IT-20	3-GR-	ATT-B	(2004)
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Legal name of partnership	
Special New York State identification number	

Schedule B - Nonresident partners qualifying and participating in a city of Yonkers group return (attach as many Schedule B forms as needed). Show any negative amounts with a minus (-) sign. List partners in alphabetical or social security number order.

needed). Show any negative amounts with a minus (-) sign.		List partners in alphabetical or social security number order.			
A Name (in either alphabetical or social security number order)	B Partner's social security number	C Federal net earnings from self employment	Amount of column C allocated to city of Yonkers (see instructions)	E Exclusion amount (see instructions)	
Name (in either alphabetical or social security number order) and address of nonresident partner		self employment	city of Yonkers (see instructions)		
	I	1	I		

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 the appropriate line

on Form IT-203-GR —

Legal name of partnership	
Special New York State identification number	

F City of Yonkers taxable earnings (subtract column E from column D)	G City of Yonkers nonresident earnings tax (multiply column F by .0025)	H City of Yonkers estimated income tax paid/amount paid with Form IT-370	I Balance due (subtract column H from column G)	J Overpayment (subtract column G from column H)	Cother group returns (see instructions)