



Group Return for Nonresident Partners

IT-203-GR

For calendar year 2008 or fiscal year beginning and ending

Print or type	Read the instructions, Form IT-203-GR-I, before completing this return.			▼ Special NYS identification number <input type="text"/>
	Legal name			▼ Employer identification number <input type="text"/>
	Trade name of business if different from legal name above			Principal business activity <input type="text"/>
	Address (number and street or rural route)			Date business started <input type="text"/>
	City, village, or post office	State	ZIP code	

This form must be completed by a partnership that elects to file a group New York State or Yonkers return for nonresident partners. All requirements stated in the instructions must be met in order to file a group return.

This group return is being filed for the following tax(es): New York State income tax Yonkers nonresident earnings tax

Mark an **X** in the box if final return: Enter date out of existence:

Total number of nonresident partners included in this group return:

You must complete Forms IT-203-GR-ATT-A and IT-203-GR-ATT-B, Schedules A and B, whichever are applicable, before making any entries on lines 1 through 10 below (see instructions). **Attach the applicable schedules to the back of this return.**

1	New York State taxable income (from Schedule A, column H)	<input type="text"/>	<input type="text"/>
2	Yonkers taxable earnings (from Schedule B, column F)	<input type="text"/>	<input type="text"/>
3	New York State tax (from Schedule A, column I)	<input type="text"/>	<input type="text"/>
4	Yonkers nonresident earnings tax (from Schedule B, column G)	<input type="text"/>	<input type="text"/>
5	Total tax (add lines 3 and 4)	<input type="text"/>	<input type="text"/>
6	New York State estimated income tax paid/amount paid with extension Form IT-370 (from Schedule A, column J) ...	<input type="text"/>	<input type="text"/>
7	Yonkers estimated income tax paid/amount paid with Form IT-370 (from Schedule B, column H)	<input type="text"/>	<input type="text"/>
8	Total payments (add lines 6 and 7)	<input type="text"/>	<input type="text"/>
9	Balance due (if line 5 is greater than line 8, subtract line 8 from line 5). Do not send cash; make check or money order payable to NY State Income Tax ; write your special NYS identification number and 2008 IT-203-GR on it.	<input type="text"/>	<input type="text"/>
10	Amount overpaid applied to 2009 estimated income tax (if line 8 is greater than line 5, subtract line 5 from line 8)	<input type="text"/>	<input type="text"/>

▼ Paid preparer's use only ▼	
Preparer's signature ▶	▼ SSN or PTIN: <input type="text"/>
Firm's name (or yours, if self-employed)	● Employer identification number <input type="text"/>
Address	Mark an X if self-employed <input type="checkbox"/> Date <input type="text"/>
Preparer's e-mail address <input type="text"/>	

▼ Group agent information ▼	
Name of group agent ▶ <input type="text"/>	
Title of group agent ● <input type="text"/>	
Signature of group agent <input type="text"/>	
Date	▼ Daytime phone number <input type="text"/>
E-mail address of group agent <input type="text"/>	

Mail your completed return to:
NEW YORK STATE INCOME TAX, W A HARRIMAN CAMPUS, ALBANY NY 12227.

3051080094



Please file this original scannable return with the Tax Department.