Legal name of team	Special New York State identification number
=oga: namo e: toam	

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

IT-203-TM-ATT-B (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 City Duty Days (see instructions)	Rew York City Allocation Percentage (divide column D by column C)	<b>F</b> Total Wages (see instructions)	G New York City Wages (multiply column F by column E)	New York City Tax (multiply column G by .0045)	I New York City Tax Withheld (see instructions)	J New York City Estimated 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)	Overpayment (subtract column from column K)
enter on appropriate line on Form IT-203-TM												