



# Multi-Year Allocation Form

Name as shown on Form IT-203	Your social security number	Tax year

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

### Schedule A – Current year allocation of income attributable to past employment in New York State (for example, termination agreement or covenant not to compete)

Complete a separate Schedule A for each amount of income subject to allocation. An additional Schedule A section is provided below. If you are required to complete more than one Schedule A, total the amounts from lines 1d and 2d on all schedules and include this total on Form IT-203, line 1, in the *New York State amount* column.

**Use this form for multi-year allocation only.** To allocate the regular wage and salary income from your current job, use Form IT-203-B, *Nonresident and Part-Year Resident Income Allocation and College Tuition Itemized Deduction Worksheet*, and its instructions.

<b>Allocation 1</b>	Period this allocation covers (mmddyyyy)		Type of income you are allocating
		to	

Tax year	A – Total compensation	B – New York amounts
	.00	.00
	.00	.00
	.00	.00
	.00	.00
	.00	.00
<b>1a Totals</b> .....	.00	.00

<b>1b</b> Divide line 1a, column B, by line 1a, column A (carry to four decimals) .....	<b>1b</b>	
<b>1c</b> Current year income to be allocated .....	<b>1c</b>	.00
<b>1d</b> Multiply line 1c by the decimal on line 1b; include this amount on Form IT-203, line 1, in the <i>New York State amount</i> column .....	<b>1d</b>	.00

<b>Allocation 2</b>	Period this allocation covers (mmddyyyy)		Type of income you are allocating
		to	

Tax year	A – Total compensation	B – New York amounts
	.00	.00
	.00	.00
	.00	.00
	.00	.00
	.00	.00
<b>2a Totals</b> .....	.00	.00

<b>2b</b> Divide line 2a, column B, by line 2a, column A (carry to four decimals) .....	<b>2b</b>	
<b>2c</b> Current year income to be allocated .....	<b>2c</b>	.00
<b>2d</b> Multiply line 2c by the decimal on line 2b; include this amount on Form IT-203, line 1, in the <i>New York State amount</i> column .....	<b>2d</b>	.00



Your social security number

**Schedule B – Stock option, restricted stock, or stock appreciation rights allocation** (see instructions)

**New York State nonresidents and part-year residents:** If you received compensation from stock options, restricted stock, or stock appreciation rights and you performed services within New York State, use this schedule to calculate your New York State compensation attributable to those items, if the calculation requires an allocation period that is different than the period used on Form IT-203-B.

Complete a separate Schedule B for each option, stock, or right you were granted.

Description of stock	
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Use the mmddyyyy format when entering dates.

Grant date	Vest date	Exercise date	Allocation period (see instructions)
			to

Mark an **X** in one box for  
 Statutory  Non-statutory  Restricted stock  Appreciation right

3	Enter the applicable column A amount from <i>Schedule B Table</i> (see instructions) .....	3		.00
4	Enter the applicable column B amount from <i>Schedule B Table</i> (see instructions) .....	4		.00
5	Compensation to be allocated (subtract line 4 from line 3) .....	5		.00

6 Total days in allocation period ..... **6**

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7	Saturdays and Sundays (not worked) .....	7	
8	Holidays (not worked) .....	8	
9	Sick leave .....	9	
10	Vacation .....	10	
11	Other nonworking days .....	11	

12 Total nonworking days (add lines 7 through 11) ..... **12**

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13 Total days worked in allocation period at this job (subtract line 12 from line 6) **13**

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14 Total days included in line 13 worked outside New York State ..... **14**

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15 Number of days worked at home included in line 14..... **15**

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16 Subtract line 15 from line 14 ..... **16**

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17 Days worked in New York State (subtract line 16 from line 13) ..... **17**

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18 Enter number of days from line 13 above ..... **18**

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19 Divide line 17 by line 18; round the result to the fourth decimal place ..... **19**

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20 Multiply line 19 by line 5 ..... **20**

	.00
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Include the line 20 amount on the appropriate line of Form IT-203 in the **New York State amount** column.

