



**Group Return for Nonresident Shareholders
of New York S Corporations**

For calendar year 2000 or fiscal year beginning _____, and ending _____.

Print or type	Read the instructions before completing this return.			Special NYS identification number
	Legal name			Employer identification number
	Trade name of business if different from legal name above			Principal business activity
	Address (number and street or rural route)			Date business started
	City, village or post office	State	ZIP code	

This form must be completed by a New York S corporation that elects to file a group New York State return for nonresident shareholders. All requirements stated in the instructions must be met in order to file a group return.

You must complete Form IT-203-S-ATT before making any entries on lines 1 through 5 below. Attach Form IT-203-S-ATT to the back of this return.

1	New York State taxable income (from Form IT-203-S-ATT, column K total)	1		
2	New York State tax (from Form IT-203-S-ATT, column L total)	2		
3	New York State estimated tax paid/amount paid with Form IT-370 (from Form IT-203-S-ATT, column M total)	3		
4	Balance due (if line 2 is greater than line 3, subtract line 3 from line 2) Do not send cash; make check or money order payable to NY State Income Tax ; write your special NYS identification number, and 2000 IT-203-S on it	4		
5	Amount overpaid applied to 2001 estimated tax (if line 3 is greater than line 2, subtract line 2 from line 3)	5		

Paid preparer's use only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Group agent information	Name of group agent	
	Firm's name (or yours, if self-employed)	Preparer's SSN or PTIN			Telephone number	
	Address	Employer identification number			Signature of group agent	Date

Mail your completed return to: **NEW YORK STATE INCOME TAX, W A HARRIMAN CAMPUS, ALBANY NY 12227.**