Legal name of S corporation	Special NY State identification number

Nonresident shareholders qualifying and participating in New York State group return (use as many Forms IT-203-S-ATT as needed). Show negative amounts with a minus (-) sign. List shareholders in alphabetical or social security number order.

	A B C D E			
Name and address of nonresident shareholder	Shareholder's social security number	Shareholder's pro rata share of federal income (see instructions)	Amount of column C allocated to New York State (see instructions)	Shareholder's pro rata share of federal S corporation deductions (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

Legal name of S corporation	Special NY State identification number

Amount of column E allocated to New York State (see instructions)	Q Net amount of New York additions and subtractions allocated to New York State (see instructions)	H New York taxable income (subtract column F from column D and add or subtract column G)	New York State tax (multiply column H by .0882)	New York State estimated income tax paid/amount paid with Form IT-370
.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
sheet; leave the other t Forms IT-203-S-ATT wi	rom all of them on only one otal boxes blank. Submit all ith Form IT-203-S.)			
Enter on the appropriate line	on Form IT-203-S	.00	.00	.00

Legal name of S corporation Special NY State identification number

K		
Balance due (subtract column J from column I)	Overpayment (subtract column I from column J)	M 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	

