Legal name of team _

Special New York State identification number ____

Schedule B - Nonresident members qualifying and participating in Yonkers group return (attach as many Schedule B forms as needed).

Schedule B - Nonresident members qua	В	С	D	E	F	
Name (in either alphabetical or social security number order) and address of nonresident member	Member's social security number	Total duty days (see instructions)	Yonkers duty days (see instructions)	Yonkers allocation percentage (divide column D by column C)	Total wages (see instructions)	

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 _____

Special New York State identification number

G Yonkers taxable wages (multiply column F by column E)	H Yonkers nonresident earnings tax (multiply column G by .0025)	I Yonkers tax withheld (see instructions)	J Yonkers 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)	M Overpayment (subtract column H from column K)