Legal name of team	Special NYS identification number

Schedule A – Nonresident members qualifying and participating in a New York State group return *(complete as many Schedule A forms as needed)*

A Name *(in either alphabetical or Social Security number order)* and address of nonresident member	B Member's Social Security number *(enter here and in column B2 on page 2)*	C Total duty days *(see instr.)*	D New York State duty days *(see instr.)*	E New York State allocation percentage *(divide column D by column C)*	F Total compensation *(see instructions)*	G New York State taxable income *(multiply column F by column E)*
					.00	.00
					.00	.00
					.00	.00
					.00	.00
					.00	.00
					.00	.00
					.00	.00
					.00	.00
					.00	.00
					.00	.00

Totals *(If you are filing more than one Schedule A, enter the grand totals from all Schedules A on the last form; leave the other total boxes blank. Submit all Forms IT-203-TM-ATT-A with Form IT-203-TM.)*

Enter on the appropriate line on Form IT-203-TM → .00

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Legal name of team	Special NYS identification number

B2 Member's Social Security number *(same as column B on page 1)*	**H** New York State tax *(multiply column G by 0.1090)*	**I** New York State tax withheld *(see instructions)*	**J** New York State estimated income tax paid/amount paid with Form IT-370	**K** Total payments *(add columns I and J)*	**L** Balance due *(subtract column K from column H)*	**M** Overpayment *(subtract column H from column K)*	**N** Other group returns *(see instructions)*
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00	.00	.00	.00	
	.00	.00	.00				

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