

# 2015 City of Detroit Business Income Apportionment Continuation Schedule

Issued under authority of Public Act 284 of 1964, as amended.

**INSTRUCTIONS: Complete this form if you have income from more than one business to apportion. This is a continuation of the City of Detroit Nonresident Income Tax Return (Form 5119), Part 5. Attach as many continuation schedules as needed.**

Type or print in blue or black ink. Print numbers like this: 0123456789 - NOT like this: Ø 1 4 7

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
			— —
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)
			— —
4. Name of Business Entity			5. Federal Employer Identification No. (FEIN)
			6. City return for the city of:
			<b>DETROIT</b>
			City Code
			<b>170</b>

	A. Located Everywhere		B. Located in Detroit		C. Percentage (B divided by A)	
7. Average net book value of real and tangible personal property .....		00		00	XXXXX	
8. Gross annual rent paid for real property multiplied by 8.....		00		00	XXXXX	
9. CITY SHARE OF PROPERTY: Add lines 7 and 8. Divide column B by column A and enter as a percentage in column C.....		00		00		%
10. Total wages, salaries, commissions and other compensation of all employees.....		00		00		%
11. Gross receipts from sales made or services rendered.....		00		00		%
12. TOTAL: Add lines 9, 10 and 11, column C. ....						%
13. Average.* Divide line 12 by 3. If any of lines 9, 10, or 11 are zero or not used, divide line 12 by the number of factors actually used. If all business was conducted in the city listed on line 6, enter 100%. ....						%

\* In the case of a taxpayer authorized by the Finance Director to use a special formula, attach a copy of the approval letter.

14. Net profit or (loss) from U.S. Schedule C or Schedule F.....	14.		00
15. Multiply line 13 by line 14 .....	15.		00
16. Applicable portion of net operating loss carryover.....	16.		00
17. Applicable part of Self-Employment Retirement deduction (attach U.S. 1040, page 1).....	17.		00
18. Add lines 16 and 17.....	18.		00
19. Subtract line 18 from line 15 and enter here. Total the amounts from Form(s) 5327, line 17, and Form 5119, line 47, and enter on Form 5119, line 10.....	19.		00

**You must also attach a completed Form 5119 when filing this form.**