## 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).

|   | Nonresident members qualifying and participating in New York State group return (attach as many Schedule A for A B C D E |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| A<br>Name (in either alphabetical or<br>social security number order)<br>and address of<br>nonresident member | <b>B</b><br>Member's<br>social security<br>number  | C<br>Total duty days<br>(see instructions) | D<br>New York State<br>duty days<br>(see instructions) | L<br>New York State<br>allocation percentage<br>(divide column D by<br>column C) | <b>F</b><br>Total compensation<br>(see instructions) |  |  |
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Totals (If you are filing more than one attachment, enter the grand totals from all attachments on the last attachment sheet; leave the other total boxes blank.) Enter on appropriate line on Form IT-203-TM

## Legal name of team \_\_\_\_\_

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| G<br>New York State<br>taxable income<br>(multiply column F by<br>column E) | H<br>New York State tax<br>(multiply column G<br>by .0685) | I<br>New York State<br>tax withheld<br>(see instructions) | J<br>New York State<br>estimated tax<br>paid/amount paid<br>with Form IT-370 | K<br>Total payments<br>(add columns I<br>and J) | L<br>Balance due<br>(subtract column K<br>from column H) | <b>M</b><br>Overpayment<br>(subtract column H<br>from column K) | N<br>Other group returns<br>(see instructions) |
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