





This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

	Vaar	of 10 Year Election		
	Tax Identification Number (FEIN)	Tax Year Ending (MMYY)		official use only Vendor ID# 0000
	Name of Designated Agent			Fill in if Water's Edge Fill in if World Wide
	Business mailing address #1			Fill in if fiscalized
	City			State Zip Code + 4
_	Type of Entity: Corporation	Unincorporated Business	Financial Institution	Non-Nexus Member
_				
		Description		Combined Group Report
	Payroll Factor Computation	on		
1	District payroll: (total compensat	tion paid or accrued).	1	\$
2	Everywhere payroll: (total compensation paid or accrued).		2	\$
3	Total payroll - District (total con	npensation paid or accrued).	3	\$
4	Total payroll - everywhere (total	I compensation paid or accrued).	4	\$
5	District payroll factor. Line 3 divid	ded by Line 4.	5	
	Sales Factor Computation			
6	District sales.		6	\$
7	Everywhere sales.		7	\$
8	Total sales – District. <i>Line 6</i> .		8	\$
9	Total sales – everywhere. <i>Line 7</i> .		9	\$
0	District single sales factor. Line 8	divided by Line 9.	10	
1	Total percent. Add Lines 5 and 10.		11	
2	Divider for Financial institutions on	nly.*	12	
3	DISTRICT APPORTIONMENT F.	ACTOR.		
	Divide Line 11 by Line 12 for Finance	cial institutions only.	13	
If t	nancial institutions will use payroll and there are less than two factors divide by mbined group report and enter them on 20 or D-30.			