2015

Line 6

DELAWARE SCHEDULE W

Page 1

APPORTIONMENT WORKSHEET

NAME	SOCIAL SECU	IRITY NUMBER		
allowance will be permitted the total number of Delawa performance of duties for the	axpayers derived from Delaware sourced employment includes income earn for those days worked outside of the State. The allowance will be equivalent the sourced employment working days. Any allowance claimed must be based the employer, as opposed to solely for the convenience of the employee. Visity of duties for your employer and is considered for the convenience of the eloyer.	t to the ratio of day d on necessity of w Working from an off	rs worked outside of the S work outside the State of I fice out of your home does	tate versus Delaware in a not satisfy
SEVERANCE PAY				
Severance Pay is payment lump sum or in payments o	for the cancellation (involuntary separation) of an employee's employment corver a period of time.	ntract by the employ	yer. Severance pay can b	e paid in a
total service time for the emwere not assigned to work	the year it is received and must be included in your gross income. It is based o ployer in previous calendar years was conducted in more than one state, your soutside the State of Delaware by your employer, Schedule W does not apply a sed to prorate your severance pay.	severance pay may	be prorated. If in previous	s years you
Example 1: If John White wincluded as Delaware Sour	orked for XYZ Company for 10 years - 5 years in Maryland and 5 years in Dece Income.	elaware - then only	50% of his severance pa	y would be
the portion of his wages th	as a non-resident of Delaware, had worked for a Delaware employer and filed his at were Delaware source income, John White may be eligible to prorate his sof Revenue at (302) 577-8170 to discuss the rules specific to your situation with the control of the contr	severance pay. If y	our situation is similar to	
1. Wages, Salaries, Tip	s, etc (to be apportioned)			1
Total Days in Year En (365 or actual number)	nployed by Employer er of days employed)			2
3. Non-Working Days				
Saturdays and	Sundays		3a	
Holidays			3b	
Sick Leave			3c	
Vacation			3d	
Other Non-Wor	king Days		3e	
Total Non-Work	ing Days (sum of lines 3a through 3e above)		3	
4. Total Days Worked in	n Year (subtract Line 3 from Line 2)			5
5. Total Days Worked C	Outside Delaware (from page 2 of this form)			
6. Total Days Worked i	n Delaware (subtract Line 5 from Line 4)			6
7. Delaware Sourced Ir	ncome:			

If you only have one (1) source of employment in Delaware, enter the Delaware Sourced Income (Line 7) onto Form 200-02, page 2, column 2, Line 1. If you have more than one (1) source of employment in Delaware, add the Delaware Sourced Income amounts from Lines 7 (one form per Delaware source), and enter the Total Delaware Sourced income on Form 200-02, Page 2, Column 2, Line 1.

Line 4

Line 1

7

2015

DELAWARE SCHEDULE W DAYS WORKED OUTSIDE DELAWARE

Page 2

NAME	SOCIAL SECURITY NUMBER			
The location of employment must be identified with City and State. If the location is outside the U.S., then identify the country. List the purpose of the out-of-state business for each day. (For example: client meeting, seminar, etc.)				
DATE	LOCATION	PURPOSE OF OUT-OF-STATE BUSINESS		
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				
M M D D Y Y				

Total Number of Days Worked Outside Delaware =

Page 2

(REV. 10/22/15)