



CITY OF OAKLAND

Finance Department - Business Tax Section
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APPORTIONMENT WORKSHEET

INDUSTRY CODES A, B, C, D I & Z ONLY (SALES & MANUFACTURING)

Business Tax Account #:		Industry Code:	
Business Name:			
Business Address:			
Business City, State, Zip:			
Phone #:		Email:	

If you have a fixed place of business in Oakland, but part of your business takes place outside of Oakland or the fixed place of business is in Oakland, but part of the business activity takes place outside of Oakland, please refer to Director of Finance Ruling #10. Add all applicable calculations to determine the percentage of taxable gross receipts below.

- | | |
|--|---------------------|
| 1. Total Gross Receipts | 1. \$ _____ |
| 2. Gross Receipts Attributable to Oakland | 2. \$ _____ |
| 3. Buyer in Oakland (multiply Line 2 x 0.15) | 3. \$ _____ |
| 4. Seller in Oakland (multiply Line 1 x 0.15) | 4. \$ _____ |
| 5. Product Delivery in Oakland (multiply Line 2 x 0.30) | 5. \$ _____ |
| 6. Shipped from Oakland (multiply Line 1 x 0.20) | 6. \$ _____ |
| 7. Billed in Oakland (multiply Line 1 x 0.05) | 7. \$ _____ |
| 8. Invoiced from Oakland (multiply Line 1 x 0.05) | 8. \$ _____ |
| 9. Funds Collected in Oakland (multiply Line 1 x 0.05) | 9. \$ _____ |
| 10. Accounts Posted in Oakland (multiply Line 1 x 0.05) | 10. \$ _____ |
| 11. TOTAL APPORTIONED GROSS RECEIPTS (add lines 3-10) | 11. \$ _____ |

I declare under penalty of perjury that to my knowledge all information contained in this declaration is true and correct.

Print Name	Signature	Date

Include this apportionment worksheet with renewal declaration.