



**SCHEDULE A - ALLOCABLE PARTNERSHIP ORDINARY BUSINESS INCOME**

1. ORDINARY INCOME (OR LOSS) from Page 1, Line 22, U.S. Partnership Return of Income, Form 1065 (ATTACH COPY OF PAGES 1-5 FEDERAL 1065)	
2. Add City of Walker income tax, if deducted in determining income on Federal Form 1065	
3. Add interest and other costs incurred in connection with the production of income exempt from Walker income tax	
4. Deduct Sec. 179 depreciation	
5. TOTAL adjusted ordinary business income (Add Lines 1, 2, and 3 and subtract line 4)	

**SCHEDULE B - NON-BUSINESS INCOME AND EXCLUSIONS**

ATTACH COPY OF FEDERAL SCHEDULE K (1065) ATTACH SCHEDULES TO EXPLAIN ALL EXCLUSIONS	Federal Form 1065 Reference	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
		NON-BUSINESS INCOME	EXCLUDABLE RESIDENT PARTNERS PORTION OF COLUMN 1	TAXABLE RESIDENT PARTNERS PORTION OF COLUMN 1	EXCLUDABLE NONRESIDENT PARTNERS PORTION OF COLUMN 1	TAXABLE NONRESIDENT PARTNERS PORTION OF COLUMN 1
<b>INTEREST AND DIVIDENDS</b>						
1. Interest income	Sch. K, Line 5					
2. Dividend income	Sch. K, Line 6a					
<b>SALE OR EXCHANGE OF PROPERTY (SEE INSTRUCTIONS)</b>						
3. Net short term capital gain (loss)	Sch. K, Line 8					
4. Net long term capital gain (loss)	Sch. K, Line 9a					
5. Net Section 1231 gain (loss)	Sch. K, Line 10					
<b>RENTS AND ROYALTIES (IF NON-BUSINESS INCOME INCLUDES RENTAL REAL ESTATE, ATTACH COPY OF FEDERAL FORM 8825)</b>						
6. Net income (loss) from rental real estate activities	Sch. K, Line 2					
7. Net income (loss) from other rental activities	Sch. K, Line 3c					
8. Royalty Income	Sch. K, Line 7					
<b>OTHER INCOME</b>						
9. Other Income	Sch. K, Line 11					
10. TOTALS (Add lines 1 through 9)				*		*

**SCHEDULE C - DISTRIBUTION TO PARTNERS**

	COLUMN 1 ADJUSTED BUSINESS INCOME (Schedule A, Line 5)	COLUMN 2 GUARANTEED PAYMENTS TO PARTNERS (Fed. 1065, line 10)	COLUMN 3 INCOME SUBJECT TO ALLOCATION (Add Column 1 and Column 2)	COLUMN 4 NONRESIDENT ALLOCATION PERCENTAGE PER SCH. D (Enter 100% for resident partners)	COLUMN 5 ALLOCATED BUSINESS INCOME (Column 3 times % in Column 4)	COLUMN 6a RESIDENT PARTNER'S NON-BUSINESS INCOME (Total equals Sch. B Column 3, Line 10)	COLUMN 6b NONRESIDENT PARTNER'S NON-BUSINESS INCOME (Total equals Sch. B Column 5, Line 10)	COLUMN 7 TOTAL INCOME (Add Columns 5, 6a and 6b) (Enter here and on page 1, column 1)
(a)				%				
(b)				%				
(c)				%				
(d)				%				
(e)				%				
Totals								

**SCHEDULE D - BUSINESS ALLOCATION FORMULA**

	COLUMN 1 LOCATED EVERYWHERE	COLUMN 2 LOCATED IN WALKER	COLUMN 3 PERCENTAGE (Column 2 divided by Column 1)
1. a. Average net book value of real and tangible personal property			
b. Gross annual rent paid for real property only, multiplied by 8			
c. TOTALS (Add Lines 1a and 1b)			%
2. Total wages, salaries, commissions and other compensation of all employees			%
3. Gross receipts from sales made or services rendered			%
4. Total Percentages - add the percentages computed in Column 3, Lines 1c, 2 and 3 (A percentage must be computed for each line)			%
5. Business Allocation Percentage (Divide Line 4 by the number of factors) Enter here and on Schedule C, Column 4 (See note below)			%
<b>NOTE 3.</b> In determining the business allocation percentage (Line 5), a factor shall be excluded from the computation only when such factor does not exist anywhere insofar as the taxpayer's business operation is concerned, in such cases, the sum of the remaining percentages shall be divided by the number of factors actually used.			
In the case of a taxpayer authorized by the Income Tax Administrator to use one of the special formulae, attach an explanation and use the lines provided below:			
a. Numerator		c. Percentage (a divided by b) Enter here and on Schedule C, Column 4	
b. Denominator		d. Date of Administrator's approval letter	

**SCHEDULE E - RENTAL REAL ESTATE**

If the business activity of this partnership includes rental of real estate, indicate below the complete address and the gain or loss of each property.

PROPERTY	STREET ADDRESS	GAIN OR LOSS	PROPERTY	STREET ADDRESS	GAIN OR LOSS
A			D		
B			E		
C			TOTALS	<b>(ATTACH COPY OF FEDERAL FORM 8825)</b>	