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Legal name of team	Special NY State identification number

Schedule B - Nonresident members qualifying and participating in a Yonkers group return (complete as many Schedule B forms as needed)

A Name (in either alphabetical or social security number order) and address of nonresident member	B Member's social security number	Total duty days (see instructions)	Yonkers duty days (see instructions)	E Yonkers allocation percentage (divide column D by column C)	F Total wages (see instructions)
					.00
					.00
					.00
					.00
					.00
					.00
					.00
					00
					.00
					.00
					.00
					.00

Totals (If you are filing more than one Schedule B, enter the grand totals from all Schedules B on the last sheet; leave the other total boxes blank. Submit all Forms IT-203-TM-ATT-B with Form IT-203-TM.)

Enter on the appropriate line on Form IT-203-TM



Legal name of team Special NY State identification number

G Yonkers taxable wages (multiply column F by column E)	H Yonkers nonresident earnings tax (multiply column G by .005)	Yonkers tax withheld (see instructions)	Yonkers estimated income tax paid/amount paid with Form IT-370	K Total payments (add columns I and J)	L Balance due (subtract column K from column H)	Overpayment (subtract column H from column K)
.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
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.00.	.00	.00	.00.	.00	.00	.00
	100	100	100	.00	.00	.00
.00	.00	.00.	.00			