, ROYALTIES, PARTNERSHIPS, TRUSTS, ETC.

RESIDENTS

Adjustments to income from rental real estate, royalties, partnerships, trusts, etc.		
Subchapter S corporation income (loss)		
Total adjustments to income from rental real estate, royalties, partnerships, trusts, etc.		

Attach a schedule detailing name and ID # of each Sub. S Corp. and amount of adjustment.

Attach a copy of each Schedule K-1 (1120-S) pages 1 and 2 to your return.

Attach copy of federal Schedule E.

NONRESIDENTS

Adjustments to income from rental real estate, royalties, partnerships, trusts, etc.		
Rental income (loss) from real estate located outside City		
Partnership income (loss) from partnership business activity outside of City		
Subchapter S corporation income (loss)		
Trust income (loss)		
Total adjustments to income from rental real estate, royalties, partnerships, trusts, etc.		

Attach a schedule detailing the complete address of each piece of rental real estate.

Attach a schedule detailing name and ID # of each partnership and amount of adjustment.

Attach a schedule detailing name and ID # of each Sub. S Corp. and amount of adjustment.

Attach copy of federal Schedule E.

LINE 12 DETAIL
ADJUSTMENT FOR SUBCHAPTER S CORPORATION DISTRIBUTIONS

RESIDENTS

CORPORATION NAME	FEDERAL I.D. #	DISTRIBUTION RECEIVED
TOTAL SUBCHAPTER S CORPORATION DISTRIBUTIONS		

Complete above schedule or attach a separate schedule detailing the name federal I.D. number and amount of distribution from each Subchapter S corporation listed on federal Schedule E, page 2.

Attach a copy of each Schedule K-1 (1120-S) pages 1 and 2 to your return.

LINE 13 DETAIL
EXCLUDIBLE FARM INCOME

For use by nonresidents to compute excludible Farm income

Farm 1
Farm 2

FARM INCOME	FARM 1	FARM 2
Net profit (or loss) from Farm		
Apportionment percentage		
Apportioned net profit (or loss)		
Excludible net profit (or loss)		

Farm #

FARM ALLOCATION FORMULA	COLUMN 1 EVERYWHERE	COLUMN 2 IN (City name)	COLUMN 3 PERCENTAGE (Column 2 divided by column 1)
Average net book value of real and tangible personal property.			
Gross rents paid on real property multiplied by 8.			
Total property.			%
Total wages, salaries and other compensation of all employees.			%
Gross receipts from sales made or services rendered.			%
Total percentages. Add the percentages computed in column 3			%
Farm Allocation Percentage.			%

Note: In determining the average percentage, if a factor does not exist, you must divide the total of the percentages by the number of factors used.

Note: If you are authorized to use a special formula, attach a copy of the administrator's approval letter and attach a schedule detailing calculation.

Note: Net operating loss from prior year reported on Line 16. Other income.

LINE 16 DETAIL
ADJUSTMENTS AND EXCLUSIONS TO OTHER INCOME

RECEIVED FROM	FEDERAL I.D. #	NATURE OF INCOME	AMOUNT OF EXCLUSION OR ADJUSTMENT
TOTAL ADJUSTMENTS AND EXCLUSIONS TO OTHER INCOME			

LINE 18 DETAIL
COMPUTATION OF CITY IRA DEDUCTION

	TAXPAYER		SPOUSE		TOTAL
	CITY	OTHER	CITY	OTHER	EARNED INCOME
EARNED INCOME					
FEDERAL IRA DEDUCTION					
CITY EARNED INC %					Divide individual's city earned income by individual's total earned income.
CITY IRA DEDUCTION BASED ON INDIVIDUALS EARNED INCOME					Individual's federal IRA deduction multiplied by city earned income percentage.
AMOUNT INDIVIDUALS FEDERAL IRA DEDUCTION EXCEEDS INDIVIDUALS EARNED INCOME					Individual's total earned income less individual's federal IRA deduction.
AMOUNT SPOUSE'S EARNED INCOME EXCEEDS SPOUSE'S FEDERAL IRA DEDUCTION					Spouse's total earned income less spouse's federal IRA deduction.
CITY IRA DEDUCTION BASED UPON SPOUSE'S EARNED INCOME					If individual's federal IRA deduction exceeds individual's earned income and spouses earned income exceeds spouse's federal IRA deduction, enter the lesser of the individual's excess IRA or spouse's excess earned income multiplied by spouse's city earned income percentage, else enter zero (0).
CITY IRA DEDUCTION					Add individual's city IRA deduction based upon their own city earned income and their city IRA deduction based upon spouse's earned income.
TOTAL CITY IRA DEDUCTION					Add taxpayer's and spouse's city IRA deduction.

Enter earned income and federal IRA deduction data. The other data in the schedule is to be calculated.

LINE 22 DETAIL
ALIMONY DEDUCTION CALCULATION

Residents claim the enitre amount of alimony adjustment from federal return

Nonresidents use following calculation to compute alimony deduction allowed.

Part-year-residents may claim the entire amount of alimony paid while a resident only. The percentage of alimony paid while a nonresident is based upon the taxable income as a nonresident prior to the alimony adjustment divided by the portion of the federal Adjusted Gross Income (AGI) prior to the alimony adjustment.

Federal Adjusted Gross Income	
Alimony adjustment from federal return	
Income for alimony computation	

Taxable income for City prior to alimony adjustment	

Percentage (City taxable income divided by income for alimony computation)	

City alimony deduction (Percentage times alimony adjustment from federal return	

Adjustment to federal alimony adjustment (Federal alimony adjustment less City alimony deduction)	

LINE 31 DETAIL
CREDIT FOR TAX PAID TO ANOTHER CITY OR TAX PAID BY A PARTNERSHIP

(Print entire schedule)

CREDIT FOR TAX PAID TO ANOTHER CITY	
OTHER CITY'S NAME	TAX CREDIT
TOTAL CREDIT FOR TAXES PAID TO ANOTHER CITY (May be claimed by residents only)	

CREDIT FOR TAX PAID BY PARTNERSHIP	
PARTNERSHIP'S NAME AND TAX ID NUMBER	TAX CREDIT
TOTAL CREDIT FOR TAX PAID BY PARTNERSHIP	

TOTAL TAX CREDIT FOR TAX PAID TO ANOTHER CITY AND/OR TAX PAID BY A PARTNERSHIP	

CALCULATION FOR CREDIT FOR TAX PAID TO ANOTHER CITY (Residents only)	RESIDENT CITY	OTHER CITY
INCOME TAXABLE IN BOTH CITIES		
EXEMPTIONS PER CITY'S RETURN		
TAXABLE INCOME FOR CREDIT		
TAX FOR CREDIT PURPOSES AT EACH CITY'S NONRESIDENT TAX RATE		
CREDIT ALLOWED (Smaller of resident city's or other city's tax for credit purposes)		

CITY NAME

PART-YEAR RESIDENT TAX CALCULATION

SCHEDULE TC

THIS SCHEDULE IS TO BE ATTACHED TO CF-1040

Taxpayer's SSN Spouse's social security #

Taxpayer's first name, initial and last name
If joint, spouse's first name, initial and last name

PART-YEAR RESIDENT From to

FORMER ADDRESS

EXEMPTIONS Total number of exemptions.

INCOME		From federal return	Exclusions/Adjustments	Resident ioncome	Nonresident income
1. Wages, salaries, tips, etc.	1				
2. Taxable interest.	2				NOT TAXABLE
3. Ordinary dividends.	3				NOT TAXABLE
4. Taxable refunds, credits or offsets.	4			NOT TAXABLE	NOT TAXABLE
5. Alimony received.	5				
6. Business income. (Attach copy of federal Schedule C.)	6				
7. Capital gains or losses. (Attach copy of federal Schedule D.) ☐ Federal Schedule D not required.	7				
8. Other gains or losses. (Attach copy of federal Form 4797.)	8				
9. Taxable IRA distributions.	9				
10. Taxable premature pension distributions. (Attach copy of Form 1099-R.)	10				
11. Rental real estate, royalties, partnerships, trusts, etc. (Attach copy of federal Schedule E.)	11				
12. Subchapter S corporation distributions. (Attach copy of federal Schedule K-1.)	12	NOT APPLICABLE			NOT TAXABLE
13. Farm income or (loss). (Attach copy of federal Schedule F.)	13				
14. Unemployment compensation.	14			NOT TAXABLE	NOT TAXABLE
15. Social security benefits.	15			NOT TAXABLE	NOT TAXABLE
16. Other income. Attach statement listing type and amount.	16				
17. Total income. Add lines 1 through 16.	17				

DEDUCTIONS See instructions. Deductions must be allocated on the same basis as related income.

18. Individual Retirement Account deduction. (ATTACH PG. 1 OF FED RET & EVIDENCE OF PMT)	18				
19. Self Employed SEP, SIMPLE and qualified plans. (ATTACH COPY OF PG 1 OF FED RET)	19				
20. Employee business expenses. (SEE INSTRUCTIONS AND ATTACH FEDERAL 2106 OR LIST)	20				
21. Moving expenses. (Into City area only) (ATTACH FEDERAL 3903 OR LIST)	21				
22. Alimony paid. DO NOT INCLUDE CHILD SUPPORT (ATTACH COPY PAGE 1 OF FED RET)	22				
23. Renaissance Zone deduction. (ATTACH SCHEDULE RZ OF 1040)	23				
24. Total deductions. Add lines 18 through 23	24				
25. Total income after deductions. Subtract line 24 from line 17	25				
26a. Amount for exemptions. (Number of exemptions, _____ times exemption amount)	26a				
26b. Excess exemption amount. If the amount on line 26a exceeds the amount the taxable income as a resident enter unsude portion	26b				
27a. Total income subject to tax as a resident. Subtract line 26a from line 25	27a				
27b. Total income subject to tax as a nonresident. Subtract line 26b from line 25	27b				
28a. Tax at resident rate. **(MULTIPLY LINE 27a BY RESIDENT TAX RATE)**	28a				
28b. Tax at nonresident rate. **(MULTIPLY LINE 27b BY NONRESIDENT TAX RATE)**	28b				
29. Total tax. Add lines 28a and 28b **(ENTER HERE AND ALSO ON CF-1040, LINE 28)**	29				

PART-YEAR RESIDENT SCHEDULE OF WAGES, SALARIES, TIPS, ETC.

			Tax withheld	Total wages (W-2, box 1)	Excludible wages	Taxable wages resident	Taxable wages nonresident
EMPLOYER 1	Employers Federal ID #						
Employer's name							
Address of actual work station							
Dates of employment	From	To					
Reason excludible wages not taxable							
EMPLOYER 2	Employers Federal ID #						
Employer's name							
Address of actual work station							
Dates of employment	From	To					
Reason excludible wages not taxable							
EMPLOYER 3	Employers Federal ID #						
Employer's name							
Address of actual work station							
Dates of employment	From	To					
Reason excludible wages not taxable							
EMPLOYER 4	Employers Federal ID #						
Employer's name							
Address of actual work station							
Dates of employment	From	To					
Reason excludible wages not taxable							
EMPLOYER 5	Employers Federal ID #						
Employer's name							
Address of actual work station							
Dates of employment	From	To					
Reason excludible wages not taxable							
EMPLOYER 6	Employers Federal ID #						
Employer's name							
Address of actual work station							
Dates of employment	From	To					
Reason excludible wages not taxable							
		Totals					

NONRESIDENT WAGE ALLOCATION

Wages earned partially outside of city while a nonresident	Employer #	Employer #	Employer #	Employer #	Employer #
Actual number of days or hours on job while a nonresident (do not include week-ends you did not work)					
Vacation, holiday and sick days or hours while a nonresndent					
Actual number of days or hours worked while a nonresident					
Actual number of days or hours worked in city while a nonresident					
Percentage of days or hours worked in city while a nonresident	%	%	%	%	%
Total allocable wages from employer while a nonresident					
Wages earned in city while a nonresident					
Excludible wages from employer while a nonresident					