Use this schedule if business activities are carried on both inside and outside New Jersey or if business activities are carried on $100 \%$ outside New Jersey

This form must be enclosed and filed with your New Jersey Income Tax return.
Enter name, address and Social Security/federal employer identification number as shown on the Form NJ-1040NR, Form NJ-1041, or Form NJ-1065.

| Legal name of taxpayer | Social Security number/federal EIN |
| :--- | :---: |
| Trade name of business if different from legal name above | For the Taxable Year Ending <br> (Month, Day, Year) |
| Address (number and street or rural route) |  |
| City or Post Office | State Code |

## Section 1 - Business Locations

List all places BOTH INSIDE AND OUTSIDE New Jersey where business is carried on.

| (a) Street Address |  | (b) City and State | (c) Description of Business Location | (d) Check One |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | RENT |  | OWN |
| 1. |  |  |  |  | $\square$ | - |
| 2. |  |  |  | $\square$ | - |
| 3. |  |  |  | $\square$ |  |
| 4. |  |  |  | $\square$ | $\square$ |

## Section 2 - Average Values

| ASSETS (See instructions) |  | Average Values |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Column A <br> Everywhere |  | Column B <br> New Jersey |  |
| 1. | Real Property Owned | 1. |  | 1. |  |
| 2. | Real and Tangible Property Rented | 2. |  | 2. |  |
| 3. | Tangible Personal Property Owned | 3. |  | 3. |  |
| 4. | TOTALS (Add Lines 1-3 in each column) | 4. |  | 4. |  |

## Section 3 - Business Allocation Percentage



