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Legal name of S corp	oration
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Special New York State identification number _

Nonresident shareholders qualifying and participating in New York State group return (attach as many IT-203-S-ATT forms as needed).

Enter negative amounts in parentheses. List shareholders in alphabetical or social security number order. **C** Shareholder's pro rata **E** Shareholder's pro rata share of federal A Name and address of nonresident shareholder В Shareholder's Amount of column C social security share of federal allocated to number business income New York State investment income (see instructions) (see instructions) (see instructions)

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F Amount of column E allocated to New York State (see instructions)	G Total of column D and column F (D + F)	H Shareholder's pro rata share of federal S corporation deductions (see instructions)	I Amount of column H allocated to New York State (see instructions)	Net amount of New York additions and subtractions allocated to New York State (see instructions)	New York taxable income (subtract column I from column G and add or subtract column J)
	, ,	, ,			,
	more than one attach et; leave the other tota priate line on Form	al boxes blank).	tals from all attachme	ents on only one	

Legal name of S corporation	
Special New York State identification number	

L New York State tax (multiply column K by .0685)	New York State estimated tax paid/amount paid with Form IT-370	N Balance due (subtract column M from column L)	Overpayment (subtract column L from column M)	P Other group returns (see instructions)