Legal name of team Special New York State identification number

Schedule A - Nonresident Members Qualifying and Participating in New York State Group Return (attach as many Schedule A forms as needed).

IT-203-TM-ATT-A (1996)

A Name (in either alphabetical or social security number order) and Address of Nonresident Member	B Social Security Number	C Total Duty Days (see instructions)	New York State Duty Days (see instructions)	E New York State Allocation Percentage (divide column D by column C)	Total Compensation (see instructions)	G New York State Taxable Income (multiply column F by column E	H New York State Tax (multiply column G by .07125)	I New York State Tax Withheld (see instructions)	J New York State Estimated Tax Paid/Amount Paid with Form IT-370	K Total Payments (add columns I and J)	Balance Due (subtract column K from column H)	Overpayment (subtract column H from column K)	Nan Other
enter on appropriate line on Form IT-203-TM													