Instructions for this Schedule are found on the back of the enclosed "Taxpayer's Copy" of the FORM 531 TAX RETURN

Tax Year: 2009		LOCATION/RATE 1	LOCATION/RATE 2	LOCATION/RATE 3
Name:	TAX OFFICE ⇔⇔⇔⇔⇔			
SSN:	MUNICIPALITY			
	STREET ADDRESS			
Enter "12" for calulation using full months,	CITY, STATE, ZIP			
or "365" for calculation to exact day. You	TAX RATE %			
must use the 365 day method if you have	DATE RESIDENT FROM	01/01/09		
different tax rates within the tax	DATE RESIDENT THRU			
year. ¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬	MONTHS OR DAYS			

For each W-2, 1099, employee business expense (EBE) schedule, or self-employment schedule, divide the total on each form by the number of months (or days) you worked for that employer, multiply the result by the number of months (or days) you lived in each location while working for that employer.

		LOCAL	LOCAL TAX	EBE FOR THIS	DATE EMPLOYED BE FOR THIS DURING THIS TAX YEAR		TOTAL MONTHS	PRORATED	EMPLOYEE PRORATED BUSINESS				EMPLOYEE BUSINESS	PRORATED	PRORATED	EMPLOYEE BUSINESS
	EMPLOYER'S NAME	WAGES	W/H	EMP	FROM	THRU	OR DAYS	WAGES	TAX W/H'S	EXPENSES	WAGES	TAX W/H'S	EXPENSES	WAGES	TAX W/H'S	EXPENSES
1																
2																
3																
4																
5																
6																
TOTALS	W-2 TOTALS & EMPLOY						Enter on	531 LINE 1	531 LINE 13/14	531 LINE 2	531 LINE 1	531 LINE 13/14	531 LINE 2	531 LINE 1	531 LINE 13/14	531 LINE 2
TOTALS	Lines 1, 13 [Line 14 if SMSD 531] & 2 of 531 for the location(s) in CTCB's jurisdiction).															
				TOTAL		ED DURING X YEAR	TOTAL MONTHS	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED OTHER	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED OTHER	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED OTHER
	OTHER INCOME (ENTER S	OTHER INCOME (ENTER SOURCE)			FROM	THRU	OR DAYS	LOCALE	% THIS	INCOME	LOCALE	% THIS	INCOME	LOCALE	% THIS LOCALE	INCOME
7																
8																
TOTALS	OTHER INCOME TOTAL	,		on Line 4 of 53	1 the portion	n(s) received	l while_		531 L	INE 4		531 L	INE 4		531 L	INE 4
living in the location(s) in CTCB's jurisdiction).				DATE OPERATED DURING 1												
	NET BUSINESS PROFIT	(S)		NET PROFIT	THIS TA		TOTAL MONTHS	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED
	BUSINESS NAME (TYPE	. ,		AMOUNT	FROM	THRU	OR DAYS	LOCALE		NET PROFIT	LOCALE	LOCALE	NET PROFIT	LOCALE	LOCALE	NET PROFIT
9																
10																
11																
TOTALS	NET PROFIT TOTALS (add lines 9, 10 and 11. Enter on Line 6 of 531 the portion(s) received while						531 L	INE 6		531 L	INE 6		531 L	INE 6		
1017120	living in the location(s) in CTCB's jurisdiction).															
	NET BUSINESS LOSS(E	S) BUSII	NESS	NET LOSS	THIS TA		TOTAL MONTHS	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED	MONTHS OR DAYS THIS	PRORATION % THIS	PRORATED
	NAME (TYPE SCHEDULE	E)		AMOUNT	FROM	THRU	OR DAYS	LOCALE	LOCALE	NET LOSS	LOCALE	LOCALE	NET LOSS	LOCALE	LOCALE	NET LOSS
12																
13																
14																
	NET LOSS TOTALS (Add					Line 7 of 53	1 the		531 L	INE 7		531 L	INE 7		531 L	INE 7
. 0 .,0	portion(s) received while I	iving in the loc	ation(s) in C	CB's jurisdiction	<u>on</u>).											