2019

NAME

## **DELAWARE SCHEDULE W**

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## APPORTIONMENT WORKSHEET

SOCIAL SECURITY NUMBER

an allowance will be permit versus the total number of Delaware in performance o does not satisfy the require	expayers derived from Delawa ted for those days worked out Delaware sourced employment of duties for the employer, as of the employment with your employed	side of the State. nt working days. opposed to solely s for your employ	The allowance wi Any allowance cla for the convenie	Il be equivalent to the nimed must be base nce of the employed	ne ratio of days we d on necessity of e. Working from a	orked outside of the State work outside the State of n office out of your home
SEVERANCE PAY						
	for the cancellation (involunt yments over a period of time.		of an employee's	employment contrac	ct by the employe	er. Severance pay can be
If your total service time fo previous years you were no	the year it is received and mu r the employer in previous ca of assigned to work outside th erification must be submitted	llendar years was ne State of Delaw	s conducted in mo	ore than one state,	your severance p	ay may be prorated. If in
Example 1: If John White w be included as Delaware S	orked for XYZ Company for 10 ource Income.	0 years - 5 years	in Maryland and 5	years in Delaware -	- then only 50% of	his severance pay would
determine the portion of his	as a non-resident of Delaware wages that were Delaware s ct the Division of Revenue at	ource income, Jo	hn White may be	eligible to prorate hi	is severance pay.	If your situation is similar
1. Wages, Salaries, Tips, e	tc. (to be apportioned)					
2. Total Days in Year Emplo						
	days employed)					
3. Non-Working Days						
	101					
3a. Saturdays an	d Sundays					
3b. Holidays						
3c. Sick Leave						
3d. Vacation						
3e. Other Non-W	orking Days					
	rking Days (sum of lines 3a th ar (subtract Line 3f from Line					
5. Total Days Worked Outs	de Delaware (from page 2 of	this form)				
6. Total Days Worked in De	laware (subtract Line 5 from l	Line 4)				
7. Delaware Sourced Incon	ne:					
Line 6	÷Line 4	= (	%) X	Line 1	=	
Line 0	LIIIC 7			LIIIO I		

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.



## **DELAWARE SCHEDULE W**

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## DAYS WORKED OUTSIDE DELAWARE

tate business for each day. (For example: client meeting, seminar, etc.)						
DATE		LOCATION	PURPOSE OF OUT-OF-STATE BUSINESS			

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