Page 1 of 2 IT-203-TM-ATT-A (2019)

| Legal name of team | Special NY State identification number |
| :--- | :--- |

Schedule A - Nonresident members qualifying and participating in a New York State group return (complete as many Schedule A forms as needed)

| A <br> Name (in either alphabetical or Social Security number order) and address of nonresident member | B <br> Member's Social Security number (enter here and in column B2 on page 2) | $\begin{gathered} \text { C } \\ \text { Total duty } \\ \text { days } \\ \text { (see instr.) } \end{gathered}$ | D <br> New York State duty days (see instr.) | E <br> New York State allocation percentage (divide column D by column C) | F Total compensation (see instructions) | G <br> New York State taxable income (multiply column F by column E) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | . 00 |
|  |  |  |  |  | . 00 | $.00$ |
|  |  |  |  |  | $.00$ | $.00$ |
| Totals (If you are filing more than one Schedule A, enter the grand totals from all Schedules A on the last sheet; leave the other total boxes blank. Submit all Forms IT-203-TM-ATT-A with Form IT-203-TM.) Enter on the appropriate line on Form IT-203-TM |  |  |  |  |  | . 00 |


| Legal name of team | Special NY State identification number |
| :--- | :--- |


| B2 <br> Member's Social Security number (same as column B on page 1) | H <br> New York State tax (multiply column G by .0882) | New York State tax withheld (see instructions) | New York State estimated income tax paid/amount paid with Form IT-370 | K <br> Total payments (add columns I and J) | Balance due (subtract column K from column H) | M <br> Overpayment (subtract column H from column K) | N <br> Other group returns (see instructions) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 | . 00 | . 00 | . 00 |  |
|  | . 00 | . 00 | . 00 |  |  |  |  |

