

Department of Taxation and Finance

, IT-203-B

Nonresident and Part-Year Resident Income Allocation And College Tuition Itemized Deduction Worksheet

Name(s) and occupation(s) as shown on Form IT-203	Your social security number

Complete all parts that apply to you; see instructions (Form IT-203-I). Submit this form with your Form IT-203.

Schedule A - Allocation of wage and salary income to New York State

Complete a separate Schedule A for each job for which your wage and salary income is subject to allocation.

An additional Schedule A section is provided on the back of this form. If you are required to complete more than one Schedule A, total the amounts from line p on all schedules and include this total on Form IT-203, line 1, in the *New York State amount* column.

Do not use this schedule for income based on the volume of business transacted. See the Schedule A instructions if:

- · You had more than one job;
- · You had a job for only part of the year; or
- You and your spouse each had a job that requires allocation.

	ou and your spouse each had a job that requires allo	outon.			
1a	Total days (see instructions)			1a	
	1b Saturdays and Sundays (not	t worked)	1t)	
	dava baabudad				
				l	
	in line 1a: 1e Vacation				
	1f Other nonworking days		1	f	
1g	Total nonworking days (add lines 1b through 1f)			19	
1h	Total days worked in year at this job (subtract line 1g f	from line 1a)	<u></u>	1h	
1i	Total days included in line 1h worked outside New Y	ork State	1	i	
1j	Enter number of days worked at home included in lin	ne 1i amount	1	j	
1k	Subtract line 1j from line 1i			1k	
11	Days worked in New York State (subtract line 1k from I	line 1h)		11	
1m	Enter number of days from line 1h above			1m	
1n	1n Divide line 1I by line 1m; round the result to the fourth decimal place			1n	
10	Wages, salaries, tips, etc. (to be allocated)		10		. 00
1р	New York State allocated wage and salary income (multiply line 1n by line 1o)	1p		.00
Inc	ude the line 1p amount on Form IT-203, line 1, in the	ne New York State amount column			
	ade the line ip unloant on Form II-200, line i, in the	to New York State amount column.			
Sc	nedule B – Living quarters maintained in Nev	v York State by a nonresident			
Mai	rk an X in the box if NYS living quarters were maintain	ned for you or by you for the entire tax year			
If yo	ou or your spouse maintained living quarters in NYS of	during any part of the year, give address(es) below. Sub	mit additional	
she	ets if necessary. For column E, mark an X in the bo	ox if the living quarters are still maintaine	ed for or by	you.	
	A – Street address	B – City, village, or post office	С	D – ZIP code	E
			NY		
			141		\dashv \vdash
			NY		
			NY		
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			NY		
	er the number of days spent in New York State in this sidered a day spent in New York State.	tax year Any part of a	day spent ir	New York State	e is



IT-203-B (2017) (back) Enter your social security number

Scl	hedule C – College tuition itemized	deduction wo	rksheet (See	the instructions	for Schedule C	.)	
1	Are you claimed as a dependent on anoth	ner taxnaver's N	ew York State t	ay return for thi	s tax vear?	1 Yes	s No F
•					stax year:	1 103	,
	 If Yes, stop; you do not qualify for the college tuition itemized deduction. If No, continue. Complete lines A through H below for each eligible student for whom you paid qualified 						
	college tuition expenses. Use additiona				you paid quai		
		1 – Stu	udent 1	2 – St	udent 2	3 – 9	Student 3
Δ	Eligible student's name						
	Eligible student's social security						
В	number (SSN)						
	Is the student claimed as a dependent						
С	on your NYS return? (see instructions)	Yes	No L	Yes	No L	Yes	No
D	EIN of college or university (see instr.)						
ט	EIN of college or university (see instr.)						
Е	Name of college or university (see instr.)						
	Were expenses for undergraduate						
F	tuition? (see instructions)	Yes	No	Yes	No	Yes	No
_	Amount of qualified college tuition						
G	expenses (see instructions)		.00		.00		.00
н	Enter the lesser of line G or 10,000		.00		.00		.00
	.,		.00		.00		.00
2	College tuition itemized deduction (add I	ine H, columns 1,	2, and 3; include a	amounts from any	additional sheets)		
	Also enter this amount on your itemize	d deduction sch	edule		·······	2	.00
				<u> </u>			
Scl	hedule A – Allocation of wage and s	salary income	to New York	State			
2a	Total days (see instructions)					····· <u>·</u> ·····	2a
	Nonworking 2b Saturdays and S	undays (not wor	ked)			2b	
	days included	,					
	in line 2a:						_
	2e Vacation					2e	\dashv
2a	Total nonworking days (add lines 2b through	•					2g
	Total days worked in year at this job (sub						
2i	Total days included in line 2h worked out	side New York	State				
-	Enter number of days worked at home in						
	Subtract line 2j from line 2i						
	Days worked in New York State (subtract						_
£111	Enter number of days from line 2h above	,			• • • • • • • • • • • • • • • • • • • •		2m
2n	Divide line 2I by line 2m; round the result	to the fourth de	ecimal place			2n	
	-		-				
20	Wages, salaries, tips, etc. (to be allocate	d)			20		.00
٥	New York Otata allocated was as a finite		anto tion of Co. 1. "	0-1	on.		
2p	New York State allocated wage and salar	ry income (<i>multi</i> j	piy line 2n by line	20)	2p		.00

Include the line 2p amount on Form IT-203, line 1, in the New York State amount column.

