

Legal name of partnership	▼ Special NY State identification number
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Schedule B — Nonresident partners qualifying and participating in a 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.

A	B	C	D	E
Name (in either alphabetical or social security number order) and address of nonresident partner	Partner's social security number	Federal net earnings from self employment	Amount of column C allocated to Yonkers (see instructions)	Exclusion amount (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. Attach all Forms IT-203-GR-ATT-B to Form IT-203-GR.)
 Enter on the appropriate line on Form IT-203-GR _____ →

Please file this original scannable attachment with the Tax Department.



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F Yonkers taxable earnings <i>(subtract column E from column D)</i>	G Yonkers nonresident earnings tax <i>(multiply column F by .005)</i>	H Yonkers estimated income tax paid/amount paid with Form IT-370	I Balance due <i>(subtract column H from column G)</i>	J Overpayment <i>(subtract column G from column H)</i>	K Other group returns <i>(see instructions)</i>

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